



# YOUR 2020 BENEFITS GUIDE

January 1—December 31, 2020

*Live your best life!*



# Our Core Values

Our core values guide us in how we treat our residents and patients, their families, our business partners and each other.

## CAPLICO

### Customer Second

In order for our patients to receive the care they deserve, we put our employees first.

---

### Accountability

We hold ourselves to the highest standards of care and professionalism.

---

### Passion for Learning

Ongoing training and innovation are a part of our DNA.

---

### Love One Another

We strive to see and treat each other as people whose interests matter as much as our own.

---

### Intelligent Risk Taking

We trust your judgment. Be innovative. Be entrepreneurial.

---

### Celebration

We love to celebrate success and make work fun.

---

### Ownership

We reward and support our employees who treat this organization as if they owned it.

---

**Disclaimer:** This guide presents an overview of the benefits program offered on behalf of your employer and is not intended to be all inclusive, nor is it to be used as a summary plan description. It does not include all plan rules and details and is not considered a certificate of coverage. The terms of your benefits are governed by legal plan documents, including insurance contracts. If there are any differences between this guide and the legal plan documents and insurance contracts, the legal plan documents and insurance contracts are the final authority. We reserve the right to change or modify its benefit programs as appropriate without advanced notification. Ensign Services, Inc. is the plan administrator of the Ensign Services, Inc. Comprehensive Health and Welfare Benefit Plan.



# Contents

## Important Benefit Contacts

Contact Information for Our Carriers . . . . . 2

## Resources

To Help You Learn About Your Benefits  
and Enroll Online . . . . . 3

## Benefit Basics

About Our Benefits . . . . . 5  
Eligibility . . . . . 5  
When Coverage Begins . . . . . 6  
Making Changes to Your Coverage  
During the Year . . . . . 6  
When Coverage Ends . . . . . 6  
Enrollment . . . . . 7

## Health

Medical . . . . . 8  

- About Collective Health . . . . . 9
- 2020 Medical Plans At-a-Glance . . . . . 10
- Prescription Drugs . . . . . 12
- Health Savings Account . . . . . 13
- Grand Rounds . . . . . 14
- Telemedicine . . . . . 15
- Video or Phone Appointments (Kaiser) . . . . . 15

 Dental . . . . . 16  
 Vision . . . . . 17

## Financial Protection

Flexible Spending Accounts (FSAs) . . . . . 18  

- Health Care FSA . . . . . 18
- Limited Purpose FSA . . . . . 18
- Dependent Care FSA . . . . . 18

 Transportation/Commuter Benefit Program . . . . . 20  
 Life and AD&D Insurance . . . . . 20  

- Basic Life and AD&D Insurance . . . . . 20
- Supplemental Life Insurance . . . . . 21
- Supplemental AD&D Insurance . . . . . 22

 Voluntary Long-term Disability Insurance (LTD) . . . . . 22  
 Voluntary Benefits . . . . . 23  

- Voluntary Short-term Disability Insurance (STD) . . . . . 23
- Voluntary Hospital Indemnity Insurance . . . . . 23
- Voluntary Group Accident Insurance . . . . . 23
- Voluntary Critical Illness Insurance . . . . . 23
- MetLife Auto and Home Insurance . . . . . 23

## Work-Life

Employee Assistance Program (EAP) . . . . . 24  
 Intalere Marketplace . . . . . 24  
 TicketsatWork . . . . . 24  
 Tuition Reimbursement Program . . . . . 25  
 Purchasing Power . . . . . 25  
 Child Care Benefit Program . . . . . 25  
 The Emergency Fund . . . . . 26

## Retirement

401(k) Savings Plan . . . . . 27

# Important Benefits Contacts

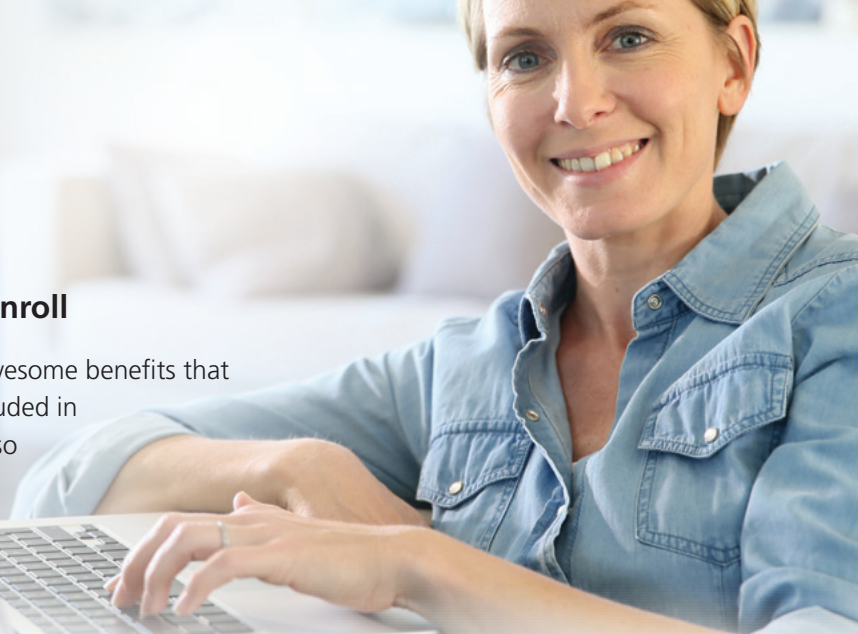
## Contact Information for Our Carriers

Health	Policy/Group Number	Phone/Website
<b>Collective Health Medical</b> (EPO 500, PPO 1500 with HSA, EPO 2000 with HSA, Copay 5000, PPO 5000 with HSA)		<a href="http://join.collectivehealth.com/ensign">http://join.collectivehealth.com/ensign</a> 833-743-3221
<b>Teladoc</b> Telemedicine	n/a	<a href="http://www.teladoc.com">www.teladoc.com</a> 800-835-2362
<b>Grand Rounds</b> Expert Second Opinions & Recommendations	n/a	<a href="http://www.grandrounds.com/ensign">www.grandrounds.com/ensign</a> 855-889-7243
<b>Kaiser Permanente Medical</b> (Kaiser No. CA HMO 2000 with HSA) (Kaiser So. CA HMO 2000 with HSA)	No. CA: #39044 So. CA: #225775	<a href="http://www.kp.org">www.kp.org</a> 800-464-4000
<b>SIMNSA Health Plan Medical</b> (SIMNSA Baja CA Premier Access HMO) San Diego County Employees Only		<a href="http://www.simnsa.com">www.simnsa.com</a> 619-407-4082
<b>HealthEquity</b> Health Savings Accounts	n/a	<a href="http://www.healthequity.com">www.healthequity.com</a> 866-346-5800
<b>Delta Dental</b> (Dental PPO Plan)	Delta Dental: #19192	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a> 800-765-6003
<b>Cigna Dental</b> (Dental PPO Plan, Cigna Dental DHMO)	Cigna: #2499682	<a href="http://www.cigna.com">www.cigna.com</a> 800-244-6224
<b>Vision Service Plan</b> Vision	#30019528	<a href="http://www.vsp.com">www.vsp.com</a> 800-877-7195
<b>Financial Protection</b>		
<b>TRI-AD</b> Flexible Spending Accounts (Health Care FSA, Limited Purpose FSA, Dependent Care FSA)	n/a	<a href="http://www.TRI-AD.com">www.TRI-AD.com</a> Email: <a href="mailto:flexmail@tri-ad.com">flexmail@tri-ad.com</a>
<b>TRI-AD</b> Transportation/Commuter Benefits Program	n/a	<a href="http://www.TRI-AD.com">www.TRI-AD.com</a> 888-844-1372 760-233-4742 FAX Email: <a href="mailto:commute@tri-ad.com">commute@tri-ad.com</a>
<b>Unum</b> Basic Group Term Life and Accidental Death & Disability	Policy #415402	800-421-0344
<b>Unum</b> Supplemental Group Term Life and Accidental Death & Disability	Policy #415403	800-421-0344
<b>Unum</b> Voluntary Plans Accident, Critical Illness, Short Term Disability, Long-Term Disability, Hospital Indemnity	Accident, Critical Illness, Short Term Disability, Long-Term Disability: #145912	<a href="http://www.unum.com">www.unum.com</a> 800-635-5597 800-633-7479 (LTD)
<b>MetLife</b> Auto and Home Insurance	n/a	<a href="http://www.metlife.com">www.metlife.com</a> 800-GET-MET8 (800-438-6388)
<b>Work-Life</b>		
<b>Health Advocate EAP</b> Employee Assistance Program	n/a	<a href="http://www.unum.com/lifebalance">www.unum.com/lifebalance</a> 800-854-1446
<b>Scholarship Management Services</b> Tuition Reimbursement	n/a	Forms: <a href="https://tr.scholarshipamerica.org/ENSIGN">https://tr.scholarshipamerica.org/ENSIGN</a> 800-537-4180
<b>TicketsatWork</b> Discounted Entertainment Tickets	n/a	<a href="http://www.TicketsatWork.com">www.TicketsatWork.com</a> Company Code: Ensign 800-331-6483 866-273-5825
<b>Intalere Marketplace</b>	n/a	<a href="https://amerinet.corporateperks.com">https://amerinet.corporateperks.com</a>
<b>Purchasing Power</b>	Group code: ENS2293	<a href="http://www.ENSIGN.PurchasingPower.com">www.ENSIGN.PurchasingPower.com</a> 866-670-3479
<b>KinderCare</b> Child Care Benefit Program	n/a	<a href="http://www.careiseverywhere.com">www.careiseverywhere.com</a> 877-914-7683
<b>Retirement</b>		
<b>Fidelity</b> 401(k) Savings Plan	n/a	<a href="http://www.netbenefits.com">www.netbenefits.com</a> 800-294-4015

# Resources

## To Help You Learn About Your Benefits and Enroll

Your Ensign-affiliated employer invests in you with some awesome benefits that help you live your best life. An overview of each plan is included in this guide, along with links to valuable tools and resources so you can take a deeper dive and find more details about all of the benefits available. We are focused on helping you play an active role in understanding your options and costs, and what to expect after you enroll.



