



Your 2024 Benefits Guide

January 1—December 31, 2024



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.



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Important Benefits Contacts

Contact Information for Our Carriers

Health	Policy/Group Number	Website/Phone
Medical: Administered by HealthComp Value Copay Plan, Choice HSA Plan, Premier EPO Plan	N35	https://hconline.healthcomp.com/ensign 833-549-2867
CerpassRx Pharmacy Benefit Manager	n/a	https://cerpassrx.com/ensign 844-636-7506
Teladoc Telemedicine	n/a	www.teladoc.com 800-835-2362
98point6 Text-based Telemedicine	n/a	https://www.98point6.com/ensign n/a
Hinge Health Virtual Physical Therapy	n/a	https://bit.ly/ensignhingehealth 855-902-2777
Medical: Available in Southern California, Dallas, TX and Denver, CO Centivo PCP Partnership Plan	ENSGN	https://ensign.centivo.com 800-981-8925
Medical: Administered by Kaiser Permanente Kaiser HMO NoCal with HSA Kaiser HMO SoCal with HSA Kaiser HMO CO with HSA Kaiser HMO OR with HSA Kaiser HMO WA with HSA	KP NoCal: #39044 KP SoCal: #225775 KP CO: 44324 KP OR: 25517 KP WA: 21134	www.kp.org 800-464-4000
Medical: Available in San Diego County SIMNSA Baja CA Premier Access HMO	#529	www.simnsa.com 619-407-4082
Health Savings Account (HSA) HealthEquity HSA	n/a	www.healthequity.com 866-346-5800
Supplemental Medical Coverage Unum Hospital Insurance, Accident Insurance, Critical Illness Insurance	n/a	www.unum.com 866-679-3054
Dental Cigna Dental PPO Plan, Cigna Dental DHMO Delta Dental PPO Plan	Cigna Dental: #2499682 Delta Dental: #19192	www.cigna.com 800-244-6224 www.deltadentalins.com 800-765-6003
Vision Vision Service Plan	#30019528	www.vsp.com 800-877-7195
Financial Protection		
Flexible Spending Accounts (FSAs) HealthEquity Health Care FSA, Limited Purpose FSA, Dependent Care FSA	n/a	www.healthequity.com 877-924-3967
Transportation/Commuter Benefits Program HealthEquity	n/a	www.healthequity.com 866-346-5800
Life and Accidental Death & Dismemberment (AD&D), Short-Term Disability, and Long-Term Disability Insurance Plans Unum Basic Group Term Life and AD&D, Supplemental Group Term Life and AD&D, Short-Term Disability (STD), Long-Term Disability (LTD)	Basic Life and AD&D: #415402 Supp. Life and AD&D: #415403 STD: n/a LTD: #145912	www.unum.com Basic, Supp. Life and AD&D: 800-421-0344 STD: 800-635-5597 LTD: 800-633-7479
Auto and Home Insurance Farmers Auto and Home Insurance	n/a	www.farmers.com 855-498-3697
Work-Life		
Employee Assistance Program Health Advocate EAP	n/a	www.unum.com/lifebalance 800-854-1446
Tuition Reimbursement Scholarship Management Services	n/a	Email: benefits@ensignservices.net 949-540-2014
Discounted Entertainment Tickets TicketsatWork	Company code: Ensign	www.ticketsatwork.com 800-331-6483 866-273-5825
Employee Purchase Program Purchasing Power	Group code: ENS2293	https://ensign.purchasingpower.com 866-670-3479
Child Care Benefit Program KinderCare	n/a	www.kindercare.com/ensign 888-525-2780
Retirement		
401(k) Savings Plan Fidelity	n/a	www.netbenefits.com 800-835-5095

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. For resources online, go to www.ensignbenefits.com/resources.



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. It's 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://start.myalex.com/ensign>.

Ensign Benefits Website

The Ensign Benefits website is your go-to source for information about Ensign benefit plans. Start with high level 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 if you need more information.

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



Go to www.ensignbenefits.com

Resources (continued)

Complete Your Benefits Enrollment in Workday

When you're ready to enroll in your 2024 benefits, sign in to Workday with your **user name** and **password**. Your user name 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 or Benefit Change – Employment Status Change and proceed with your enrollment.

Need help signing in to Workday?

Call 949-540-1200 or email support@ensignservices.net to reset your password.

Benefits Support

Call Benefits Support 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 **888-659-3616** weekdays 8 AM to 5 PM PT or email benefits@ensignservices.net.



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

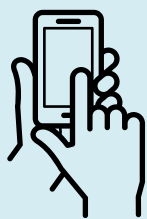
Full-time and Part-time Employee Working 32 or More Hours per Week

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 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 coverage 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 medical coverage.

Download the Workday Mobile App



Perform many of the popular self-service tasks of the Workday desktop application with the convenient and time-saving 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).

