



Annual Open Enrollment: Your Guide to 2024 Benefits

Nov. 1-15, 2023



What do employees need to do?

During open enrollment, you will have the opportunity to speak with representatives from Regence, MetLife, HSA Bank, Fidelity, VSP Vision, Guild Mortgage, Mercy Flights, Willamette Dental Group, The Standard, APP for the Asante Health Network, and Asante beWell Healthy Living Incentive Program to discuss your benefits-related questions. Spouses are welcome to attend all events.



Only employees who want to make changes to their current benefits, are enrolling or re-enrolling in a flexible spending account (FSA) for 2024 or wish to elect earned time off (ETO) cash-out need to participate in open enrollment this year. If you do nothing, your current benefits elections and covered dependents will automatically roll over into next year, ***except for FSA plan participation and ETO cash-out.***

What's new for 2024 (summary of material modifications)

HEALTH PLANS AND RATES

■ Health Plans

Primary care provider office visits, mental health office visits and telemedicine visits will have a \$0 copay for Category 1 (Asante Health Network) providers on the Asante Reimbursement Health Plan. The same services will be covered with a 0% coinsurance after the deductible is met for Category 1 providers on the Asante Savings Health Plan.

■ Asante Savings Health Plan

Per Internal Revenue Service regulations, the Category 1 and Category 2 deductible for the Asante Savings Health Plan will increase to \$1,600 (individual) and \$3,200 (family).

■ Rates

- While the Asante PPO Health Plan will have an increase in premium rates in 2024, Asante has budgeted to absorb most of the medical plan increases next year to avoid passing these on to employees. See rate chart on page 5 for details.
- The MetLife buy-up and Willamette Dental plans will have an increase in premium rates for 2024 (see rate chart on page 5).

■ Spending Accounts

- Per Internal Revenue Service regulations, the 2024 health savings account (HSA) contribution limit will increase. Employees up to age 54 may contribute as much as \$4,150 annually for employee-only coverage and \$8,300 for employees with covered dependents. Employees age 55 and older may contribute an additional \$1,000.
- Asante will be changing vendors for HSA/HRA/FSA accounts. We will be moving from HealthEquity to HSA Bank for 2024. More information about how to access your HSA/HRA/FSA accounts will be available closer to Jan. 1, 2024.

VOLUNTARY BENEFIT PLANS

- The 2024 contribution maximum for the Health and Limited-Purpose FSAs will increase to \$3,200.

- The orthodontia lifetime maximum benefit on the MetLife Dental buy-up plan will increase to \$3,000.

■ FlexAccess prescription benefit

The FlexAccess program is designed to help you save money on certain specialty medications by obtaining copay assistance from drug manufacturers when available. Once you start receiving this assistance, your copay will be between \$0-\$35 per eligible prescription. This program is available only to employees and dependents enrolled in the Asante PPO Health plan or the Asante HRA Health Plan.

To enroll in copay assistance for your brand-named specialty drug, call FlexAccess at **(888) 302-3618** Monday-Friday, 7 a.m. to 7 p.m. CST to see if your drug is on the list of eligible drugs for manufacturer assistance. If you are currently enrolled in the FlexAccess program you need to re-enroll for 2024. Pharmacy benefits experts will be on hand at the in-person benefits fairs Nov. 7-9 to help you re-enroll.

■ NEW! Paid Leave Oregon

Paid Leave Oregon is a new program that makes it easy for you to take time off to care for yourself or loved ones when you need it most, like to welcome a child into your family or to care for a sick parent. Funding for Paid Leave Oregon began on Sept. 1, 2023. Effective Sept. 3, 2023, in-state employees can apply for benefits. Paid Leave Oregon will coordinate with your ETO/ESDP and any short-term disability plan you are enrolled in not to exceed 100% of your regular wages and will be paid out on a weekly basis. **For more details, go to asante.org/employee-benefits.**

■ Employee Assistance Program

As of Jan. 1, 2024, the Employee Assistance Program (EAP), provided by SupportLinc, will cover up to six counseling sessions (increase from four sessions previously) per family member per issue each calendar year.

■ Tuition reimbursement

If you are currently participating in the Asante program that offers full-time employees the IRS max of \$5,250 and part-time employees \$2,625 for tuition reimbursement, you will need to turn in your grades and statement from your school showing class charges and all payments made for the classes. These must be submitted no later than Dec. 13, 2023. Reimbursements will be included in the final check of the 2023 year on Dec. 22, 2023. If you have any questions, email tuitionreimbursement@asante.org.

■ Student loan reimbursement

If you are making payments on a federal student loan, you can submit a screen shot of your federal student aid dashboard identifying your loan servicer plus the statement from your loan servicer showing a payment in the quarter you are requesting. The deadline for the 2023 year to submit for the fourth quarter is Dec. 10, 2023 to be reimbursed on the Dec. 22, 2023 paycheck. If you have questions, email, studentloanreimburse@asante.org.

