2027
Benefits Guide

CARSON TAHOE
HEALTH

January 1, 2027

Pick the Best Benefits For You and Your Family

Employee Benefits Designed For You

At Carson Tahoe Health, we understand that benefits are a vital part of your overall compensation package. This Benefits Guide has been created to provide you with essential information about the benefits available to you and your family.

Please note that this guide offers general and summary details about our benefits programs and should not be considered a substitute for the more detailed information provided by our insurance partners, such as certificates of coverage or master plan documents. While we strive to ensure the accuracy of the information in this guide, in the event of any conflict between the guide and the official documents from the insurance companies, the latter will be considered the final authority.

Carson Tahoe Health is committed to offering a comprehensive and valuable benefits package. To help you make the most of your options, this guide will outline the various benefits available to you for the 2027 plan year. Whether it's health insurance, dental, vision, retirement plans, or other wellness programs, we want to ensure that you choose the benefits that best suit the needs of you and your family.

Remember, changes to your elections can only be made outside of the open enrollment period or your new hire waiting period if you experience a qualifying life event. These include marriage, divorce, birth or adoption of a child, or a gain or loss of other coverage.

CARSON TAHOE HEALTH

Welcome to Your Benefits

Important Contacts

If you have questions regarding your benefits or the material contained in this guide, please contact Human Resources at (775) 445-8010

If you need additional support for an ongoing claim, coordination of care, or have any general questions regarding your coverage during open enrollment or throughout the plan year, you may also contact LP Insurance Services at the dedicated contact below.

Camille Barba
Account Manager
Phone: (775) 221-8106 / Email: Camille.barba@lpins.net

For questions about...	Carrier	Contact Information
Medical	Hometown Health	www.hometownhealth.com (775) 982-5885
HSA	Optum	www.optumbank.com (877) 470-1771
Dental	Diversified Dental Services - Administered through HTH	diversifieddental.com (775) 982-5885
Retirement (401k / Roth)	Principal	(800) 547-7754
Care Management	Attentive	(256) 543-0722
Financial Wellness	Morgan Stanley	(775) 823-8645
Vision	VSP	www.vsp.com (800) 877-7195
FSA/Dependent Care	Health Equity	www.healthequity.com (866) 346-5800
Life & Disability	The Standard	www.standard.com (888) 937-4783
Pharmacy	VtylOne	https://vtylone.com
Employee Assistance Program	ComPsych - Guidance Resources	www.guidanceresources.com (844) 703-0397

CARSON TAHOE HEALTH

Who is Eligible

If you're a full-time or part time employee at Carson Tahoe Health, you're eligible to enroll in the benefits outlined in this guide. In addition, the following family members are eligible for medical, dental and vision coverage.

- Legal Spouse who does not have insurance through their employer
- Children up to age 26
  - Children can be married and still be enrolled in your medical coverage only. Children must be unmarried to enroll in dental and vision coverage.
- Disabled children of any age who are physically or mentally unable to care for themselves (documentation may be required)

Are you ready to enroll?
During open enrollment, the first step is to review your information and current benefits in Infor. Did you move recently or get married? Verify all your personal information and make any necessary changes.

The decisions you make during open enrollment or when you're newly eligible can have a significant impact on your life and finances, so it's important to weigh your options carefully. **The choices you make at this time will remain the same until next Open Enrollment. If you do not sign up for benefits during your initial eligibility period, you will not be able to elect coverage until the next Open Enrollment period.**

When to Enroll

- Please refer to your offer letter on the date you need to enroll into benefits as a new hire. This will be the first day of the month following 31 days of employment.
- During specified Open Enrollment period designated by Carson Tahoe Health.

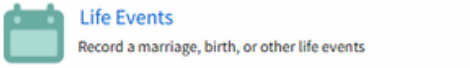
How to Make Changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Change requests must be made within **60 days** of a qualifying life event. Change requests submitted after 60 days cannot be accepted. You may be required to provide proof of the event such as a marriage certificate or record of birth.

Qualifying life events include, but are not limited to:

- Marriage, divorce or legal separation
- Birth or adoption of an eligible child
- Death of your spouse or covered child
- Change in your spouse's work status that affects his or her benefits
- Change in your child's eligibility for benefits
- Qualified Medical Child Support Order

You can make these changes by logging into Infor and clicking "Life Events", please enter the qualifying event date.



2027 Benefits

- Medical Coverage
- Dental Coverage
- Vision Coverage
- HSA + FSA Accounts
- Supplemental Insurance

Plan Year Begins:

January 1st, 2027

Plan Year Ends:

December 31st, 2027

Health Insurance 101

When reviewing the offered plans, it is important to consider how you and your family use your medical care to make the right choice for your specific situation. Not only that, but it is important to understand some common terms used by insurance carriers and healthcare providers.

Helpful Terms to Know

Network: The list of doctors and facilities that have contracted with the insurance company. Staying in network will provide the best rates when you use your healthcare benefits.

Contract rates: The amount of money the insurance company and in-network doctors/facilities have negotiated for approved services. If you receive services out-of-network there is not a contract to limit the amount a doctor or provider can charge.