Eligible Dependents

You will be required to provide proof of dependent eligibility at the time of enrollment. Eligible dependents for health 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. Common Law Spouse is not an eligible relationship to be covered as a dependent on medical, dental, or vision plans for any state. Domestic partners are also not recognized as eligible for any of the BCBS self-funded medical plans. However, Kaiser or SIMNSA are insured plans, so you may enroll your domestic partner if you live in a Kaiser geographic area.
- **Children:** Eligible dependent children must be under age 26 or any age if they 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. Children of a covered legal spouse are also eligible for the BCBS self-funded medical plans. If Kaiser or SIMNSA recognizes domestic partner coverage, then children of the recognized domestic partner may also be covered.

Newborns are automatically covered for the first 30 days and must be enrolled within 30 days of their date of birth to be covered thereafter.



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 Benefit Elections During the Year

You can change your benefit elections outside of Open Enrollment only if you have a Qualified Event or Family Status Change, which include:

- Have a baby/adopt a child
- Change in marital status
- Gain/loss of other group coverage, including Medicare/Medicaid
- One of your dependents gains/loses other group coverage, including Medicare/Medicaid
- Employment change that affects your benefits
- Death of a covered dependent

If you have a Qualified Event or Family Status Change and want to make benefit changes during the year:

- **You must make any benefit changes within 30 days of the qualified event.**

- Changes must be consistent with the Family Status Change. For example, if you have employee only medical coverage and get married, you may waive coverage or change your medical coverage category to employee + spouse. You may also add your spouse to other coverages. Coverage for a new spouse begins the first of the month following the marriage date. Coverage for a newborn begins on date of birth.
- You must provide necessary verification documentation for your dependents (proof of loss or gain of other coverage) within 30 days of the qualified event. You may email scanned copies of documentation to benefits@ensignservices.net. Coverage changes go into effect the first of the month after the qualifying event. For example, if coverage ends on August 31, your coverage with Ensign begins on September 1.
- If you are adding new dependents to your coverage based on a qualifying life event, you must provide necessary documentation to confirm eligibility (such as a marriage or birth certificate) at the time of enrollment. Your elections will not be approved until the necessary documentation is received. You can submit your documentation on the last Workday enrollment screen by uploading them before you submit your enrollment elections in Workday. You can also email your documentation to benefits@ensignservices.net. Be sure to include your name and employee ID number with your submitted documentation.

When Coverage Ends

Medical, dental and vision 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.



Enrollment

Enrollment Deadline

You have 30 days following your hire date or status change date 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 during enrollment or email the documents to benefits@ensignservices.net before your enrollment deadline.

Enroll in Your 2024 Benefits in Workday

Go to <https://www.myworkday.com/wday/authgwy/ensign/login.html>.

- 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 or Benefit Change – Employment Status Change.
- If you are adding new dependents, gather eligibility verification documents to provide proof of dependent eligibility and submit in Workday within 30 days following your hire date or date of status change to benefit-eligible to complete your benefits enrollment in Workday.

Optional Now vs. Optional Anytime Benefits

Benefits that are “**optional now**” means if you want coverage under these benefits, you must enroll 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 Benefits Support at **888-659-3616**.

OPTIONAL NOW Enroll in Workday	<p>If you are eligible, you must enroll for these benefits within 30 days of your date of hire:</p> <ul style="list-style-type: none">• Medical• Dental• Vision• Flexible Spending Accounts• Supplemental Life• Supplemental AD&D• Voluntary Long-Term Disability• Voluntary Group Accident• Voluntary Critical Illness• Voluntary Hospital Indemnity
OPTIONAL ANYTIME Enroll through carrier or call the Ensign Benefits Support	<p>If you are eligible, you can elect or change these benefits any time:</p> <ul style="list-style-type: none">• Health Savings Account (HSA)*• Voluntary Short-Term Disability• 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 three medical plans administered by HealthComp. If you live in California, Colorado, Oregon or Washington, you also have an HMO option through Kaiser if you live in a Kaiser Permanente service area. If you live in Southern California, Denver, Colorado, or Dallas, Texas, you can choose the Centivo PCP Partnership Plan. 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 HealthComp use a national provider network through Blue Shield.

Need help choosing the best medical plan?

Say hello to ALEX our online benefit counselor.
Go to <https://start.myalex.com/ensign>.



Medical Plans

Value Copay Plan	This plan exclusively covers you for in-network doctors and facilities and gives you access to Blue High Performance Network (HPN) providers in certain geographic locations based on your zip code. Blue HPN providers are selected based on delivery of quality, affordable care offering savings to Affiliate employees in exchange for a smaller provider network and the lowest paycheck deduction .
Choice HSA Plan	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, the plan comes with a Health Savings Account (HSA) that you can contribute to.
Premier EPO Plan	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.
Centivo PCP Partnership Plan (Southern CA, Denver, CO, and Dallas, TX employees only)	You can enroll in this plan if you live in Southern California, Denver, Colorado, or Dallas, Texas. This plan exclusively covers you when you stay in the Centivo network. Except in emergencies, you'll pay the full price for any care you receive from a non-Centivo doctor or facility. With this plan, you must choose a primary care doctor who will direct your care and provide referrals.
Kaiser HMO with HSA (CA, CO, OR and WA employees only)	You can select this plan if you live in a Kaiser Permanente service area in one of the following states: California, Colorado, Oregon or Washington. 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).
SIMNSA Baja CA Premier Access HMO (San Diego County employees only)	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.