## Say Hello to ALEX®

ALEX is our interactive benefits counselor who will explain your benefits in simple language in a fun and entertaining way. ALEX can help you choose the benefits and coverage options that will meet your needs and your budget.



## Three Important Things to Know About the ALEX Tool

1. It's personalized, so you can see which plans make the most sense for you.
2. Its confidential, so you get the guidance you need without revealing all of your fascinating secrets.
3. **IMPORTANT: ALEX is not the online enrollment system. Once you have reviewed your benefits with ALEX, you must enter your elections into Workday to complete your enrollment.**



To get started using ALEX, go to <https://myalex.com/ensign/2020>

## Ensign Benefits Website

The Ensign Benefits website is your go-to source for information about Ensign benefit plans. Start with high levels overviews of each benefit and drill down to the details including Summary Plan Descriptions and Insurance Certificates. You can also link to Workday when you're ready to enroll and to carrier websites.

The website is easy to navigate on your computer, tablet or smartphone.



Go to [www.ensignbenefits.com](http://www.ensignbenefits.com)

## Resources (continued)

### Complete Your Benefits Enrollment in Workday

Go to [www.ensignbenefits.com](http://www.ensignbenefits.com) and click on the Benefits Enrolment link at the top of any page to sign in to Workday.

- Enter your **username** and **password** and click **Sign In**. Your username is your Workday employee ID printed on your paycheck stub.
- Once you are logged in to Workday, go to your Inbox and select Benefit Change – New Hire, Benefit Change – Employment Status Change or Open Enrollment task and proceed with your enrollment.



### Need help signing in to Workday?

Call 949-540-1200 or email [support@ensignservices.net](mailto:support@ensignservices.net) to reset your password.

### Ensign Benefits Call Center

Call the Ensign Benefits Call Center when you have questions about your benefits and can't find the answers in the resources above. You can also call to enroll in your benefits if you don't have access to a computer connected to the internet.



Call 877-352-8104 weekdays 8 AM to 5 PM PT or email [support@ensignservices.net](mailto:support@ensignservices.net).

### Sign up for Text Message Alerts

Text message alerts provide reminders about important benefits program deadlines and events. You can sign up for text message alerts at any time and can also cancel at any time.

Ensign Services does not charge for text message alerts sent to you. You may, however, incur charges from your wireless carrier to send or receive text messages. Check with your wireless carrier for possible charges.



To sign up for text message alerts, text **ENSIGNBENE1** to **31996**.

To stop receiving text message alerts, text **STOP** to **31996**.  
For more information, text **HELP** to **31996**.

# Benefit Basics

## About Our Benefits

Ensign-affiliated companies provide competitive benefits that will enhance the quality of your life and provide the support you need to achieve your personal and professional goals. Since everyone's situation is unique and may change as your life changes, your Ensign Benefits give you the flexibility you need to choose the plans and coverage options that help you *live your best life*.

## Eligibility

### Full-time and Part-time Employee Working 32 or More Hours per Week

You are eligible for all health and insurance benefits if you work at least 32 hours per week as a part-time or full-time employee of an Ensign-affiliated company and have completed your benefits waiting period. Your eligible dependents may also be enrolled for coverage under the health care and insurance benefits. You can also purchase additional coverage through the voluntary plans.

### Part-time Employee Working 30 or 31 Hours per Week

You are eligible for medical and the Health Savings Account (HSA) if you work 30 or 31 hours as a part-time employee of an Ensign-affiliated company and have completed your benefits waiting period. Your eligible dependents may also be enrolled in these coverages.

## Eligible Dependents

You will be required to provide proof of dependent eligibility at the time of enrollment. Eligible dependents for health care coverage generally include your:

- **Legal spouse (lawfully wedded spouse):** If your spouse is eligible for group medical coverage outside of our plan (through their employer), you will pay a \$125 surcharge per pay period if you choose to cover your spouse as your dependent on an Ensign Services plan.
- **Children:** Under age 26, and dependent children of any age who are not able to support themselves due to a physical or mental disability and who became disabled before age 26. An eligible child includes your natural child, adopted child, step child or child for whom you have been appointed legal guardianship by a court of law. **Newborns must be enrolled within 30 days of their date of birth to be covered.**



## When Coverage Begins

Coverage for most benefits begins as follows, provided you enroll by the deadline date described below.:

- **Department heads, nurses, licensed therapists, Service Center/Cornet employees:** Your benefits are effective the first day of the month following your date of hire provided you complete enrollment within 30 days following your date of hire. For example, if your date of hire is April 5, your benefits will be effective May 1, provided you enroll by May 5. If you have a status change and become benefit eligible, your benefits are effective the first day of the month following your status change.
- **All others:** Your benefits are effective the first day of the month following 60 days of employment provided you complete enrollment within 30 days following your date of hire. For example, if your date of hire is May 15, your benefits will be effective August 1 provided you enroll by June 14. If you have a status change and become benefit eligible, your benefits are effective the first day of the month following your status change.



## Making Changes to Your Coverage During the Year

Consistent with IRS rules, you may make changes during the year only if you have a change in status or qualifying life event. In most cases, the enrollment decisions you make will remain effective from January 1 through December 31, 2020. If you are a 2020 new hire, the enrollment decisions you make will remain in effective from your benefits eligibility date through December 31, 2020. However, you may change some of your elections during the year if you have a qualifying change in status, provided the coverage change is consistent with your status change. Changes in status include:

- Birth or adoption of a child
- Marriage
- Divorce, legal separation
- Death of a covered dependent
- Change in employment status for you or your spouse that results in a gain or loss of benefits
- Change in your dependent's eligibility for benefits
- Issuance of a qualified medical child support order

You must make any coverage changes within 30 days of the change in status, except in the case of a birth or adoption of a child, in which case you will have 60 days to change your coverage.

If you don't make the change within 31 days of the change in status, you may not make the change until the next annual Open Enrollment period. You may enroll in or change your benefit elections for the new plan year which begins January 1.

## When Coverage Ends

Most benefits coverage will end on the last day of the month in which you terminate employment or you become ineligible for benefits. Flexible Spending Account participation as well as life insurance and disability coverage end on the last day of full-time employment.





## Enroll in Your 2020 Benefits in Workday

Go to [www.ensignbenefits.com](http://www.ensignbenefits.com) and click on the Benefits Enrollment link at the top of any page to sign in to Workday.

- Enter your **username** and **password** and click **Sign In**. Your username is your Workday employee ID printed on your paycheck stub.
- Once you are logged in to Workday, go to your Workday inbox or click on Benefit Change – New Hire, Benefit Change – Employment Status Change or Open Enrollment.
- If you are adding new dependents, gather eligibility verification documents to provide proof of dependent eligibility and submit in Workday by **Nov. 15, 2019** (for 2020 Open Enrollment) or within 30 days following your hire date or date of status change to benefit eligible to complete your benefits enrollment in Workday.

## Enrollment

### Enrollment Deadline

You **MUST** enroll during Open Enrollment to have medical, dental and/or vision coverage in 2020. The deadline to enroll is **November 1, 2019**.

Outside of Open Enrollment, you have until 30 days following your hire date or date of status change to benefit eligible to complete your benefits enrollment in Workday, which includes submitting proof of dependent eligibility, such as a marriage license or birth certificate. You will need to upload these documents directly into Workday or email the documents to [benefits@ensignservices.net](mailto:benefits@ensignservices.net) before your enrollment deadline.

### Download the Workday Mobile App

- Download the **Workday mobile app** on your tablet or phone from the App Store or Google Play.
- Once you have it downloaded, enter **Ensign** as the code and then sign in with your normal **Workday login** (employee ID is your User ID).
- Click on **the Benefits Worklet** or go to your Inbox to access Benefit enrollment.
- **Make sure to submit your elections** in order to view your completed enrollment.