Copayments: A flat dollar amount that you will pay a provider at the time you receive care.

Coinsurance: A percentage you pay based on the contracted rate negotiated for the type of service you receive.

Deductible: An amount of money that you are responsible for paying before the insurance company will begin paying for your claims. The deductible only applies to services that indicate deductible applies.

Out-of-pocket maximum: This is the most money you will be responsible for paying during a calendar year. All copays, deductibles and coinsurance paid accumulates towards your out-of-pocket maximum. Once you have met your out-of-pocket maximum you will not have to pay for any other approved in-network services.

Medical Plan Comparison

Carson Tahoe Health offers three medical plans to choose from. The plans are offered and administered through Hometown Health. Pharmacy coverage is embedded in each option.

- Members residing outside of Nevada will utilize the Cigna Network, to find an **In Network** Cigna Provider, please visit www.mycigna.com

Please refer to your Summary of Benefits and Coverages (SBCs) for full details of covered benefits.

Plan Features	Hometown Health Plus*	Hometown Health Core*	Hometown Health HDHP- HSA*
Calendar Year Deductible **Individual / Family maximum**	$500/$1,000	$1,000 / $2,000	$3,400/ $6,400
Calendar Year Out-of-Pocket Max. *Includes deductible, copays and coinsurance* **Individual / Family maximum**	$4,500 / $9,000	$6,850 / $13,700	$5,000 / $10,000
Preventive Care *Routine physical exams, immunizations, etc.*	No Charge	No Charge	No Charge
Physician Services **Primary care visit** **Specialty visit**	$20 Copay $40 Copay	$25 Copay $40 Copay	20% After Deductible 20% After Deductible
Emergency Services **Emergency room visit** **Urgent care visit** **Teladoc**	$200 Copay $40 copay No Charge	$200 Copay $40 Copay No Charge	20% After Deductible 20% After Deductible No Charge
Diagnostic Lab & Imaging (non-hospital) **Lab** **X-ray** **MRI, PET, CT scans**	No Charge 20% After Deductible 20% After Deductible	No Charge 20% After Deductible 20% After Deductible	20% After Deductible 20% After Deductible 20% After Deductible
Inpatient & Outpatient Services **Inpatient hospitalization** **Outpatient surgical care** Hospital | Ambulatory Surgery Center)	20% After Deductible 20% After Deductible	20% After Deductible 20% After Deductible	20% After Deductible 20% After Deductible
Prescription Benefit *In-network* **Tier I** **Tier II** **Tier III** **Tier IV**	$15 Copay $30 Copay After Ded. $60 Copay After Ded. 20% After Deductible	$15 Copay $30 Copay After Ded. $60 Copay After Ded. 20% After Deductible	20% After Deductible 20% After Deductible 20% After Deductible 20% After Deductible

***CTHS Tier benefit shown, see SBC for In-Network Benefits**

Health Saving Accounts (HSAs)

One of the medical plans offered by Carson Tahoe Health is a High Deductible Health Plan that is HSA compatible. It's important to understand the advantages and limitations with a HSA if you are considering electing this plan.

What is an HSA

A Health Savings Account, or HSA, is a tax-advantaged savings account owned by an individual that can be used to pay for qualified medical expenses for the account owner and their IRS qualified dependents. The contributions you make to a HSA account are made on a pre-tax basis. This means you save money on the medical expenses you pay for using your HSA because you did not pay taxes on those funds.

HSA Contributions

Carson Tahoe Health makes the following annual HSA Contributions:

- **Individual -** $500
- **Family -** $1,000

If you are age 55+, you can contribute an additional amount into your HSA.

HSA Advantages

- HSA contributions are **tax-free**
- Amount distributed for qualified medical expenses are **tax-free**
- **Your money rolls over** - never lose it until you spend it, and you take it with you wherever you go.



HSA rules

2027 IRS Contribution Limits

- **$4,500 Individual Only**
- **$9,000 Individual + One (or more)**
- **Age 55+ can make an additional $1,000 in contributions**

Eligibility Factors

- **Must be enrolled on the HSA plan.**
- **Not covered by a secondary Non-HDHP plan.**
- **Cannot be enrolled in Medicare.**
- **No VA Care in the last 3 months.**

Account Activation

- **Please note that Health Savings Accounts are individual bank accounts and must be registered and activated by the employee. If not registered and activated, you will NOT have access to the funds until you do so.**

Flexible Saving Accounts (FSAs)

FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified healthcare and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

Healthcare FSA

For 2027, you may contribute up to $3,500 to cover qualified healthcare expenses incurred by you, your spouse and your children up to the age of 26. Qualified expenses may include:

- Coinsurance
- Copayments
- Deductibles
- Prescriptions
- Dental Treatment
- Orthodontia
- Eye Exams
- Glasses/Contacts
- Lasik Eye Surgery

Dependent Care FSA

For 2027, you may contribute up to $7,500 per year per family to cover eligible dependent care expenses. Some eligible expenses include:

- Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent.

PTO Trade

- For the 2027 year, you may convert up to 40 hours of Paid Time Off (PTO) as accrued towards your Health Savings Account (HSA) or Flexible Spending Account (FSA).
- The value of the PTO hours will be calculated based on your rate of pay as of October 1, 2026.
- Converted PTO will be valued at your hourly rate (1.00 on the dollar).