Centivo PCP Partnership Plan Highlights

The Centivo PCP Partnership Plan is a different type of health plan that helps provide high-quality care at lower costs by working directly with local healthcare providers you know and trust. With Centivo, you'll get an affordable health plan that's easy to use.

- This plan offers **FREE** primary care visits and set copays for most other care.
- The core of the PCP Partnership Plan is a relationship between you and your primary care doctor who can help keep you healthier, improve your healthcare experience and keep your costs low.

- Your primary care doctor will refer you to high-quality, in-network specialists, ensuring you'll get the right care for your needs at the best price.
- When you see your primary care doctor first (remember, these visits are FREE!), get referrals for specialty care and see in-network specialists, you'll get predictable copays, so you'll know what you owe before going to the doctor.

For more on the Centivo PCP Partnership Plan, see <https://ensignbenefits.com/health-wellness/medical/centivo>.

Centivo Regions and Provider Networks

- **Southern CA:** Providers who are affiliated with MemorialCare, UCLA Health and Scripps Health
- **Denver, CO:** Providers who are affiliated with Advent Health and CommonSpirit (formerly known as Centura)
- **Dallas, TX:** Providers who are affiliated with Baylor Scott & White Quality Alliance, an accountable care organization (ACO) affiliated with Baylor Scott & White Health

About HealthComp

We have partnered with HealthComp as the administrator of our self-funded medical plans. HealthComp manages the Value Copay Plan, Choice HSA Plan and Premier EPO Plan.

HealthComp's customer service team provides 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 HealthComp, you can access and manage your health benefits information through an easy-to-use member portal or with the HealthComp mobile app while you're on the go.

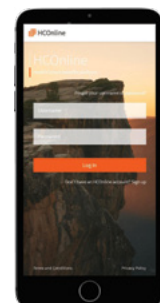
HealthComp

Online: <https://hconline.healthcomp.com/ensign>

Email: hconline@healthcomp.com

Phone: 833-549-2867 (M-F, 6 a.m. – 6 p.m. PT)

Mobile App: Search for HCOOnline on the App Store or on Google Play



2024 Medical Plans At-a-Glance

Southern CA, Denver, CO
and Dallas, TX Residents

Plan Feature	VALUE COPAY PLAN	CHOICE HSA PLAN	PREMIER EPO PLAN	CENTIVO PCP PARTNERSHIP PLAN
	NETWORK ONLY YOU PAY	IN-NETWORK YOU PAY	NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY
Employee Paycheck Contributions	\$	\$\$	\$\$\$	\$\$
Preventive Care	Covered in full ³	Covered in full ³	Covered in full ³	Covered in full ³
Telemedicine Doctor Visit Behavioral Health Visit	Through Teladoc \$5 copay \$5 copay	Through Teladoc 10% ² (Cost is \$55 per visit) 10% ² (Cost is \$55 per visit)	Through Teladoc \$5 copay \$5 copay	Through Centivo FREE N/A
Telemedicine (text-based) Doctor Visit	Through 98point6 FREE	Through 98point6 FREE	Through 98point6 FREE	N/A
Calendar Year Deductible Employee Only / Family In-network Employee Only / Family Out-of-network	\$5,000 / \$10,000 N/A	\$2,000 ⁵ / \$4,000 ^{1,5} \$4,000 ⁵ / \$8,000 ^{1,5}	\$500 / \$1,000 N/A	\$1,000 / \$2000 N/A
Coinsurance (You Pay)	20%	20%	20%	N/A
Calendar Year Out-of-Pocket Maximum Employee Only / Family	\$7,000 / \$14,000	\$6,000 ⁶ / \$12,000 ⁶	\$2,000 / \$4,000	\$4,000 / \$8,000
Health Savings Account (HSA)	N/A	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2024 are \$4,150 (employee only) and \$8,300 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2024.	N/A	N/A
PCP Office Visit	\$20 copay	20% ²	\$30 copay ³	FREE
Specialist Office Visit	\$75 copay	20% ²	\$50 copay ³	\$50 copay
Urgent Care	\$75 copay ³	20% ²	\$50 copay ³	\$75 copay
Emergency Room	\$500 copay ^{2,7} then you pay 30%	\$500 copay ^{2,7} then you pay 30%	\$500 copay ^{2,7} then you pay 20%	\$500 copay
Diagnostic Testing	20% ²	20% ²	20% ²	\$20 copay
Outpatient X-ray and Lab	20% ²	20% ²	20% ²	\$20 copay
Hospitalization Inpatient Semi-Private Room Inpatient Physician	20% ² 20% ²	20% ² 20% ²	\$500 copay ² , then you pay 20% 20% ²	\$900 copay after deductible Included with copay above
Outpatient Treatment (PT, OT, ST) Hinge Health Virtual Physical Therapy	20% ² FREE	20% ² FREE	20% FREE	\$50 copay FREE
Mental Health/Substance Abuse Inpatient Outpatient	20% ² \$20 copay	20% ² 20% ²	\$500 copay then 20% ² \$30 copay ⁹	\$900 copay after deductible FREE
Pharmacy Retail Specified Preventive Drugs ⁴ Generic Brand Formulary Brand Non-Formulary Specialty Drugs	30-day supply ¹⁰ (see footnote) 100% covered ³ \$10 copay ³ \$25 copay ² \$40 copay ² 20% ^{2,8} up to \$125	30-day supply ¹⁰ (see footnote) 100% covered ³ \$10 copay ² \$25 copay ² \$40 copay ² 20% ^{2,8} up to \$125	30-day supply ¹⁰ (see footnote) 100% covered ³ \$10 copay ³ \$25 copay ³ \$40 copay ³ 20% ^{3,8} up to \$125	30-day supply ¹⁰ (see footnote) 100% covered ³ \$10 copay ³ \$25 copay ² \$40 copay ² 20% ^{2,8} up to \$125
Pharmacy Mail Service Specified Preventive Drugs ⁴ Generic Brand Formulary Brand Non-Formulary	90-day supply 100% covered ³ \$20 copay ³ \$50 copay ² \$80 copay ²	90-day supply 100% covered ³ \$20 copay ² \$50 copay ² \$80 copay ²	90-day supply 100% covered ³ \$20 copay ³ \$50 copay ³ \$80 copay ³	90-day supply 100% covered ³ \$20 copay ³ \$50 copay ² \$80 copay ²