## Optional Now vs. Optional Anytime Benefits

Benefits that are “**optional now**” means if you coverage under these benefits, you must do so in Workday within 30 days of your date of hire or date of status change to benefit eligible. Benefits that are “**optional anytime**” means you can enroll in these benefits anytime during the year through the carrier or by calling the Ensign Benefits Call Center at **877-352-8104**.

### OPTIONAL NOW Enroll in Workday

If you are eligible, you must enroll for these benefits within 30 days of your date of hire.

- Medical
- Dental
- Vision
- Flexible Spending Accounts
- Supplemental Life
- Supplemental AD&D
- Voluntary Long-term Disability

### OPTIONAL ANYTIME Enroll through carrier or call the Ensign Benefits Call Center

If you are eligible, you can elect or change these benefits any time.

- Health Savings Account (HSA)\*
- Voluntary Short-term Disability
- Voluntary Group Accident
- Voluntary Critical Illness
- Voluntary Hospital Indemnity
- 401(k) Savings Plan
- Auto and Home Insurance
- Transportation Benefit Program\*

\* Optional anytime, enrolled in Workday.

# Health

## Medical

Our medical plans are designed to give you the options you need to manage your health the way you want. You can choose from five medical plans through Collective Health. If you live in California, you also have an HMO option through Kaiser if you live in a Kaiser Permanente service area. If you live in San Diego County, the SIMNSA Baja CA Premier Access HMO may also be an option for you.

All of the medical plans include medical and prescription drug coverage. The plans managed by Collective Health use a national provider network through Blue Shield.

### Need help choosing the best medical plan?



Talk to ALEX for a recommendation. Go to <https://www.myalex.com/ensign/2020>.

<b>EPO 500</b>	This plan has a lower deductible and exclusively covers you for in-network doctors and facilities. Except in the case of an emergency, you'll pay the full price for any out-of-network care.
<b>PPO 1500 with HSA</b>	You can see both in-network and out-of-network doctors without a referral, but keep in mind staying in-network for care will almost always be cheaper. To help with your share of costs, this plan comes with a Health Savings Account (HSA) that you can contribute to.
<b>EPO 2000 with HSA</b>	This plan exclusively covers you for in-network doctors and facilities. Except in the case of an emergency, you'll pay the full price for any out-of-network care. To help with your share of costs, this plan gives you the option to participate in a Health Savings Account (HSA).
<b>Copay 5000</b>	Unlike the PPO 5000, this is a copay plan. This means that you'll usually pay a fixed amount when you see in-network providers, and the plan will pay for the rest. You can see both in-network and out-of-network doctors without a referral, but keep in mind staying in-network for care will almost always be cheaper.
<b>PPO 5000 with HSA</b>	You can see both in-network and out-of-network doctors without a referral, but keep in mind staying in-network for care will almost always be cheaper. To help with your share of costs, this plan gives you the option to participate in a Health Savings Account (HSA).
<b>Kaiser HMO 2000 with HSA (CA employees only)</b>	You can select this plan if you live in California in a Kaiser Permanente service area. This plan exclusively covers you when you use Kaiser Permanente doctors and facilities. Except in the case of an emergency, you'll pay the full price for any care you receive from a non-Kaiser doctor or facility. To help with your share of costs, this plan gives you the option to participate in a Health Savings Account (HSA).
<b>SIMNSA Baja CA Premier Access HMO (San Diego County employees only)</b>	<p>You can select this plan if you live in San Diego County. This plan exclusively covers you when you access SIMNSA Premier Access HMO providers. The plan covers many health services at 100%. Some services require a small copayment. You are not required to choose a primary care physician to manage your care. Except in the case of an emergency, you'll pay the full price for any care you receive from a non-SIMNSA doctor or facility.</p> <p>To search for a SIMNSA provider, visit <a href="https://www.simnsaee.net/Expediente2010/CitasOnline/proveedores/frm_proveedores.aspx">https://www.simnsaee.net/Expediente2010/CitasOnline/proveedores/frm_proveedores.aspx</a>.</p>

## About Collective Health

We have partnered with Collective Health to simplify our medical benefits and support all of your needs. Collective Health manages the EPO 500, PPO 1500 with HSA, EPO 2000 with HSA, Copay 5000 and the PPO 5000 with HSA.

Collective Health's professional team of Member Advocates provide all the guidance you need to choose and use your benefits with confidence, submit claims, find the right doctor and more. If you are enrolled in one of the medical plans listed above that is managed by Collective Health, you can access and manage your health benefits information through an easy-to-use member portal or with the Collective Health mobile app while you're on the go.

### Collective Health

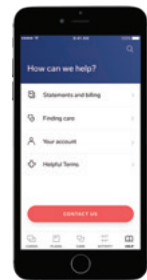
**Online:** <http://join.collectivehealth.com/ensign>

**Email:** [help@collectivehealth.com](mailto:help@collectivehealth.com)

**Phone:** 833-743-3221 (M-F, 6 a.m. – 6 p.m. PST)

**Chat:** <http://my.collectivehealth.com> and log in

**Mobile App:** Search for Collective Health on the App Store or on Google Play



### Hello, healthier you. Meet personalized navigation.

Now it's easier to find and manage care. You might start to see spotlighted benefits and reminders to schedule appointments when you log-in to Collective Health — it's all personalized navigation at work.

## 2020 Medical Plans At-a-Glance

Plan Feature	EPO 500	PPO 1500 with HSA	EPO 2000 with HSA
<b>Calendar Year Deductible</b> Employee Only / Family	\$500 / \$1,000 <sup>1</sup>	\$1,500 <sup>5</sup> / \$3,000 <sup>1,5</sup>	\$2,000 / \$4,000 <sup>1</sup>
<b>Coinsurance (You Pay)</b>	20%	20%	20%
<b>Calendar Year Out-of-Pocket Maximum</b> Employee Only / Family	\$2,000 / \$4,000	\$5,000 <sup>6</sup> / \$10,000 <sup>6</sup>	\$6,000 / \$12,000
<b>Health Savings Account (HSA)</b>	N/A	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2020 are \$3,550 (employee only) and \$7,100 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2020.	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2020 are \$3,550 (employee only) and \$7,100 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2020.
	NETWORK ONLY YOU PAY	IN-NETWORK YOU PAY	NETWORK ONLY YOU PAY
<b>Preventive Care</b>	Covered in full <sup>3</sup>	Covered in full <sup>3</sup>	Covered in full <sup>3</sup>
<b>Telemedicine</b> Doctor Visit Behavioral Health Visit	\$20 copay \$40 copay	10% <sup>2</sup> (Cost is \$40 per visit) 20% <sup>2</sup> (Cost is \$80 per visit)	10% <sup>2</sup> (Cost is \$40 per visit) 20% <sup>2</sup> (Cost is \$80 per visit)
<b>PCP Office Visit</b>	\$30 copay	20% <sup>2</sup>	20% <sup>2</sup>
<b>Specialist Office Visit</b>	\$50 copay	20% <sup>2</sup>	20% <sup>2</sup>
<b>Urgent Care</b>	\$50 copay	20% <sup>2</sup>	20% <sup>2</sup>
<b>Emergency Room</b>	\$500 copay <sup>2,7</sup> , then you pay 30%	\$500 copay <sup>2,7</sup> then you pay 30%	\$500 copay <sup>2,7</sup> then you pay 30%
<b>Diagnostic Testing</b>	20% <sup>2</sup>	20% <sup>2</sup>	20% <sup>2</sup>
<b>Outpatient X-ray and Lab</b>	20% <sup>2</sup>	20% <sup>2</sup>	20% <sup>2</sup>
<b>Hospitalization</b> Inpatient Semi-Private Room Inpatient Physician	\$500 copay <sup>2</sup> , then you pay 20% 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>
<b>Outpatient Treatment</b> (PT, OT, ST)	\$250 copay <sup>2</sup> , then you pay 20%	20% <sup>2</sup>	20% <sup>2</sup>
<b>Mental Health/Substance Abuse</b> Inpatient Outpatient	20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>
<b>Pharmacy Retail</b> Specified Preventive Drugs <sup>4</sup> Generic Brand Formulary Brand Non-Formulary Specialty Drugs	<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>3</sup> \$25 copay <sup>3</sup> \$40 copay <sup>3</sup> 20% <sup>3,8</sup> up to \$125	<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>2</sup> \$25 copay <sup>2</sup> \$40 copay <sup>2</sup> 20% <sup>2,8</sup> up to \$125	<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>2</sup> \$25 copay <sup>2</sup> \$40 copay <sup>2</sup> 20% <sup>2,8</sup> up to \$125
<b>Pharmacy Mail Service</b> Specified Preventive Drugs <sup>4</sup> Generic Brand Formulary Brand Non-Formulary	<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>3</sup> \$50 copay <sup>3</sup> \$80 copay <sup>3</sup>	<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>2</sup> \$50 copay <sup>2</sup> \$80 copay <sup>2</sup>	<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>2</sup> \$50 copay <sup>2</sup> \$80 copay <sup>2</sup>

1) The family deductible must be met before any person receives benefits.