The total dollar value of the converted PTO will be divided evenly across 26 pay periods and contributed to your HSA or FSA with each paycheck in 2027

FSA rules

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules

FSA funds:

IRS Requires that all unused portion of funds be forfeited 2 ½ months after the end of plan year (March 15th)

Dependent Care FSA - funds will NOT be returned to you or carried over to the following year

Enrollment:

FSAs require an annual election. You must enroll each year to participate – there is no "auto-renewing" available.

If enrolled in an HSA plan, you are not eligible for the FSA.

Get to Know Your Care Options and Cost Estimates

How much you pay for care can depend on where you get it. For serious or life-threatening conditions, call 911 or go to an emergency room. For everything else, it may be best to contact your PCP first. If seeing your PCP isn't possible, it's important to know your other care options, especially before heading to the ER.

Care Options	 24/7 Virtual Visits See a doctor whenever, wherever	 PCP Care from the doctor who knows you best	 Urgent Care Serious conditions that aren't life-threatening	 Emergency Room Life and limb-threatening emergencies
Average cost	$	$$	$$$	$$$$
Hours	24/7	Varies by Location	Varies by Location	24/7
How to connect	www.teledoc.com	Contact your PCP	Go to the nearest in-network location	Call 911 or go to the nearest ER

✓ **indicates the suggested place for care when it comes to the following conditions:**

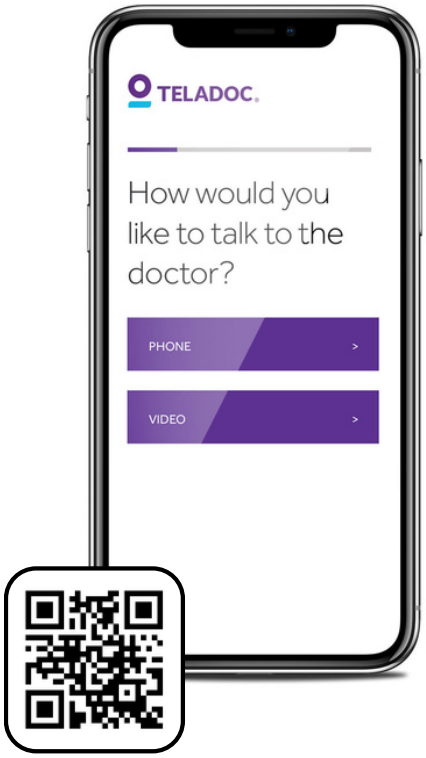
Broken bone			✓	✓
Chest pain				✓
Cough	✓	✓		
Fever	✓	✓		
Muscle strain		✓		
Pinkeye	✓	✓		
Shortness of breath				✓
Sinus problems	✓	✓		
Sore throat	✓	✓		
Sprain		✓	✓	
Urinary tract infection	✓	✓		

Hometown Health

TELADOC

Virtual Visits through Teladoc

Access your Teladoc Health benefits anytime, anywhere - 24/7/365. Scan the QR code below to activate your benefits.



General Medical
Talk to a board-certified doctor or pediatrician 24/7 for non-emergency conditions. Some examples include:

- **Prescription Refills**
- **Sinus Infections**
- **Allergies**
- **Stomach Bug**
- **COVID-19 Advice**
- **and more**

Mental Health
Talk to a therapist or psychiatrist of your choice 7 days a week from anywhere. Some examples include:

- **Stress and anxiety**
- **Depression**
- **Trauma**
- **Grief**
- **Burnout**
- **Medication management**

Dermatology
Upload images and details of your skin issue in the Teladoc Health app. A dermatologist will review them and provide a treatment plan within 24 hours. Follow up via in-app messaging for 7 days after your results.

Hometown Health

doctoroo

Bringing Back the House Call

Hometown Health has partnered with Doctoroo to provide urgent care services at your home! All for the same price as your regular urgent care copay! Avoid the crowded emergency waiting room. **Doctoroo is open from 7 am to midnight, 365 days a year.**

How it Works

Avoid an unnecessary trip to the emergency room. Let our fully equipped medical teams see you in the comfort and safety of your own home.

Simple
Book a same day house call by phone, web or app.

Fast
Receive care from a licensed clinician in your home.

Cost Effective
The cost is the same as a regular urgent care copay.

What we Treat

- Common Illnesses
- Respiratory
- Ear, Nose, Throat
- Eye
- Wound Care
- Cardio
- Musculoskeletal
- Gastroenterology
- And more!



Open 7am - midnight | 365 days a year
Doctoroo.com
888.888.9930

Hometown Health

VYTLONE

Your Pharmacy Benefits Manager

VtylOne provides easy and cost-effective ways to get your medications. Below are some things you can do before your coverage begins:

Tell your doctor that VtylOne will be your pharmacy benefit manager for refills and future prescriptions.

Understand brand-name vs. generic medications and how they affect cost.

Understand your prescription drug coverage and what you need to do to get your medication.

Download the VtylOne App or visit www.vtylone.com to better manage your prescription and pharmacy benefits.