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.

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.

CA Residents	CO Residents	OR & SE WA Residents	WA Residents	San Diego County Residents
KAISER HMO CA WITH HSA	KAISER HMO CO WITH HSA	KAISER HMO OR WITH HSA	KAISER HMO WA WITH HSA	SIMNSA Baja CA Premier Access HMO
NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY	NETWORK ONLY YOU PAY
\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$
Covered in full ³	Covered in full ³	Covered in full ³	Covered in full ³	Covered in full
20% ² N/A	20% ² N/A	20% ² N/A	20% ² N/A	N/A N/A
N/A	N/A	N/A	N/A	N/A
\$3,000 / \$6,000 ¹¹ N/A	\$3,000 / \$6,000 ¹¹ N/A	\$3,000 / \$6,000 ¹¹ N/A	\$3,000 / \$6,000 ¹¹ N/A	N/A N/A
20%	20%	20%	20%	None
\$4,425 / \$8,850	\$4,425 / \$8,850	\$4,425 / \$8,850	\$4,425 / \$8,850	\$6,350 / \$12,700
You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2024 are \$4,150 (employee only) and \$8,300 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2024.	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2024 are \$4,150 (employee only) and \$8,300 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2024.	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2024 are \$4,150 (employee only) and \$8,300 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2024.	You can contribute pre-tax dollars to an HSA through HealthEquity. IRS limits for 2024 are \$4,150 (employee only) and \$8,300 (family). You can contribute an additional \$1,000 if you are age 55 or older in 2024.	N/A
20% ²	20% ²	20% ²	20% ²	\$5 copay
20% ²	20% ²	20% ²	20% ²	\$5 copay
20% ²	20% ²	20% ²	20% ²	\$25 copay (provider in Mexico) \$50 copay (provider outside Mexico)
20% ²	20% ²	20% ²	20% ²	\$250 copay ⁷
20% ²	20% ²	20% ²	20% ²	Covered in full
20% ²	20% ²	20% ²	20% ²	Covered in full
20% ² 20% ²	20% ² 20% ²	20% ² 20% ²	20% ² 20% ²	Covered in full Covered in full
20% ² N/A	20% ² N/A	20% ² max 30 visits per year N/A	20% ² N/A	\$10 copay N/A
20% ² 20% ²	20% ² 20% ²	20% ² 20% ²	20% ² 20% ² (no charge after deductible for group therapy visits)	Covered in full \$5 copay
30-day supply 100% covered ³ \$10 copay ² \$30 copay ² N/A 20% ² up to \$125	30-day supply 100% covered ³ \$10 copay ² \$30 copay ² N/A 20% ² up to \$125	30-day supply 100% covered ³ \$10 copay ² \$30 copay ² N/A 20% ² up to \$125	30-day supply 100% covered ³ \$10 copay ² \$30 copay ² N/A 20% ² up to \$125	30-day supply 100% covered \$5 copay \$5 copay \$5 copay \$5 copay
100-day supply 100% covered ³ \$20 copay ² \$60 copay ² N/A	90-day supply 100% covered ³ \$20 copay ² \$60 copay ² N/A	90-day supply 100% covered ³ \$20 copay ² \$60 copay ² N/A	90-day supply 100% covered ³ \$20 copay ² \$60 copay ² N/A	90-day supply N/A N/A N/A N/A

7) Emergency Room copay waived if admitted.