2) After calendar year deductible.

3) Calendar year deductible waived.

4) As specified in the essential drug list.

5) In-network calendar year deductible is separate from out-of-network calendar year deductible and does not cross accumulate. Refer to the Summary of Benefits and Coverage (SBC) for the plan for information on out-of-network deductible amounts on [www.ensignbenefits.com](http://www.ensignbenefits.com).

	CA Residents		San Diego County Residents
Copay 5000	PPO 5000 with HSA	Kaiser CA HMO 2000 w/ HSA	SIMNSA Baja CA Premier Access HMO
\$5,000 <sup>5</sup> / \$10,000 <sup>1,5</sup>	\$5,000 <sup>5</sup> / \$10,000 <sup>1,5</sup>	\$2,000 / \$4,000 <sup>1</sup>	N/A
20%	20%	20%	None
\$7,000 <sup>6</sup> / \$14,000 <sup>6</sup>	\$6,550 <sup>6</sup> / \$13,100 <sup>6</sup>	\$3,425 / \$6,850	\$6,350 / \$12,700
N/A	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2020 are \$3,550 (employee only) and \$7,100 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2020.	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2020 are \$3,550 (employee only) and \$7,100 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2020.	N/A
IN-NETWORK YOU PAY	IN-NETWORK YOU PAY	NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY
Covered in full <sup>3</sup>	Covered in full <sup>3</sup>	Covered in full <sup>3</sup>	Covered in full
\$25 copay \$50 copay	10% <sup>2</sup> (Cost is \$40 per visit) 20% <sup>2</sup> (Cost is \$80 per visit)	20% <sup>2</sup> N/A	N/A N/A
\$45 copay	20% <sup>2</sup>	20% <sup>2</sup>	\$5 copay
\$75 copay	20% <sup>2</sup>	20% <sup>2</sup>	\$5 copay
\$75 copay	20% <sup>2</sup>	20% <sup>2</sup>	\$25 copay (provider in Mexico) \$50 copay (provider outside Mexico)
\$500 copay <sup>2,7</sup> then you pay 30%	\$500 copay <sup>2,7</sup> then you pay 30%	20% <sup>2</sup>	\$250 copay <sup>7</sup>
20% <sup>2</sup>	20% <sup>2</sup>	20% <sup>2</sup>	Covered in full
20% <sup>2</sup>	20% <sup>2</sup>	20% <sup>2</sup>	Covered in full
20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	Covered in full Covered in full
20% <sup>2</sup>	20% <sup>2</sup>	20% <sup>2</sup>	\$10 copay
20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	20% <sup>2</sup> 20% <sup>2</sup>	Covered in full \$5 copay
<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>2</sup> \$25 copay <sup>2</sup> \$40 copay <sup>2</sup> 20% <sup>2,8</sup> up to \$125	<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>2</sup> \$25 copay <sup>2</sup> \$40 copay <sup>2</sup> 20% <sup>2,8</sup> up to \$125	<b>30-day supply</b> 100% covered <sup>3</sup> \$10 copay <sup>2</sup> \$30 copay <sup>2</sup> N/A 20% <sup>2</sup> up to \$125	<b>30-day supply</b> 100% covered \$5 copay \$5 copay \$5 copay \$5 copay
<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>2</sup> \$50 copay <sup>2</sup> \$80 copay <sup>2</sup>	<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>2</sup> \$50 copay <sup>2</sup> \$80 copay <sup>2</sup>	<b>90-day supply</b> 100% covered <sup>3</sup> \$20 copay <sup>2</sup> \$60 copay <sup>2</sup> N/A	<b>90-day supply</b> N/A N/A N/A N/A

6) In-network calendar year out-of-pocket maximum is separate from out-of-network calendar year out-of-pocket maximum and does not cross accumulate. Refer to the Summary of Benefits and Coverage (SBC) for the plan for information on out-of-network out-of-pocket maximum amounts on [www.ensignbenefits.com](http://www.ensignbenefits.com).

7) Emergency Room copay waived if admitted.

8) May be available at CVS retail pharmacy or Pharmacy Mail Service if authorized. Note that any specialty drug discounts through copay cards or coupons will not apply towards the calendar year deductible our out-of-pocket maximum.

## Prescription Drug Coverage

All of the medical plans include prescription drug coverage.

### Prescription Drugs with a Collective Health Plan

#### EPO 500, PPO 1500, EPO 2000, Copay 5000, PPO 5000

When you enroll in a medical plan administered by Collective Health, you automatically receive prescription drug coverage through CVS/caremark. The CVS/caremark pharmacy network has more than 68,000 pharmacies nationwide, including 9,900 CVS pharmacies plus many national and independent retail pharmacies. The PPO 1500, Copay 5000 and PPO 5000 plans also have out-of-network coverage, but you will save money if you use participating network pharmacies.

**Specified Preventive Drugs:** Certain generic preventive medications (like birth control) are covered at no cost and not subject to annual deductibles provided certain requirements are met.

**Generic Drugs:** Generic drugs have the lowest copays and are considered identical to their brand name equivalents by the FDA in terms of efficacy and safety.

**Brand Formulary:** Drugs on the brand formulary are designated as preferred based on their cost effectiveness and, in some cases, efficacy. If you or your provider choose a brand formulary medication when a generic is available, you'll pay the brand formulary copay plus the difference in cost between the generic and the brand formulary drug.

**Brand Non-Formulary:** Brand name drugs not on the brand formulary have the highest copays. When you fill a prescription, you can ask the pharmacist whether a generic or brand formulary drug of your medication is available. If you or your provider choose a brand non-formulary medication when a generic is available, you'll pay the brand non-formulary copay plus the difference in cost between the generic and the brand non-formulary drug.

**Specialty Drugs:** These are high-cost drugs that typically require special handling or administration. You must obtain specialty drugs through a CVS Specialty pharmacy.



### Save Money with Mail Service for Long-term Medications

You can take advantage of mail service rates for a 90-day supply of medicines you take on a regular basis for chronic conditions such as high blood pressure, asthma, diabetes or high cholesterol.

### Prescription Drugs with the Kaiser CA HMO 2000

When you enroll in the Kaiser CA HMO 2000, you automatically receive prescription drug coverage through Kaiser. Many Kaiser Permanente facilities have pharmacies in the building, so you can go there straight after your appointment. You can refill prescriptions in person, online or by phone.

**Refill in person:** Bring your prescription to a Kaiser pharmacy.

**Online:** Visit [kp.org/rxrefill](https://kp.org/rxrefill) to order your prescription refills online. You will need to register first at [kp.org/registernow](https://kp.org/registernow).

**Phone:** Call the pharmacy refill phone number highlighted on your prescription label. Have your medical record number, prescription number, home telephone number, and credit or debit card information handy when you call.

### Prescription Drugs with the SIMNSA Baja CA Premier Access HMO

When you enroll in the SIMNSA Baja CA Premier Access HMO, you automatically receive prescription drug coverage through SIMNSA Health Plan. Visit the SIMNSA website at [www.simnsa.com](https://www.simnsa.com) for a list of network pharmacies you can use.

# Health Savings Account

If you enroll in the PPO 1500, EPO 2000, PPO 5000, or Kaiser So. CA HMO 2000, you have the option to contribute to a Health Savings Account (HSA). The HSA offers tax savings and can be used to cover medical, pharmacy, dental and vision expenses now or in the future. Unlike money in a Flexible Spending Account (FSA) that you must “use or lose,” the funds in your HSA roll over each year and continue to build. You can use funds as soon as they are deposited, or you can save them to pay for future eligible health expenses, even those you incur after you retire. Your HSA funds are also portable, so if you leave the Company, you can take your account balance with you.

## Health Savings Account At-a-Glance

<b>Who is eligible?</b>	<p>You are eligible to contribute to an HSA if you are:</p> <ul style="list-style-type: none"> <li>• Enrolled in an HSA-qualified medical plan;</li> <li>• Not covered by any other medical plan (through your spouse or as a retiree), including a Health Care FSA;</li> <li>• Not enrolled in Medicare, Medicaid or TRICARE; and</li> <li>• Not claimed as a dependent on another person’s tax return.</li> </ul>
<b>HSA advantages</b>	<ul style="list-style-type: none"> <li>• Your contributions are tax-free* and reduce your overall taxable income.</li> <li>• You never pay taxes on withdrawals for qualified health care expenses.</li> <li>• Unlike the Medical FSA, you won’t lose your HSA balance if you don’t spend it. You take it with you if you change jobs, retire, or leave the health plan</li> </ul>
<b>How much can be contributed to an HSA?</b>	<ul style="list-style-type: none"> <li>• Up to \$3,550 if you have Employee Only coverage.</li> <li>• Up to \$7,100 if you have Employee + Dependents coverage.</li> <li>• Additional \$1,000 if you are age 55 or older.</li> <li>• If your account balance reaches at least \$1,000, you may choose available investment funds for your balance.</li> </ul>
<b>What can be paid from your HSA?</b>	<ul style="list-style-type: none"> <li>• You can use your HSA for medical, dental, vision and pharmacy expenses for you and any family member who qualifies as a dependent on your tax return.</li> <li>• For a complete list of eligible expenses visit the official IRS website at <a href="http://www.irs.gov/publications/p502/index.html">http://www.irs.gov/publications/p502/index.html</a>.</li> </ul>
<b>Using your HSA</b> Complete instructions are included in your HealthEquity Welcome Kit after you enroll	<ul style="list-style-type: none"> <li>• Use the HealthEquity Visa® health account card, or submit expenses online at <a href="http://www.healthequity.com">www.healthequity.com</a>.</li> <li>• Your account balance and information on claims is available 24/7 on your HealthEquity member portal, by calling HealthEquity Member Services, or by accessing via your HealthEquity mobile app.</li> <li>• Your account balance is NEVER forfeited; unused amounts stay in your account.</li> </ul>

\*State taxes will apply if you live in California, Alabama or New Jersey.