Scan the QR code to sign in or create an account to start using VtylOne Home Delivery Pharmacy!

VYTLONE

GoodRx

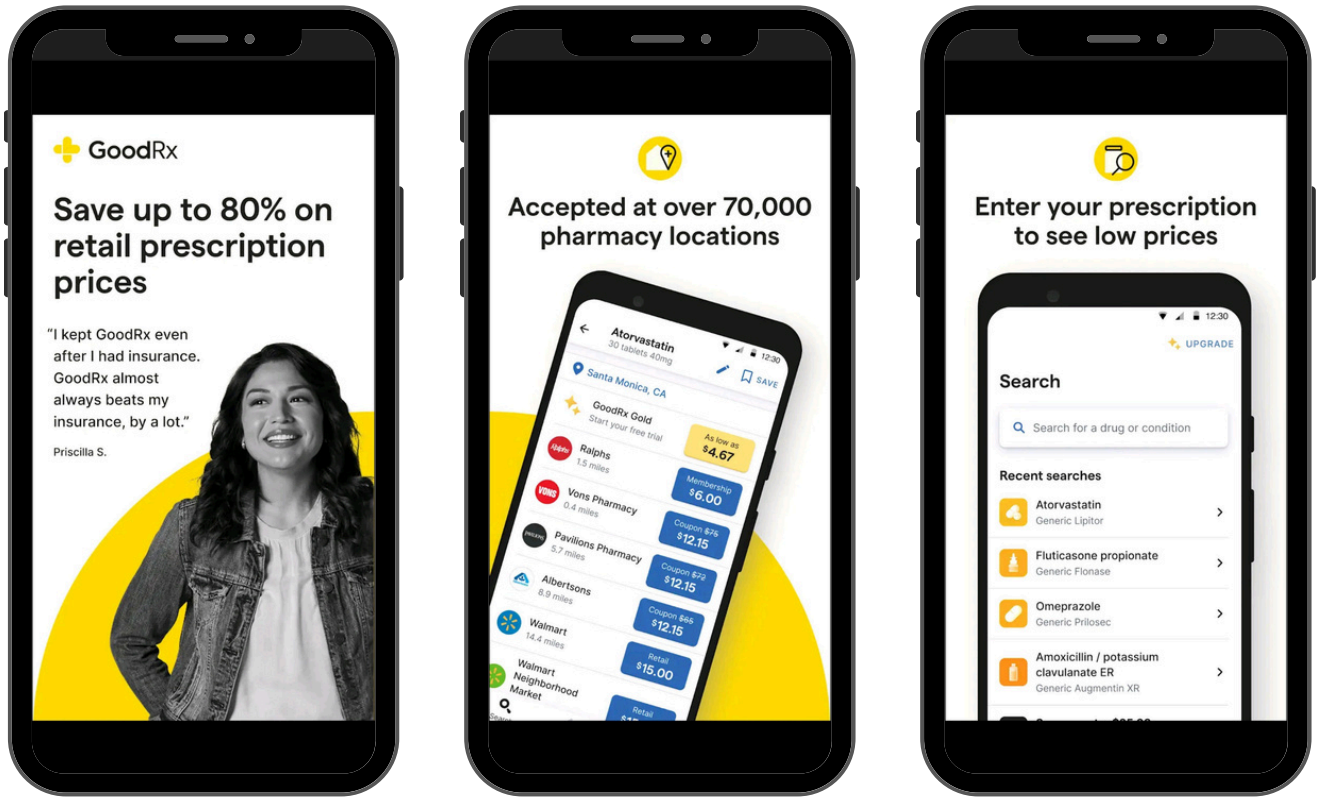
GoodRx - Retail Alternative

GoodRx gathers current prices and discounts to help you find the lowest cost pharmacy for your prescriptions. **It is 100% free and there is no registration required**!

While your out of pocket costs can be reduced, money spent for prescriptions through GoodRx do not accumulate to your medical plan deductible or out of pocket maximum.

GoodRx.com/mobile

Scan the QR Code to download the app today!



GET IT ON Google Play

Download on the App Store

***Membership available for additional savings**

MARK CUBAN CostPlus DRUG COMPANY

Start Saving With Cost Plus Drugs - Mail Order Alternative

Cost Plus Drugs offers hundreds of common drugs at the lowest possible prices and shipped right to your door. They negotiate directly with manufacturers and pass all savings directly to our patients.

Get started today in 3 easy steps!

Find your medication
Go to **costplusdrugs.com/medications/** to find your generic drugs on our medication list.

Create your account
Go to **costplusdrugs.com/create-account/** and enter your basic health information. Make sure to complete all steps.

Ask your doctor to send a new prescription to: "Mark Cuban Cost Plus Drug Co."
Put the email address you used to create your account on the Rx.

Scan the QR code or visit costplusdrugs.com to get started!

Have Questions About Medicare?

Make this transition easy by contacting your LP resource with any questions related to Medicare.
Mark Toomey
Medicare Specialist at LP Insurance Services
Mark.Toomey@lpins.net
775-297-4613

Finally, a Useful Medicare and Social Security Resource

You don't have to tackle Medicare and Social Security alone.