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

9) Intensive outpatient: \$250 copay per visit plus 20% after calendar year deductible.

10) A \$10 copay will be added to the cost for any prescriptions filled at Walgreens.

11) \$3,200 individual family member.

Prescription Drug Coverage

All of the medical plans include prescription drug coverage.

Prescription Drugs with a HealthComp Plan or Centivo

Value Copay Plan, Choice HSA Plan, Premier EPO Plan or Centivo PCP Partnership Plan

When you enroll in a medical plan administered by HealthComp or you enroll in the Centivo PCP Partnership Plan, you automatically receive prescription drug coverage through CerpaxRx. The CerpaxRx pharmacy network includes all national chains and most local pharmacies. The Choice HSA Plan also has 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 CerpaxRx 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 (100-day supply with Kaiser HMO CA with HSA) you take on a regular basis for chronic conditions such as high blood pressure, asthma, diabetes or high cholesterol.

Prescription Drugs with a Kaiser HMO with HSA Plan (CA, CO, OR, WA)

When you enroll in a Kaiser HMO with HSA Plan (CA, CO, OR, WA), 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://www.kp.org/rxrefill) to order your prescription refills online. You will need to register first at [kp.org/registernow](https://www.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 for a list of network pharmacies you can use.

Find Providers in Your Medical Plan Network

Value Copay Plan

1. Go to <https://hconlinex.healthcomp.com/ensign>.
2. Click on **Find Care**.
3. Select your network from the dropdown list (based on plan name, with HPN providers or No HPN providers and location).
4. Enter your location (city and state or zip code).
5. Fill in other search criteria (such as driving distance, provider type, specialty or name of doctor or facility) or click on **Quick Search** for Urgent Care, Primary Care Physician or Behavioral Health Care.
6. Click on the **Search** button.

Choice HSA PPO Plan

1. Go to <https://hconlinex.healthcomp.com/ensign>.
2. Click on **Find Care**.
3. Select your network from the dropdown list (Choice HSA PPO - Utah or Choice HSA PPO - All other states).
4. Enter your location (city and state or zip code).
5. Fill in other search criteria (such as driving distance, provider type, specialty or name of doctor or facility) or click on **Quick Search** for Urgent Care, Primary Care Physician or Behavioral Health Care.
6. Click on the **Search** button.

Premier EPO Plan

1. Go to <https://hconlinex.healthcomp.com/ensign>.
2. Click on **Find Care**.
3. Select your network from the dropdown list (Premier EPO - Utah or Premier EPO - All other states).
4. Enter your location (city and state or zip code).
5. Fill in other search criteria (such as driving distance, provider type, specialty or name of doctor or facility) or click on **Quick Search** for Urgent Care, Primary Care Physician or Behavioral Health Care.
6. Click on the **Search** button.

Kaiser HMO with HSA (CA, CO, OR, WA)

1. Go to <https://healthy.kaiserpermanente.org/doctors-locations>.
2. Click on your geographic location.
3. Fill in the search criteria including search for (doctors or locations), zip code (optional) and keywords (optional).
4. Click on the **Search** button.

Centivo PCP Partnership Plan (So CA, Dallas, TX and Denver, CO)

1. Go to centivo.com/ensign.
2. Click on **Find a doctor or facility**.
3. Select **Doctor or Facility**.
4. If you are searching for a doctor, select a specialty from the dropdown list (optional). Add a doctor or facility name (optional) and enter your address or zip code.
5. Click on the **Search** button.

SIMNSA Baja CA Premier Access HMO

1. Go to https://www.simnsaee.net/Expediente2010/CitasOnline/proveedores/frm_proveedores.aspx.
2. Select network, type and specialty from the dropdown lists.
3. Click on **Start Search** button.
4. Click on the **Search** button.

Hinge Health: Virtual Physical Therapy Program

If you're struggling with joint or muscle pain, Hinge Health can help. Their virtual programs combine gentle exercise with 1-on-1 support to improve your condition, reduce your pain and help you move with confidence.

Whether your goal is to go hiking more, spend time in your garden or take the stairs (or all three), you can get pain relief with exercises that can be done in as little as 15 minutes – anytime, anywhere you're comfortable.

Hinge Health offers complete clinical care including innovative virtual physical therapy programs for back, knee, hip, neck and shoulder pain in easy-to-do 15-minute exercise sessions. Hinge Health also offers wearable pain relief and motion tracking, along with spinal and neck surgery support.