**Want to learn more about the HSA?**

Talk to ALEX. Go to <https://www.myalex.com/ensign/2020>.





## Grand Rounds

**EPO 500, PPO 1500, EPO 2000, Copay 5000 and PPO 5000**

Whether you need help finding the best physician in your area, information about a new diagnosis or treatment, or support deciding if surgery is right for you or your family, Grand Rounds will take care of it all at no cost to you.

- **Expert Opinions:** We partner with the top specialists in the nation to get expert second opinions for members living with complex or chronic conditions. We gather the members' medical records for the specialist to review remotely, and the member receives a written diagnosis and suggested treatment plan moving forward.
- **Office Visits:** We schedule doctor's visits for members and help ensure the appointment goes smoothly. Members are provided the doctor's contact information, their doctor's background and qualifications, and even a list of questions to ask about the condition for which they're being seen.
- **Treatment Decision Support:** Members can receive over-the-phone medical guidance from our clinicians. Phone appointments are scheduled by going online or by calling to arrange it with a care coordinator. Based on the member's preference, a clinician will return the call between 5 AM and 6 PM PT.

### Get Started with Grand Rounds

#### Desktop

- Log on at [www.grandrounds.com/ensign](http://www.grandrounds.com/ensign).
- Enter your **email** and **password**, then input your personal information to create your account.

#### Phone

- Call Grand Rounds at **800-929-0926** to speak with a Care Coordinator and set up your account.

#### Mobile App

- Search "**Grand Rounds**" in the Apple App Store or Google Play.
- Download the app.
- Enter your **email** and **password**, then input your personal information to create your account



# Telemedicine through Teladoc

## EPO 500, PPO 1500, EPO 2000, Copay 5000 and PPO 5000

Telemedicine through Teladoc gives you 24/7 access to a doctor through live video chat whenever you need it for non-emergencies so you can get healthy faster. If you are 18 or older, you can also use Teladoc to speak to licensed therapists, psychiatrists and mental health professionals for help with depression, stress, anxiety, grief and more. Behavioral health appointments are available from 9 AM to 7 PM local time, 7 days a week.

Your cost for Teledoc is based on your medical plan and the type of visit, as shown in the table.

Your Cost for Teladoc Visits		
	Medical Visits	Behavioral Health Visits
<b>EPO 500</b>	\$20 copay	\$40 copay
<b>PPO 1500 with HSA</b>	10% <sup>1</sup> (cost is \$40 per visit)	20% <sup>1</sup> (cost is \$80.00 per visit)
<b>EPO 2000 with HSA</b>	10% <sup>1</sup> (cost is \$40 per visit)	20% <sup>1</sup> (cost is \$80.00 per visit)
<b>Copay 5000</b>	\$25 copay	\$50.00 copay
<b>PPO 5000</b>	10% <sup>1</sup> (cost is \$40 per visit)	20% <sup>1</sup> (cost is \$80.00 per visit)

<sup>1</sup> After calendar year deductible

All Teladoc doctors are board certified, practicing primary care physicians, pediatricians, and family physicians. Commonly treated conditions include:

- Allergies
- Stomach Flu
- Flu
- Anxiety
- Sinus Infection
- UTI
- Gout
- Addiction
- Rashes
- Hypertension
- Sprains
- Grief
- Bronchitis
- Strep Throat
- Depression
- Panic Attacks

### Get started

Go to [www.teladoc.com](http://www.teladoc.com) or call **800-835-2362** to set up your account and complete your profile. You can also download the Teladoc mobile app from the App Store or Google Play.

### When to Use Teladoc

- If you're considering the ER or urgent care center for a nonemergency
- When you need medical advice during off hours or late at night
- When on vacation, a business trip, or away from home
- For prescriptions when medically necessary
- If you need support for your mental well-being

## Video or Phone Appointments

### Kaiser CA HMO 2000

If you are enrolled in the Kaiser CA HMO 2000, you can set up video or telephone appointments with your doctor on a computer or mobile device. Go to [kp.org/videoappointment](http://kp.org/videoappointment) to make an appointment and sign on to [kp.org](http://kp.org) to join your appointment. For more information call **844-800-0820** M-F 8:30 AM to 5 PM PT. You can also download the Kaiser Permanente app from the App Store or Google Play.

# Dental

Our dental plans provide coverage for preventive services, as well as benefits to help pay for more expensive dental procedures such as fillings, root canals, crowns, bridges and orthodontia coverage.

## Dental PPO Plan

For the highest level of benefits, use a provider in the Delta Dental PPO network (ID, OR and WA) or the Cigna DPPO Advantage network (all other states). You can also go out-of-network but will save money if you use a provider in the Delta Dental Premier network (ID, OR and WA) or the Cigna DPPO network (all other states) versus dental providers who are not in a Delta Dental or Cigna provider network.

## Cigna Dental DHMO

DHMO stands for Dental Health Maintenance Organization and provides dental services exclusively from Cigna DHMO dentists. There is no deductible and no annual maximum benefit. You pay fixed copays for preventive, basic and major services. You must select a primary care dentist for your care. Go to [www.cigna.com/offered-cigna-through-work/dental/dhmo](http://www.cigna.com/offered-cigna-through-work/dental/dhmo) to see if there is a Cigna DHMO provider available in your location (not available in all geographic areas).



## 2020 Dental Plans At-a-Glance

Feature	Dental PPO Plan (Delta Dental in ID,OR & WA or Cigna Dental all other states)			Cigna Dental DHMO
	Delta Dental PPO/Cigna DPPO Advantage Dentist	Delta Dental Premier/Cigna DPPO Dentist	Out-of-Network	Cigna DHMO Dentists Only
<b>Calendar Year Deductible</b> Waived for preventive	\$50 per person, \$150 per family			None
<b>Calendar Year Maximum</b>	\$1,500 per person			Unlimited
<b>Preventive Services</b> Routine exams, dental cleanings	100% covered <sup>4</sup>	You pay 20% <sup>1,5</sup>	You pay 20% <sup>1,2</sup>	\$5 office visit copay
<b>Basic Services</b> Fillings, oral surgery	You pay 10% <sup>1</sup>	You pay 20% <sup>1,5</sup>	You pay 20% <sup>1,2</sup>	Fixed copays <sup>3</sup>
<b>Major Services</b> Crowns, inlays, endodontics, periodontics	You pay 40% <sup>1</sup>	You pay 50% <sup>1,5</sup>	You pay 50% <sup>1,2</sup>	Fixed copays <sup>3</sup>
<b>Orthodontia</b>	You pay 50% <sup>1</sup>	You pay 50% <sup>1,5</sup>	You pay 50% <sup>1,2</sup>	Fixed copays <sup>3</sup>
	Available to children under age 19 only, up to \$1,500 lifetime max			For children and adults
<b>Temporomandibular Joint (TMJ)</b> \$1,000 lifetime max	You pay 40% <sup>1</sup>	You pay 50% <sup>1,5</sup>	You pay 50% <sup>1,2</sup>	Fixed copays <sup>3</sup>

1) After calendar year deductible.

2) Percentage applies to usual, customary and reasonable charges.

3) DHMO copay schedule available on [www.ensignbenefits.com](http://www.ensignbenefits.com).

4) In-network preventive services do not count toward the annual calendar year maximum.

5) Percentage applies to negotiated rate.

To find a Delta Dental dentist (ID, OR and WA), go to [www.deltadentalins.com](http://www.deltadentalins.com).

To find a Cigna DPPO Advantage or Cigna DPPO dentist (all states except ID, OR and WA) or a Cigna Dental DHMO dentist (most states) go to [www.cigna.com](http://www.cigna.com).

If the charge for any dental treatment is expected to exceed \$300, ask your dentist to submit a dental treatment plan to Delta Dental or Cigna for review. This will help you to know expected out-of-pocket costs before any treatment begins.

# Vision

Quality eye care benefits are offered through the Vision Service Plan (VSP). Benefits are designed to help reduce the cost of eyeglasses, contact lenses and other vision services. You can use any vision care provider, but will save money when you use a VSP Choice network provider. With VSP providers, you will typically have 100% of expenses paid by VSP after a copayment, up to the maximum allowable benefit for covered services. If you receive services from an out-of-network provider, you are responsible for paying the provider in full and submitting a claim to VSP for reimbursement.