There are many common pitfalls when it comes to Medicare and Social Security. Avoid the mistakes and know you are making the right decisions with 90 Days From Retirement.

Resource Library

Learn the specifics of Medicare & Social Security through the Education Center that is packed with videos and articles.

On-call Experts

Call us whenever Medicare or Social Security questions arise. Get correct answers fast, so you can make wise decisions.

1-on-1 Meetings

Meet with us and we'll walk through the decisions ahead as you prepare for Medicare and Social Security, all at no cost to you.

101 Seminars

Attend an in-person Medicare and Social Security presentation where you can come with questions and leave confident in what comes next.

101 Webinars

Learn all about Medicare and Social Security from the comfort of your home, or anywhere else in the world for that matter with a virtual webinar.

Anyone can watch pre-recorded 101 presentations at any time from anywhere.

Diversified Dental Services, Inc.

Dental Plan

Carson Tahoe Health also offers dental insurance to employees and their eligible dependents. Dental coverage for the 2027 plan year will be provided by Diversified Dental Services.

- With your dental plan, you can visit any dentist, but you pay less out-of-pocket when you obtain care from a dentist who is in the DDS Network.
- You must meet your annual deductible before the plan begins paying benefits for basic or major care.
- All dental benefits are based on the negotiated rates if you utilize an in-network dentist. If you go to an out-of-network provider, you will be responsible for the difference between the negotiated fee and the amount the dentist charges.

Find a provider by scanning the QR code below!

The table below summarizes the key features of the dental plan offered. Please refer to the official plan documents for additional information on coverage and exclusions.

Diversified Dental Services, Inc.

Plan Features	Dental PPO Plan
Calendar Year Benefit Max. *Total amount the carrier pays toward your care* **Per person**	$1,500 per person
Calendar Year Deductible **Individual / Family maximum**	$75 / $225
Preventive Care *Routine exams and cleanings; deductible waived*	no charge
Basic Services *Composite fillings, endo/perio, etc.*	20% after deductible
Major Services *Crowns, onlays, etc.*	50% after deductible
Orthodontia Services *(Child/ren)*	50%
Orthodontia Lifetime Max. *Total amount the carrier pays toward your care* **Per person**	$1,000 per person

Vision Plan

Carson Tahoe Health also offers vision insurance to employees and their eligible dependents. Vision coverage for the 2027 plan year will be provided by VSP through the VSP Signature network.

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

Find a provider by scanning the QR code below!

Plan Features	VSP Signature Plan
Eye Exam	$25 copay
Benefit Frequency	
Eye exam	every 12 months
Lenses	every 12 months
Frames	every 24 months
Schedule of Benefits	
Plastic - Single vision lenses	covered in full
Plastic - Bifocal lenses	covered in full
Plastic- Trifocal lenses	covered in full
Frames	up to $170
Contact lenses - elective	up to $150

Basic Life and AD&D Insurance

Life insurance can help provide for your loved ones if something were to happen to you. **Carson Tahoe Health provides full-time Managers, Administrators & Exempt employees with $50,000 in group life and accidental death and dismemberment (AD&D) insurance and all other non-exempt employees with $10,000.**

Carson Tahoe Health pays for the full cost of this benefit - **meaning you are not responsible for paying any monthly premiums**. Make sure your beneficiary is up to date.

Beneficiary Designation

If you are married and living in a community property state, your insurance carrier may require that you designate your spouse (or in some cases a registered domestic partner) for at least 50% of the benefit unless you have a waiver notice on file from your spouse. Consult your legal or tax advisor for further guidance on this issue.

Certain Exclusions Apply
Must be Actively at work on the effective date of the policy.
Covered Person means an employee or any of his or her covered dependents.
****Guarantee Issue Amounts and Benefits Amounts reduce at age 70 by 50%***

Voluntary Life and AD&D Insurance

If you need additional coverage, Carson Tahoe Health provides you the option to purchase supplemental life insurance through The Standard. You also have the option to purchase additional life insurance coverage for your dependents. The plan can be paid for through payroll deductions taken on an after-tax basis.

Who relies on your income? Would you need to replace a spouse's income in the event of his or her death? Your answers to these questions can help you determine whether you need additional coverage, and if so, how much coverage to elect.

*If you are newly eligible, you have a guaranteed issue amount of $250,000. If you do not elect up to the guaranteed issue amount when it is first offered and you would like to purchase any amount up to guaranteed issue at open enrollment, you will be subject to health questions and evidence of insurability.

Summary of Covered Benefits	
Employee Coverage	
Benefit Amount	Increments of $10,000 up to $500,000
Guaranteed Issue	$250,000
Spouse Coverage	
Benefit Amount	Increments of $5,000 up to $250,000
Guaranteed Issue	$30,000
Child(ren) Coverage	
Benefit Amount	$10,000
Additional Features	
Portability	✓
Accelerated Death Benefit	✓

^ Spouse benefit cannot exceed 50% of employee's elected amount
^^ Children's benefit cannot exceed 50% of employee's elected amount

Beneficiary Designation

If you are married and living in a community property state, your insurance carrier may require that you designate your spouse (or in some cases a registered domestic partner) for at least 50% of the benefit unless you have a waiver notice on file from your spouse. Consult your legal or tax advisor for further guidance on this issue.