Join Hinge Health for exercise therapy without leaving home. No copays. No office visits. Reduce your back and joint pain in just 15 minutes a day. Best of all, there's no cost to you — your Hinge Health benefit is 100% covered if you are enrolled in the Value Copay PPO, Choice HSA, Premier EPO or Centivo PCP Partnership plans.

Learn More About Hinge Health

Online: <https://bit.ly/ensighnhingehealth>

Call: 855-902-2777

Email: hello@hingehealth.com



Health Savings Account

If you enroll in the Choice HSA Plan or a Kaiser HMO with HSA Plan (CA, CO, OR, WA), 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	
Who is eligible?	<p>You are eligible to contribute to an HSA if you are:</p> <ul style="list-style-type: none"> • Enrolled in an HSA-qualified medical plan; • Not covered by any other medical plan (through your spouse or as a retiree), including a Health Care FSA; • Not enrolled in Medicare, Medicaid or TRICARE; and • Not claimed as a dependent on another person’s tax return.
HSA advantages	<ul style="list-style-type: none"> • Your contributions are tax-free* and reduce your overall taxable income. • You never pay taxes on withdrawals for qualified health care expenses. • 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
How much can be contributed to an HSA?	<ul style="list-style-type: none"> • Up to \$4,150 if you have Employee Only coverage. • Up to \$8,300 if you have Employee + Dependents coverage. • Additional \$1,000 if you are age 55 or older. • If your account balance reaches at least \$1,000, you may choose available investment funds for your balance.
What can be paid from your HSA?	<ul style="list-style-type: none"> • 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. • For a complete list of eligible expenses visit the official IRS website at https://www.irs.gov/publications/p502/index.html.
Using your HSA Complete instructions are included in your HealthEquity Welcome Kit after you enroll	<ul style="list-style-type: none"> • Use the HealthEquity Visa® health account card, or submit expenses online at www.healthequity.com. • 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. • Your account balance is NEVER forfeited; unused amounts stay in your account.

*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://start.myalex.com/ensign>.





Telemedicine through Teladoc

Value Copay Plan, Choice HSA Plan, Premier EPO Plan

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 Teladoc 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
Value Copay Plan	\$5 copay	\$5 copay
Choice HSA Plan	10% ¹	10% ¹
Premier EPO Plan	\$5 copay	\$5 copay

¹ After calendar year deductible

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

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

Get started

Go to 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

Centivo Virtual Primary Care

If you are enrolled in the Centivo PCP Partnership Plan, you can see your primary care doctor for free from home or on the go. Centivo's Virtual Primary Care practice is a convenient alternative to in-person primary care. If you need to be seen in person, your Virtual Primary Care Team will coordinate in-person care with local, in-network providers.

Text-Based Telemedicine

Value Copay Plan, Choice HSA Plan, Premier EPO Plan

98point6 is a new kind of primary care that gives you on-demand access to a U.S. based, board-certified physician via private messaging, right from your mobile phone. You can use this service for yourself and your covered dependents* if you are enrolled in the Value Copay Plan, Choice HSA Plan, Premier EPO Plan.

Your cost for a telemedicine visit through 98point6 is based on your medical plan as shown in the table.

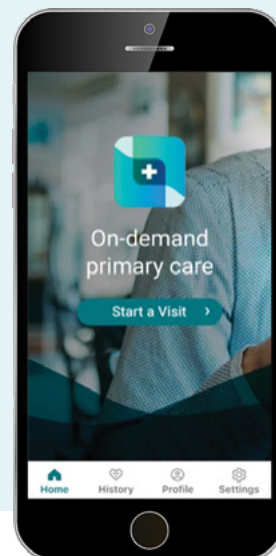
Your Cost for 98point6 Visits	
	Medical Visits
Value Copay Plan	FREE
Choice HSA Plan	FREE
Premier EPO Plan	FREE

98point6 physicians are available 24/7 to diagnose and treat 400+ common conditions and can order labs and write prescriptions.

Get Started

To get started, follow these steps:

- 1 Install the app**
Download 98point6 from the [App Store](#) or [Google Play](#).
- 2 Create your account**
No password to remember. Enter your mobile number and you will be sent a unique pin.
- 3 Start your visit**
Get text-based diagnosis and treatment and a personalized care plan, with any necessary labs ordered and prescriptions sent to your local pharmacy.



* Dependent children must be at least 1 year old.


Video or Phone Appointments with Kaiser HMO with HSA Plan (CA, CO, OR, WA)

If you are enrolled in a Kaiser HMO with HSA Plan (CA, CO, OR, WA), you can set up video or telephone appointments with your doctor on a computer or mobile device. Go to kp.org/videoappointment to make an appointment and sign on to 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.

Supplemental Medical

Voluntary benefits through Unum complement your medical coverage and can fill in coverage gaps by providing additional financial protection with premiums paid through the convenience of payroll deduction. Two important notes:

- * These voluntary plans should not be used in place of medical coverage.
- * Your basic life insurance beneficiary designation will apply if you participate in voluntary benefits.