For more information on covered benefits or to find a VSP provider, go to [www.vsp.com](http://www.vsp.com) or call VSP at 800.877.7195.

Discounts are available for LASIK surgery, non-prescription sunglasses, contact lens solutions, and other eye care accessories. Note that you can use your benefits at certain specialty optical boutiques or retail chains (such as Costco) through VSP's affiliate provider network. Affiliate providers can check eligibility and submit claims with VSP.

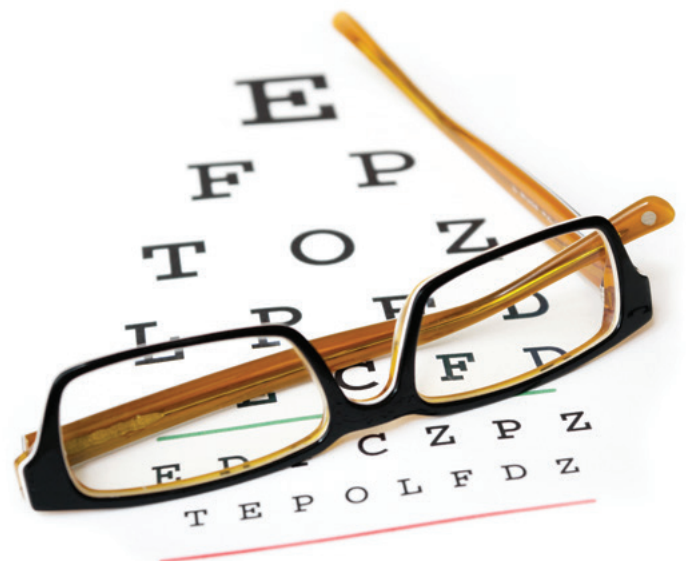
## 2020 Vision Plan At-a-Glance

Plan Feature	VSP Network Provider	Out-of-Network Provider
<b>Exam for Eyeglasses</b> Once every 12 months	\$10 copay	\$10 copay, Plan pays up to \$73
<b>Lenses</b> Once every 12 months • Single vision • Lined Bifocal • Lined Trifocal	\$25 materials copay	\$25 materials copay  Plan pays up to \$33 Plan pays up to \$50 Plan pays up to \$65
<b>Lens Options</b> • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses	Copay up to \$55 Copay of \$95 - \$105 Copay of \$150 - \$175	Plan pays up to \$65 Plan pays up to \$65 Plan pays up to \$65
<b>Frames</b> Once every 24 months	Plan pays up to \$130 (\$70 for Costco)	Plan pays up to \$70
<b>Contact Lenses</b> Instead of eyeglasses once every 12 months	\$130 allowance for contacts Up to \$60 copay for contact lens exam (filling and evaluation)	Plan pays up to \$115

### Finding a VSP provider

You should always call a doctor to confirm participation in the VSP network. To find a VSP provider:

- Go to the VSP website at [www.vsp.com](http://www.vsp.com).
- Find the “**Members & Consumers**” section.
- Follow the directions to register as a site user, or fill in your User ID and password.
- Select the “**Find a VSP Doctor**” tab.



# Financial Protection

## Flexible Spending Accounts

If you are not already participating in the company’s Flexible Spending Accounts (FSAs) for health care and/or dependent care expenses, you may be missing an opportunity for significant tax savings. There are three types of FSAs — a Health Care FSA, Limited Purpose FSA and Dependent Care FSA. You are eligible for the Limited Purpose FSA only if you participate in a Health Savings Account. All three FSAs let you use pre-tax dollars to pay eligible out-of-pocket expenses not covered by other insurance plans. Annual elections are “use it or lose it” so estimate wisely. Key features of each FSA are highlighted below.



**Have Questions About Flexible Spending Accounts?**  
**ALEX** can help. Go to <https://www.myalex.com/ensign/2020>.

Type of FSA	Eligible Expenses	Pre-tax Contribution
<b>Health Care FSA</b>	Most medical, dental and vision care expenses that are not covered by your health plan, such as deductibles, copays, eyeglasses and doctor-prescribed over the counter medications.	Up to \$2,700 per year
<b>Limited Purpose FSA</b>	Dental and vision care expenses that are not covered by other insurance plans, such as deductibles, copays and eyeglass expenses that exceed plan limits.	Up to \$2,700 per year
<b>Dependent Care FSA</b>	Dependent care expenses such as daycare, summer camp, after school programs or elder care programs so you and your spouse can work or attend school full-time.	Up to \$5,000 per year (\$2,500 if married and filing separate tax returns)

### Health Care FSA

A Health Care FSA gives you a tax break on many expenses that are not reimbursed by any other health plan, such as deductibles, copays, coinsurance, vision expenses, and more. You must enroll each year, as contribution amounts are not carried forward from one year to the next. You can set aside up to \$2,700 each plan year on a pre-tax basis and can rollover up to \$500 unused funds from the previous year to cover eligible health care expenses.

### Limited Purpose Health Care FSA (for use with Health Savings Account)

If you participate in a Health Savings Account (HSA), you can maximize your tax savings by also participating in a Limited Purpose Flexible Spending Account (FSA) that covers dental and vision expenses only. A Limited Purpose Health Care FSA is a great way to conserve your HSA funds and still benefit from tax savings. You may contribute up to \$2,700 pre-tax dollars annually. More information is available on the benefits website at [www.ensignbenefits.com](http://www.ensignbenefits.com).

### Dependent Care FSA

The Dependent Care Account can be used for dependent care and elder care expenses that enable you (or you and your spouse) to work or attend school full-time. Eligible expenses include daycare, preschool programs and after-school care for qualifying children under age 13. They also include elder care or care for qualifying dependents and qualifying relatives of any age who are living with you and not capable of self-care.

The amount you contribute to a Dependent Care FSA cannot be greater than your income or your spouse’s income, whichever is less. If your spouse contributes to a Dependent Care FSA through his or her employer, your combined contributions may not exceed \$5,000. If you are married and file separate tax returns, you can contribute up to \$2,500 per year.

## Dependent Care FSA Rules

- For expenses to be eligible, they must be incurred because you and your spouse or domestic partner are working
- Children must be under age 13
- Care providers can be anyone except your spouse, a dependent claimed on your tax return, or child under age 19
- Disabled dependents (a child, spouse, or parent) also qualify for reimbursement if they spend at least 8 hours a day in your home
- Eligible dependent care expenses include nursery schools, day camps, licensed day care centers and day care in your home (except if the provider is the child's parent or your child under age 19)

## Careful Planning Required

You should plan your FSA contributions carefully. Here's why:

- Use it or lose it. IRS rules require that any money left in a Dependent Care FSA at the end of the plan year must be forfeited.
- Money set aside for health care expenses cannot be used to reimburse dependent daycare expenses and vice-versa.
- Any health care or dependent care expenses that are paid from FSAs cannot be claimed as a deduction or credit when filing your income tax return.
- You cannot stop or change contributions during the year unless you have qualified status change.
- Once you terminate employment, only expenses incurred before you terminated are eligible for reimbursement for your FSA, unless you elect to continue your Health Care FSA through COBRA.
- You will be reimbursed for dependent care expenses only up to the amount of your dependent care spending balance and only after the care has been provided.

## TRI-AD is the FSA Plan Administrator

If you enroll in Flexible Spending Accounts (FSAs), it's easy to manage your FSAs through TRI-AD, the plan administrator. Access the TRI-AD website to review your account, including current balance, status of any claims, and other helpful information including a list of eligible health care and dependent care expenses.

### Tax Savings!

The Flexible Spending Accounts (FSAs) let you pay for eligible health care and/or dependent day care expenses and reduce your taxes at the same time.



# Transportation/Commuter Benefit Program

Set aside pre-tax dollars for transportation and parking. Use our Transportation/Commuter Benefit Program administered by TRI-AD to save money instantly on your commuting expenses. Eligible expenses include fares for bus, vanpool, subway, ferry, train and parking at or near work. This benefit can be enrolled through the Workday Benefits worklet, the normal enrollment task in your inbox, or by calling the Ensign Benefits Center. For questions, contact TRI-AD at 888-844-1372 or visit [www.TRI-AD.com](http://www.TRI-AD.com).

**2019 Transit Maximum: \$265 per month**

**2019 Parking Maximum: \$265 per month**

## Life and AD&D Insurance

### Basic Life and AD&D Insurance

To protect those who rely on your income for their support, your employer pays the full cost of basic life and accidental death & dismemberment (AD&D) insurance. This coverage is available to all full-time benefit eligible employees of an Ensign Services-affiliated company. The plan is administered by Unum and pays benefits upon your death.

AD&D benefits are paid if your death is the result of a covered accident. If you die from an accidental injury, your beneficiary will receive both the basic life and AD&D benefit. AD&D also pays benefits if you are severely injured and suffer a loss such as the loss of a limb or eyesight.