***The cost of these benefits vary. Please log into Infor to see your details.**



Basic Short-Term Disability Insurance

New this year! Carson Tahoe provides all benefited employees with short-term disability to help replace your income in the event you are unable to work due to a qualifying injury or illness. These plans are designed to help bridge the gap between your income and your expenses during extended absences from work, ensuring that you can maintain your financial stability. Carson Tahoe Health pays for the full cost of this benefit-meaning you are not responsible for paying any monthly premiums.

*** Income replacement amount and duration of benefits are subject to eligibility requirements and will be determined upon review and approval of the Short-Term Disability (STD) claim.**

***Certain Exclusions Apply**
***Must be Actively at work on the effective date of the policy.**
Covered Person means an employee or any of his or her covered dependents.

Basic Long-Term Disability Insurance

Carson Tahoe provides employees with long-term disability to help replace your income in the event you are unable to work for an extended period due to a qualifying injury or illness. The benefit will replace up to 60% of your income through the duration of your disability dependent on eligibility. These plans are designed to help bridge the gap between your income and your expenses during extended absences from work, ensuring that you can maintain your financial stability .

* Income replacement amount and duration of benefits are subject to eligibility requirements and will be determined upon review and approval of the Long-Term Disability (LTD) claim. Newly enrolling employees will have a 12-month pre-existing condition limitation for any medical conditions that treatment was sought for 3 months prior to enrollment.

***Certain Exclusions Apply**
***Must be Actively at work on the effective date of the policy.**
***Covered Person means an employee or any of his or her covered dependents.**

Worksite Benefits

Carson Tahoe Health understands the importance of comprehensive support for our employees. These benefits are provided through ***The Standard.*** Our voluntary worksite benefits, including Accident and Critical Illness coverage, are designed to complement your existing coverage, whether you are enrolled in our health plan or not, and provide financial protection against unforeseen health events.

Remember, these policies pay direct benefits to you, helping manage unexpected expenses and maintain financial stability, so you can focus on what matters most: your health and recovery. See below for more information on these policies.

Accident Insurance

How it works: Accident insurance pays out a cash benefit when you suffer from a covered accident. This benefit varies based on the type and severity of the injury sustained.

Key Benefit: The cash benefit helps handle out-of-pocket expenses not covered by your medical insurance, such as deductibles and copays, making it easier to manage financial obligations after an accident without tapping into savings.

Payouts for Covered Accident Insurance	
Emergency Room Visit	$200
Medical Appliance	$200
Leg Fracture	Up to $3,400
Hospital Admission	$1,500
Concussion	$200

Critical Illness Insurance

How it works: Critical illness insurance provides a lump-sum cash payment if you are diagnosed with one of the specified critical illnesses covered by the policy, such as invasive cancer, heart attack, or stroke.

Key Benefit: This payment helps cover unexpected medical costs and living expenses, allowing you to focus on recovery without financial worry. It's a financial safety net that supplements your health insurance to cover the extra costs that can arise during such critical times.

Hospital Indemnity Insurance

How it works: Hospital indemnity insurance provides a daily, weekly, or lump sum benefit if you are hospitalized due to a covered illness or injury, payable directly to you.

Key Benefit: This benefit helps offset the loss of income and additional expenses incurred during hospital stays, offering financial relief and peace of mind during a stressful time. It's particularly valuable for covering high deductibles and ensuring you can focus fully on your recovery.

***The cost of these benefits vary. Please log into Infor to see your details.**

***Certain Exclusions Apply*
***Must be Actively at work on the effective date of the policy.*
Covered Person means an employee or any of his or her covered dependents.

**Please refer to summary for additional covered benefits*

ComPsych

Support for Life's Tough Moments

Life can be unpredictable, but you don't have to handle it alone. **Your Employee Assistance Program (EAP), provided to you by Carson Tahoe Health through ComPsych**, offers free, confidential, 24/7 support for you and your household members, connecting you with licensed professionals and resources for life's emotional and practical challenges.

In-Person or Virtual Counseling

You can talk with a licensed counselor anytime or schedule a convenient appointment through GuidanceConnect. You'll be matched with a local provider, and **three sessions per person, per issue, per year are included at no cost.**

Work-Life Services

Your EAP also offers practical support for everyday responsibilities, connecting you with specialists who can help you navigate family, financial, and legal needs.

FamilySource
Personalized referrals and guidance for child care, elder care, adoption, special education needs, pet care, and other family-related concerns.

FinancialConnect
Access to certified financial professionals for help with budgeting, debt, taxes, retirement planning, and other financial questions.

LegalConnect
Support from local attorneys for non-employment legal matters, including wills, legal forms, estate planning topics, housing issues, and more.

Virtual Path to Clarity

Access self-guided CCBT modules on your phone, tablet, or computer to help reduce stress, build resilience, and improve emotional well-being. Topics include mindfulness, sleep, coping skills, anxiety, and depression—all at your own pace.

Available 24/7

Call

Call **844-869-2365** (TTY 711) anytime for live, confidential assistance.