Hospital Insurance	Accident Insurance	Critical Illness Insurance
A hospital stay or medical procedure can cost thousands of dollars. You can use this coverage to help pay for the out-of-pocket expenses medical insurance doesn't cover, such as co-insurance, co-pays and deductibles. You can get coverage for yourself and your family members.	If you are accidentally injured, this coverage can pay you money for more than 50 types of injuries, services and treatments. You can use this benefit to help cover expenses your health insurance doesn't, like co-pays and deductibles. You can get coverage for yourself and your family members.	Severe illnesses often have out-of-pocket expenses that medical insurance doesn't cover. This coverage pays you a lump sum if you are diagnosed with a covered condition. It can help you worry less about expenses so you can focus on your recovery. You can get coverage for yourself and your family members.
		\$50 Be Well Benefit The Unum Critical Illness Insurance plan pays a wellness benefit of \$50 when you and other covered family members receive important tests and screenings. You can learn more about the annual Unum Be Well benefit at www.ensignbenefits.com/health-wellness/voluntarycritical-illness .

Improve Your Health with Wellvolution

If you are enrolled in the Value Copay Plan, Choice HSA Plan or Premier EPO Plan, you have access to Wellvolution at no cost* to help you lose weight, treat diabetes, support mental health, and more. Wellvolution offers top-rated programs to help you build a healthier, sustainable lifestyle. To learn more about Wellvolution, visit <https://ensignbenefits.com/health-wellness/wellvolution>.

* Certain Wellvolution programs may have costs associated with them after completion of a free introductory period, after a specific number of coaching sessions or to purchase supplemental products such as recommended food or meal plans.

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 to see if there is a Cigna DHMO provider available in your location (not available in all geographic areas).



2024 Dental Plans At-a-Glance

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

1) After calendar year deductible.

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

3) DHMO copay schedule available on 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.

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.

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 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.

2024 Vision Plan At-a-Glance

Plan Feature	VSP Network Provider	Out-of-Network Provider
Exam for Eyeglasses Once every 12 months	\$10 copay	\$10 copay, Plan pays up to \$73
Lenses 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
Lens Options • 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
Frames Once every 24 months	Plan pays up to \$130 (\$70 for Costco)	Plan pays up to \$70
Contact Lenses 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:

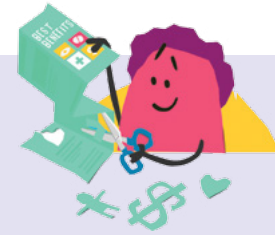
- Go to the VSP website at www.vsp.com.
- Find the “**Member**” section.
- Follow the directions to register as a site user, or fill in your User ID and password.
- Select the “**Find a Doctor**” tab.



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 (HSA). 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://start.myalex.com/ensign>.

Type of FSA	Eligible Expenses	Pre-tax Contribution
Health Care FSA	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 \$3,200 per year
Limited Purpose FSA	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 \$3,200 per year
Dependent Care FSA	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 \$3,200 each plan year on a pre-tax basis to cover eligible health care expenses.

Limited Purpose Health Care FSA (for use with HSA)

If you participate in an HSA, you can maximize your tax savings by also participating in a Limited Purpose 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 \$3,200 each plan year on a pre-tax basis to cover eligible dental and vision expenses. More information is available on the benefits website at www.ensignbenefits.com.

Dependent Care FSA

The Dependent Care FSA 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 a 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.

HealthEquity Is the FSA Plan Administrator

If you enroll in FSAs, it's easy to manage them through HealthEquity, the plan administrator. Access the HealthEquity 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 FSAs let you pay for eligible health care and/or dependent day care expenses and reduce your taxes at the same time.



HealthEquity

Online: www.healthequity.com

Phone: 877-924-3967



Transportation/Commuter Benefit Program

The Transportation/Commuter Benefit Program saves you money on taxes if you commute to and from work using public transportation. Eligible expenses include fares for bus, vanpool, subway, ferry and train. Once you sign up, funds are deducted from your paycheck automatically on a pre-tax basis, lowering your taxable income. For 2024, the maximum pre-tax transit contribution is \$315 per month. For questions, contact HealthEquity at 866-346-5800 or visit www.healthequity.com.

2024 Transit Maximum: \$315 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 ^{1,2}
Basic Life Insurance	If you die from any cause	<ul style="list-style-type: none">• 1X salary up to \$500,000 - Service Center/Cornet/ Topside/Executive Directors/Directors of Nursing• \$25,000 all other eligible employees
AD&D Insurance	If you die from an accident the benefit amount is paid in addition to basic life insurance	<ul style="list-style-type: none">• 1X salary up to \$500,000 - Service Center/Cornet/ Topside/Executive Directors/Directors of Nursing• \$25,000 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	<ul style="list-style-type: none">• A portion of the benefit, as specified in the policy

¹ The benefit amount is reduced after age 65.
² If Basic Life is greater than \$50,000, you can cap your coverage at \$50,000 to avoid imputed income tax.