Coverage	When Payment Is Made	Benefit Amount <sup>1,2</sup>
<b>Basic Life Insurance</b>	If you die from any cause	1X salary - Service Center/Cornet employees \$12,000 all other eligible employees
<b>AD&amp;D Insurance</b>	If you die from an accident the benefit amount is paid in addition to basic life insurance	1X salary - Service Center/Cornet employees \$12,000 all other eligible employees
	If you are severely injured due to an accident and suffer a loss specified in the policy such as the loss of a limb or eyesight	A portion of the benefit, as specified in the policy

<sup>1</sup> The benefit amount is reduced after age 65.

<sup>2</sup> If Basic Life is greater than \$50,000, you can cap your coverage at \$50,000 to avoid imputed income tax.

### How much life insurance do I need?

In deciding how much life insurance you need, consider your personal situation, age and whether or not you support a family. If you have limited financial obligations, you may need less life insurance compared to someone who has a mortgage to pay or children to put through college.



Let **Alex** help you decide how much life insurance you need. Go to <http://www.myalex.com/ensign/2020>

# Supplemental Life Insurance

If you need more than basic coverage, you may purchase supplemental life insurance coverage through Unum for yourself and for your eligible dependents. You pay the full cost of supplemental coverage through after-tax payroll deductions. For more information, go to [www.ensignbenefits.com/financial-protection/life-and-add-insurance](http://www.ensignbenefits.com/financial-protection/life-and-add-insurance). Coverage options are shown below.

Coverage For	Coverage Amount	Maximum	Guaranteed Issue
<b>Employee</b>	\$10,000 to \$500,000 in \$10,000 increments	Lesser of \$500,000 or 5X annual earnings	\$200,000 if enrolling when first eligible. If you purchase a minimum of \$10,000 when first eligible, you can increase coverage in \$10,000 increments up to \$200,000 during a future Open Enrollment without Evidence of Insurability (EOI). Any elections greater than \$200,000 are subject to EOI.
<b>Spouse</b>	\$5,000 to \$250,000 in \$5,000 increments	Lesser of \$250,000 or 100% of your combined Basic and Supplemental coverage	\$25,000 if enrolling when first eligible. Any new elections or elections greater than \$25,000 are subject to Evidence of Insurability (EOI).
<b>Child(ren)</b>	\$2,000 to \$10,000 in \$2,000 increments	\$10,000	\$10,000

If the amount of the supplemental life insurance you apply for exceeds the Guaranteed Issue amount or if you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you are required to complete and submit an Evidence of Insurability form. Your form must be submitted and approved by Unum prior to coverage taking effect.

## Life and AD&D insurance may provide additional financial support by:

- Covering household expenses
- Relieving debt (e.g., mortgage or student loans) you might leave behind
- Allowing your family members to hire someone if they need help when you are gone
- Leaving an inheritance for your loved ones or even for a favorite organization
- Assisting your family with the cost of your funeral or medical bills



## Supplemental Accidental Death & Dismemberment (AD&D) Insurance

You have the option to purchase supplemental AD&D insurance for yourself, your spouse and your children. Benefits are paid in the event of death or a serious injury (such as loss of a limb or eyesight) due to an accident. Evidence of Insurability is not required. You pay the full cost of supplemental AD&D coverage through after-tax payroll deductions. For more information, go to [www.ensignbenefits.com/financial-protection/life-and-add-insurance](http://www.ensignbenefits.com/financial-protection/life-and-add-insurance).

Coverage For	Coverage Amount	Maximum
Employee	\$10,000 to \$500,000 in \$10,000 increments	Lesser of \$500,000 or 5X annual earnings
Spouse	\$5,000 to \$250,000 in \$5,000 increments	Lesser of \$250,000 or 100% of your combined Basic and Supplemental coverage
Child(ren)	\$2,000 to \$10,000 in \$2,000 increments	\$10,000

### Keep Your Beneficiaries Up To Date

Review your beneficiaries periodically and keep them up to date to ensure any life insurance benefits go to the loved ones you intend.



## Voluntary Long-Term Disability Insurance

Voluntary Long-Term Disability Insurance provides financial protection if you are unable to work for an extended period of time due to a covered injury or sickness. You choose the elimination period (number of days of disability before benefits begin, either 180 or 360). Pre-existing conditions and other limitations and exclusions apply. For more information, go to [www.ensignbenefits.com/financial-protection/disability](http://www.ensignbenefits.com/financial-protection/disability).

Coverage For	Elimination Period	Coverage Amount	Maximum
Employee	180 days or 360 days	60% of monthly pre-disability income reduced by other disability benefits	\$10,000 per month

LTD benefits may be reduced by other sources of income such as Social Security disability or retirement benefits, workers' compensation, state disability benefits and similar programs. The schedule of benefits includes a full list of covered injuries and expenses. Coverage begins on the first of the month in which you have your first payroll deduction for premiums.



## Voluntary Benefits

A variety of voluntary benefits are available that can help you meet your personal and family insurance needs. Enrollment information for each benefit is listed below.

### Voluntary Short-term Disability Insurance

Replaces a portion of your income if you are unable to work due to a covered injury or sickness. You can choose a monthly benefit from \$400 to \$5,000. Coverage up to 60% of your gross monthly salary may be available (max of 40% in CA, HI, NJ, NY and RI). Contact the Ensign Benefits Center at 877-352-8104 to enroll.

### Voluntary Hospital Indemnity Insurance

Pays a \$1,500 cash benefit. You must have comprehensive medical coverage to enroll in this plan. Coverage is also available for family members. Contact the Ensign Benefits Center at 877-352-8104 to enroll.

### Voluntary Group Accident Insurance

Pays benefits for specific injuries resulting from a covered accident such as broken bones, burns or torn ligaments. Examples of covered expenses include emergency room treatment and outpatient surgery. Coverage is also available for family members. Contact the Ensign Benefits Center at 877-352-8104 to enroll.

### Voluntary Critical Illness Insurance

Pays a one-time lump sum benefit amount upon the diagnosis of a covered disease illness such as a heart attack, stroke, cancer and more. You can choose coverage from \$5,000 to \$50,000. Coverage is also available for family members. Contact the Ensign Benefits Center at 877-352-8104 to enroll.

### MetLife Auto and Home Insurance

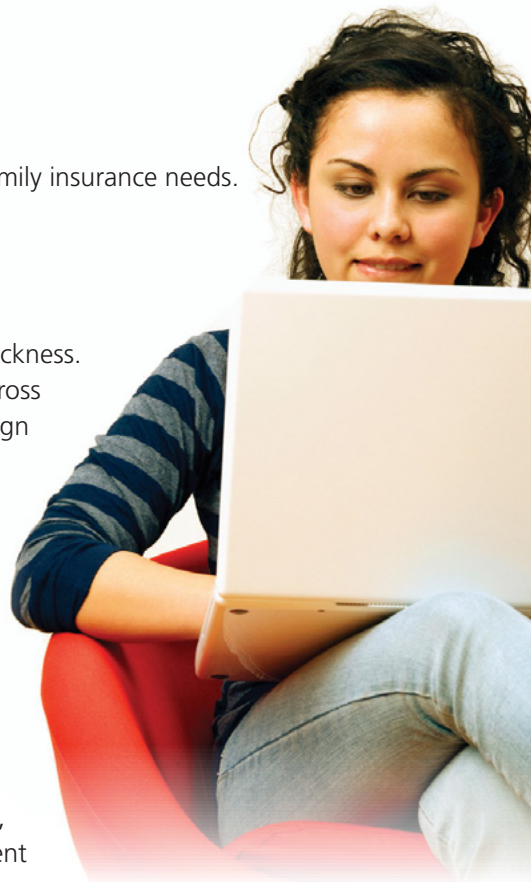
MetLife's Auto & Home® group insurance program is available to fulltime employees. As part of the program, you have access to value added features and benefits, including special group coverage on auto and home insurance, as well as a variety of other insurance policies.\* Taking advantage of this benefit can potentially save you money!

In addition to auto and homeowner's coverage, MetLife also offers a variety of other insurance policies, including:

- Personal Excess Liability
- Condo
- Recreational vehicle
- Motor Home
- Boat

### Advantages of MetLife Auto & Home® coverage include:

- Premium discounts, depending on location.
- A variety of flexible payment options, including payroll deduction for fulltime employees, direct billing, or through your favorite credit card.
- Superior customer service from professional representatives.



### Get a Price Quote

To get a price quote for Home and Auto Insurance, call **800-GET-MET8** (800-438-6388). You will know what your savings will be within minutes. If you decide to go with MetLife coverage, they will help you make the change from your current coverage quickly and easily.