Visit

Visit **guidanceresources.com** and enter **CarsonGuidance** to create account.

Download

Download the **GuidanceNow** mobile app for tools and providers

Schedule

Use **GuidanceConnect** through **GuidanceResources** to schedule counseling

Resources

Access tools and resources through GuidanceResources

401 (K) & Roth Retirement Benefits

Eligible Employees of Carson Tahoe Health System & wholly owned subsidiaries are eligible to participate in 401(k) and or ROTH Option Retirement Savings Plans.

Newly hired eligible employees will receive a welcome enrollment email approximately one month prior to their eligibility. We automatically enroll employees in 401(k) contributions at 2% with an employer match of 2%. Automatic participation begins on the first full pay period of the month following ninety (90) days of employment unless you login to your account to make changes.

Employees are 100% vested in your contribution and the employer match from the first day of contribution. You may contribute any percentage of eligible compensation up to the maximum deferral allowed by the IRS. Changes to your 401k contributions during the plan year must be entered by the Tuesday of the week prior to payday.

The company matches your contribution at the following rates:

Employee Contribution	Company Contribution
1%	1%
2%	2%
3%	3%
4%	4%
5%	4.5%
6% or more	5%

Financial Wellness:
To help you take charge of your financial life, we have teamed up with Morgan Stanley at Work to bring you a new benefit: Financial Wellness. Whether you are focused on planning for retirement, managing debt, growing your investment portfolio, or funding your child's education, you will have access to information and resources that can help empower you to meet your goals. Follow the instructions below to get started!

- **Step 1:** Scan the QR code to start your Financial Wellness Journey
- **Step 2:** Sign up with your work email or log in with your existing Morgan Stanley credentials.
- **Step 3:** Answer a few simple questions about your preferences.
- **Step 4:** Receive your personalized learning plan based on your answers.

Morgan Stanley

Tax Advantage & Attentive Care Program

Tax Advantage

Section 125 of the Internal Revenue Code governs medical, dental and vision premium contribution amounts, as well as contributions to Flexible Spending Accounts (FSA) and Health Savings Accounts (HSA). The company's Section 125 Cafeteria Plan allows health- related premium contributions to be deducted from your paycheck on a pre-tax basis. Please note, once you elect to participate in the Section 125 Cafeteria Premium Contribution Plan and/or FSA, you will not be able to change your election until the next open enrollment period unless there is a change in insurance coverage or you experience a qualified event. You may, however, make changes to your HSA election amounts throughout the year. Please see the Section 125 Summary Plan Description posted on the company intranet for details on status changes.
For employees benefits include:

- Lower taxable income: Contributions come out of your paycheck before federal income tax, Social Security (FICA), and Medicare taxes are calculated, so you owe less in taxes overall
- More take-home value: Because you're not taxed on that money, your effective spending power for things like healthcare or dependent care is higher than if you paid with after-tax dollars
- Flexibility/choice: The "cafeteria" name comes from employees being able to pick and choose from a menu of benefits that fit their needs (health insurance, FSA, dependent care, etc.) rather than a one-size-fits-all package
- Covers common needs: Often used to pay for things like health insurance premiums, medical and dependent care Flexible Spending Accounts (FSAs), and sometimes supplemental insurance (dental, vision, disability)

Attentive Preventative Care Management Program

Better Health. More Support. No Copays.
The Attentive Preventative Care Management Program gives you and your eligible family members access to valuable health and wellness resources—all with no copays.
Your program includes:

- Telehealth
- Counseling resources
- Chronic condition management
- Prescription discount program
- Diet and nutrition guidance
- Fitness and wellness tools
- Stress management resources
- And more

An Affordable Benefit
Your premiums are deducted pre-tax, creating tax savings that help offset the cost of the program. In most cases, participating employees see an increase in their net take-home pay.

Have questions or want more details? Call or text our representative John Fierro at 775-525-0902.

Employee Cost

Overview

Carson Tahoe Health is proud to provide affordable and competitive benefits to our employees and their families. Below are the employee costs for medical, dental and vision coverage. For the costs of our voluntary products, please refer to Infor. If you have any questions, please reach out to Human Resources.
Each pay period, Carson Tahoe contributes Flex Credits in the amount of $356.02 for part time employees and $473.46 for full time employees.

The following rates show your cost per paycheck for this years plan selections:

Medical Plus — PPO Plus

Employee Only	$504.09
Employee + Spouse	$783.90
Employee + Child(ren)	$689.36
Employee + Family	$919.97

Dental — Dental Plan

Employee Only	$32.74
Employee + Spouse	$54.20
Employee + Child(ren)	$48.10
Employee + Family	$73.55

Medical Core — PPO Core

Employee Only	$439.00
Employee + Spouse	$682.68
Employee + Child(ren)	$600.34
Employee + Family	$801.17

Vision — Vision Plan

Employee Only	$4.34
Employee + Spouse	$6.25
Employee + Child(ren)	$11.20
Employee + Family	$11.20

Medical HSA — PPO HDHP HSA

Employee Only	$361.67
Employee + Spouse	$562.43
Employee + Child(ren)	$494.60
Employee + Family	$660.05

Hospital Indemnity — Hospital Indemnity Plan

Employee Only	$7.93
Employee + Spouse	$13.50
Employee + Child(ren)	$11.38
Employee + Family	$20.14

Accident — Accident Plan

Employee Only	$4.76
Employee + Spouse	$7.56
Employee + Child(ren)	$9.21
Employee + Family	$14.15

* For Voluntary Life Insurance and Critical Illness Insurance please log into Infor to view your rates.