Valuable Financial Support for Loved Ones

- 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 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. Coverage options are shown below.

Coverage For	Coverage Amount	Maximum	Guaranteed Issue
Employee	\$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.
Spouse	\$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).
Child(ren)	\$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 the Evidence of Insurability process in Workday and must be approved by Unum prior to coverage taking effect.

The Right Amount of Life Insurance

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 <https://start.myalex.com/ensign>.



Supplemental 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.

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.

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.

Unum 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 Benefits Support at 888-659-3616 to enroll.

Farmers Auto and Home Insurance

Through Farmers, full-time employees have access to special savings on auto insurance and quality home insurance (where available).



Auto Insurance

With custom fit coverage, you enjoy savings and benefits like:

- Special group discounts
- Automated payment options
- Claim-free driving rewards
- Car rental
- No deductible windshield repair
- Roadside assistance
- Guaranteed auto repairs for covered losses

Home Insurance (where available)

Quality home insurance coverage means your home is truly protected, along with savings and benefits like:

- Special group discounts
- Replacement cost coverage
- Referral networks
- Automated payment options

Other Protection Products

By combining auto, home and other policies, you could save even more! Coverage is available for:

- RV
- Renters
- Motorcycles
- Boat
- Condo

Get a Price Quote

To get a price quote for Home and Auto Insurance, call 855-498-3697. You will know what your savings will be within minutes. If you decide to go with Farmers coverage, they will help you make the change from your current coverage quickly and easily.

Work Life

Employee Assistance Program (EAP)

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
- 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

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

Programs and Features

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

TicketsatWork.com

You can receive a corporate discount on entertainment events through 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.
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, 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 Affiliate Tuition Reimbursement Program was established to support the CAPLICO core value: **"Passion for Learning."** The 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

- Visit the Tuition Reimbursement page under Work-Life at www.ensignbenefits.com.
- Call the Ensign Services Benefits Department at 949-540-2014 or send an email to benefits@ensignservices.net.

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 12 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

<https://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 or call **888-525-2780**.

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 <http://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 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 29222 Rancho Viejo Rd, Suite 127, San Juan Capistrano, CA 92675

Email: 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 and deferrals



Who Can Participate?

All full-time and part-time employees may join the plan on the first of the month following three months of service. You will be sent an enrollment packet by Fidelity, the Plan Administrator, before your enrollment eligibility date.

Plan Feature	Description
Your Contributions	You can contribute up to 90% of your pay on a pretax basis to the plan, up to the annual IRS limit (\$22,500 for 2024). If you are age 50 or older, you may be eligible for an additional “catch-up” contribution (\$7,500 for 2024). When you enroll you specify a percentage of your pay.
Company Contributions	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.
Roth 401(k) Feature	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.
Investing Your Account	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 **800-835-5095** or visit www.netbenefits.com.

Innovative Ways to Manage Your Pay

DailyPay

DailyPay is an optional payroll benefit that allows you to track, transfer, and save your earnings on your own schedule. It allows you to access some of your pay faster than you'd otherwise be able to.

You can use DailyPay to avoid late fees and interest charges and to help plan for expenses by:

- Monitoring real-time earnings based on hours worked (free)
- Transferring earnings next-day (free)
- Transferring earnings instantly (\$2.99)
- Saving from every paycheck (free)

For questions about DailyPay, contact DailyPay Customer Service by phone, email or chat:
Phone: **866-432-0472** (Mon-Sun, 4 a.m.-7 p.m. PST)
Email: employee.support@dailypay.com
Chat: employee.dailypay.com

Four Ways to Sign Up for DailyPay

1. Download the DailyPay App on the [App Store](#) or [Google Play](#).
2. Sign up at the DailyPay website: <http://www.dailypay.com>.
3. Text "START" to 66867.
4. Scan the QC Code using your phone's camera or QR Code Reader.



Wisely Pay Card

Wisely is a whole new way to get paid! When you sign up for a free Wisely pay card, you'll receive a reloadable prepaid card that's yours to keep no matter where you work. And with the myWisely mobile app, you'll have a simple, convenient way to manage your money, ensure your funds are secure, and plan for your financial future.

With a Wisely Pay Card, you can set up direct deposit if you are currently paid by paper check on payday. Once you have set up direct deposit with a Wisely Pay Card, you have the option to set up DailyPay.

For questions about Wisely, contact the Wisely Call Center at **866-313-6901**.

How to Sign Up for Wisely

1. Complete the Wisely Pay Card Training in Ensign Service LMS
2. Contact your HR/Payroll Representative to request a Wisely Card Packet
3. Register, activate and upgrade your card account. Information is included in the LMS Training and in your Wisely Pay Card Packet.



Notes

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 the 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.