# Work Life

## Employee Assistance Program

Personal issues, planning for life events or simply managing daily life can affect your work, health and family. As part of your benefits program, you have access to the EAP and Work/Life Balance services through Unum. Services are provided to you at no charge even if you are not enrolled in other benefit plans. Get help with:

### Personal, family and work issues

- Stress, anxiety and depression
- Relationship issues, divorce
- Family and parenting challenges
- Anger, grief and loss
- Addiction, eating disorders, mental illness
- And more

### Work/life balance issues

- Finding childcare
- Accessing legal help
- Locating eldercare services
- Managing your finances
- And more

### Who is covered?

- You
- Your spouse
- Your dependent children
- Your parents and parents-in-law

### Contact the EAP 24/7

Online: [www.unum.com/lifebalance](http://www.unum.com/lifebalance)

Call: **800-854-1446** (multi-lingual)

### Programs and features include:

- Three free in-person counseling sessions
- Unlimited help over the phone

---

## Intalere® Marketplace

The Intalere® Marketplace offers discounts on a variety of products and services, including:

- Computers
- Cell phones
- Electronics
- New and used cars
- Apparel and beauty
- Gyms and fitness
- Vacations and more

To learn more about the Intalere Marketplace, visit <https://amerinet.corporateperks.com>

You earn points for every dollar you spend, which can translate into more savings.

---

## TicketsatWork.com

You can receive a corporate discount on entertainment events through [TicketsatWork.com](http://TicketsatWork.com). Access hundreds of corporate discounts for:

- Movie tickets
- Sporting events
- Theme parks
- Hotel & travel
- Shows and more

### It's Easy to Get Started

1. Go to [TicketsatWork.com](http://TicketsatWork.com).
  2. Click on the "Sign In" Box at the top of the homepage.
  3. You will be prompted to create a **user name** and **password**, and enter our Company Code: **Ensign**.
- Once enrolled you have access to discounts on attractions and theme parks Nationwide.

### Two Ways to Order Discounted Tickets

**Online:** Visit [TicketsatWork.com](http://TicketsatWork.com), then log in using your **email** and **password**.

**By Phone:** Call customer service at **800-331-6483** or **866-273-5825** (daily, 6 am to Midnight PT).

## Tuition Reimbursement

The Ensign Tuition Reimbursement Program is available to active full-time and part-time employees of Ensign Services-affiliated companies at participating locations. You must have one year of employment as of the course start date and your last performance review must be satisfactory.

Eligible employees may take courses toward certificate education units (CEUs), certification, associate, baccalaureate or graduate degree programs at an accredited school. The maximum annual benefit is \$1,000 for full-time employees and \$500 for part-time employees.

### For more information:

- Go to the Forms section of <https://tr.scholarshipamerica.org/ENSIGN>
- Call the program administrator, Scholarship Management Services (SMS) at **800-537-4180**

## Purchasing Power

Full-time employees can participate in Purchasing Power for an affordable and responsible way to buy brand-name computers, electronics, appliances, furniture and more through the ease of payroll deductions.

All Purchasing Power products feature an all-inclusive price. You'll know the total price up front and the cost is divided into manageable payments that are deducted from your paycheck over a 12-month period. There's no interest, no risk of late fees and no credit check required. When cash and credit are not an option, Purchasing Power gives you a better way to buy.

To participate, you must be at least 18 years old, a full-time employee for at least 24 months, earn at least \$16,000 per year and have a bank account or credit card (to be used in case of non-payment via payroll deduction).

### Shop Online

[www.ENSIGN.PurchasingPower.com](http://www.ENSIGN.PurchasingPower.com):

Use Group code **ENS2293** when you log in for the first time.

Contact Purchasing Power: **866-670-3479**.

## Child Care Benefit Program

You can receive a 10% weekly child care tuition savings with the largest network of early childhood education in the U.S. Children age six weeks to 12 years are welcome.

For information about participating CCLC® Child Care Centers, KinderCare® and Champions® Before- and After-School Programs visit [www.careiseverywhere.com](http://www.careiseverywhere.com) or call **877-914-7683**.

Mention that you are an employee of an Ensign-affiliated company.



# The Emergency Fund

When you least expect it, life can change in an instant. A tragic accident, a home fire, the death of a loved one; at one time or another, we have all faced personal disaster. When you're a member of the Ensign-affiliated family, there is help. In times of need, it's good to have someone to fall back on. The Emergency Fund may be able to provide financial support and resources to help pick up the pieces after a personal crisis.

The Emergency Fund is designed to provide the same kind of help we would want to provide individually, but in a way that expands the Ensign family and the availability of assistance. The Emergency Fund is part of a public charity pursuant to Internal Revenue Code Section 501(c)3. All donations are tax deductible and the grants are not taxable for the recipients which will allow us to help even more people.

Helping is easy. Fill out the Voluntary Deduction Authorization Form indicating the amount you would like to contribute. You can contribute a little each paycheck—from \$1 to \$10 or more. You can also download the form from the Emergency Fund website at <https://theemergencyfund.net>.

## Eligibility for Assistance

- Current employees must have completed 6 months of service.
- Employees can be full-time or part-time, exempt or non-exempt.
- Retirees (must have been retired for six months or less).
- Former employees (must have been separated from employment for six months or less and in good standing upon termination).
- Surviving dependents or family members of an eligible employee (if death occurred within a time frame of six months or less).

## Applying for Assistance

1. Request and complete a grant application from your Executive Director or Payroll/HR Rep. You can also obtain an application at [theemergencyfund.net](https://theemergencyfund.net) or by contacting the Service Center Human Resources Department at (949) 487-9500.

2. A grant application form must be completed and signed by your Executive Director, Director of Nursing or their designee in order to be considered for financial assistance. Follow up documentation or additional information may be requested by the Disbursement Committee upon review of the application, depending on the circumstances.

3. The completed application and attached documentation, if requested, should be marked "Confidential" and sent by any one of the following methods:

**US Mail:** Ensign Service Center, Attn: The Emergency Fund Disbursement Committee at 27101 Puerta Real, Suite 450, Mission Viejo, CA 92691

**Email:** [emergencyfund@ensignservices.net](mailto:emergencyfund@ensignservices.net)

4. The Disbursement Committee will review the application and make a determination within one week upon receiving the application. In cases of dire

emergencies, the Disbursement Committee will make every effort to reach a decision within 72 hours. If additional information is required, the employee or Executive Director will be contacted. Once a decision has been reached, the employee will be notified as soon as possible.

5. If the application has been approved, a check will be mailed to the grant recipient or their designee as soon as possible. If the application has not been approved, the employee will have the option of appealing the decision, but must do so by contacting the Disbursement Committee within 5 working days upon notification of the decision. If the employee does not respond to the notification within 5 days, the matter will be considered closed.

6. If the employee chooses to appeal, it is the employee's responsibility to contact the Disbursement Committee for information on the appeal process and to submit other documentation which would help support the request for financial assistance.

7. If the Disbursement Committee does not approve the application the second time, then the matter will be closed.

# Retirement

## 401(k) Savings Plan

Building a nest egg for your future takes time. It's important to set aside money for retirement as early and regularly as you can because the quality of your retirement years could depend on how much you have been able to save. The Company's 401(k) Plan offers savings and investment tools to help you reach your goals. You can defer up to 90% of your eligible pay, up to IRS limits, with these valuable benefits:

- Tax savings on pre-tax contributions
- After-tax Roth contributions
- Tax-deferred earnings
- Company matching contributions
- Choice of investment paths
- Quarterly account statements
- Convenient payroll deductions
- Flexibility to change investments & deferrals



### Who Can Participate?

All full-time and part-time employees may join the plan on the first of the month following 90 days of service. Per diem, on-call and temporary employees are not eligible. You will be sent an enrollment packet by Fidelity, the Plan Administrator, before your enrollment eligibility date.

Plan Feature	Description
<b>Your Contributions</b>	You can contribute up to 90% of your pay on a pretax basis to the plan, up to the annual IRS limit (\$19,500 for 2020). If you are age 50 or older, you may be eligible for an additional "catch-up" contribution (\$6,500 for 2020). When you enroll you specify a percentage of your pay.
<b>Company Contributions</b>	Currently, the Company matches the first 2% of compensation that you contribute at the rate of \$0.25 for each \$1.00 you contribute. You become entitled to (are vested in) the Company's matching contribution at the rate of 25% per year of service, with 100% vesting after four years of service. The Company may make a discretionary matching contribution.
<b>Roth 401(k) Feature</b>	You can save for the future through a Roth 401(k) as part of the 401(k) Savings Plan. Contributions are made with after-tax dollars. You do not get an upfront tax-deduction, as you do with regular pre-tax 401(k) contributions. However, your Roth 401(k) account grows tax-free. Withdrawals from your Roth account taken during retirement are not subject to income tax, provided you're at least 59-1/2 and you've held the account for five years or more.
<b>Investing Your Account</b>	You direct how your account is invested. You choose from a variety of funds offered through Fidelity, the plan administrator.

### Vesting

You always have complete ownership of your plan contributions, company matching contributions and any investment earnings. You become entitled to (are vested in) the Company's matching contribution at the rate of 25% per year of service, with 100% vesting after four years of service.

### Questions?

For more information about the 401(k) Plan, contact a Fidelity representative at **800.294.4015** or visit [www.netbenefits.com](http://www.netbenefits.com).