Additional Employee Benefits

At **Carson Tahoe** we understand the importance of spending time away from the world of work to be with family and loved ones. We offer a competitive paid time off, mental health days, and tuition reimbursement leave on top of the normally scheduled federal holidays.

Recongized Holidays:

- New Year's Day
- Martin Luther King Jr. Day
- Presidents Day
- Memorial Day
- Independence Day
- Labor Day
- Nevada Day
- Veterans Day
- Thanksgiving Day
- Family Day
- Christmas Day

Mental Health Day:

- Provides employees with the ability to take time for themselves away from work to recharge, practice self care and focus on mental health and wellbeing.

Tuition Reimbursement:

- Our employees are offered a generous reimbursement to further education. The funds are available for tuition, fees and books. Full and part time employees meeting specific criteria are eligible to participate.

Free Calm Subscription

Looking for a way to stress less, sleep better, and live mindfully? Calm is the award-winning mindfulness app designed to help you navigate life's daily pressures. Whether you have two minutes or twenty, Calm provides simple, effective tools to ground your day.

- **Sleep Stories**: Drift off easily with soothing bedtime tales narrated by world-class voices.
- **Guided Meditations:** Manage stress, build resilience, and find focus with sessions tailored to your schedule.
- **Relaxing Soundscapes:** Block out distractions with ambient music and nature sounds designed for focus or deep rest.
- **Breathing Exercises:** Instantly reset and lower anxiety with quick, interactive breathing tools.

Scan the QR code to gain access to your free Calm subscriptions!

Additional Perks and Opportunities

- 10% Discount at the Sage and Midtown Cafes, our hospital cafeterias
- 10% Discount on most items at the Medical Center Gift Shop
- Service Recognition
- On Site Education and Certification Programs

University of Utah Health Care & Travel Reimbursement

University of Utah Health Care (U of U) is a designated Center of Excellence when services cannot be provided at a Cigna Health Network provider or facility, and services have been pre-certified by the UTILIZATION MANAGEMENT PROGRAM. See Out-of-Network Services and University of Utah Health Care Travel Benefit in the UTILIZATION MANAGEMENT PROGRAM for further information. Eligible expenses from U of U will be processed at the "CTH and Affiliated Providers" benefit level.

Tertiary Care: Highly specialized medical care usually over an extended period of time that involves advanced and complex procedures and treatments performed by medical specialists in state-of-the-art facilities. Examples of tertiary care services are specialized cancer care, neurosurgery (brain surgery), burn care and plastic surgery.

To qualify for the Utah Travel Benefit, the following must apply:

- Covered Person and/or their treating physician has requested a referral to a specific facility/provider for Tertiary Care that is not in the primary PPO network and will require travel outside of Nevada.

- Utilization Management has determined that the requested services are medically necessary, and Tertiary Care cannot be provided in the primary PPO network.

The Utah Travel Benefit is established to offset the cost of travel for patients and/or their support person or family members when Utilization Management provides the physician and/or covered person, as an option for Tertiary Care (evaluation and/or treatment), authorization to receive treatment at the University of Utah Medical Center, Intermountain Healthcare providers or Primary Children's in Utah.

Provider Search Instructions

To ensure you receive the lowest out of pocket costs, it is always recommended you use a contracted facility/doctor. Below are step by step instructions to search for doctors and facilities that are in the network. If you have any questions, please reach out to the carrier or Human Resources.

Medical - Hometown Health
Go to - www.hometownhealth.com
Click “Find a Doctor”
Select “Nevada ___” as your Plan Network and start your search

Dental - Diversified Dental Services
Go to – www.diversifieddental.com
Click “Find a Dentist”
Select appropriate State and start your search

Vision - VSP
Go to – www.vsp.com
Click “Find a Doctor”
Type in your Zip Code and start your search

CARSON TAHOE
HEALTH

We're Here to Support You!

At Carson Tahoe Health, our employees are at the heart of everything we do. We value the important work you do each day and are committed to providing benefits that support you and your family—at work, at home, and throughout every stage of life.

We encourage you to take the time to understand your benefits and make the choices that are right for you and your family. If you have questions or need assistance, please reach out to any of the contacts listed throughout this guide. We're here to help!

Thank you for all that you do for Carson Tahoe Health. We're proud to have you as part of our CTH team!

This Guide is only intended to offer an outline of benefits. All details and contract obligations of plans are stated in the group contract/insurance documents, including any disclosures (whether regarding "grandfathering" of plans or others) required by the new health reform law, the Patient Protection and Affordable Care Act (PPACA). In the event of conflict between this guide and the group contract/insurance documents, the group contract/insurance documents will prevail. Please contact your Human Resources Department for further information.