Open enrollment events

In-person and virtual benefits fairs

Asante will host both in-person and virtual benefits fairs this year to allow all employees to connect with live representatives from Asante's benefit vendors. Talk to a representative on the following dates and times — no appointment necessary.

Virtual benefits fairs:

Nov. 2 | 7 a.m. to 4 p.m. (PST)

Nov. 14 | 7 a.m. to 4 p.m. (PST)

Got to Asante.org/benefits-fair during these hours to connect with a representative online.

In-person benefits fairs:

Nov. 7 | 7:30 a.m. to 1:30 p.m. (AACH Conference Rooms 1 and 2)

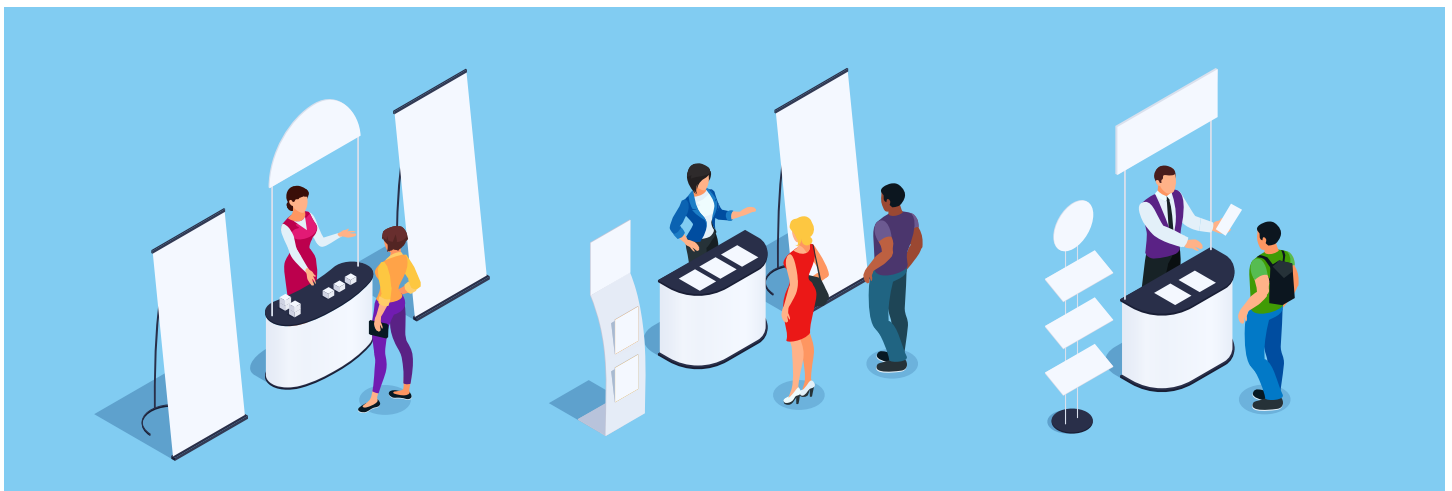
Nov. 8 | 7 a.m. to 4 p.m. (ARRMC Carpenter Rooms)

Nov. 9 | 7:30 a.m. to 3 p.m. (ATRCM, AOC Conference Room 3)

Virtual enrollment assistance

The Asante Benefits team will be available virtually during open enrollment to help you make your benefits elections on myHR. The benefits specialists will be able to remote in to your computer and help you with your elections only if you are logged into your Asante computer, not a personal computer.

Need assistance and ready to enroll? Call **(541) 789-4551** or **(800) 468-6913**, 8 a.m. to 4:30 p.m., Monday through Friday.



Eligibility rules

Only those employees and dependents as described below may be covered under the Asante Health Plans.

All active employees:

Regular | 0.9–1.0 FTE

Scheduled to work at least 72 hours per pay period

Regular | 0.7–0.8 FTE

Scheduled to work at least 56 hours per pay period

Regular | 0.5–0.6 FTE

Scheduled to work at least 40 hours per pay period

Flexible | 0.1–0.4 FTE

Scheduled to work less than 40 hours per pay period

Dependents. Your family members (dependents) may also be eligible for certain benefits. Eligible dependents for health, dental, vision and certain voluntary benefits include your legal spouse and your children who are:

- Under age 26, regardless of their marital and student status and whether they live with you or you provide any of their support; or
- Physically or mentally incapable of self-support due to a physical or mental disability that arose prior to attaining the limiting age under the plan and who are financially dependent on you for more than half of their support; or
- Under age 26 and for whom you are required by a Qualified Medical Child Support Order, judgment, decree or order issued by a court or through an administrative process established under state law to provide medical coverage.

2024 annual open enrollment, Nov. 1–15 | How to enroll



If you are planning to participate in open enrollment this year, you must do so between Nov. 1 and Nov. 15, 2023. All employees who want an FSA for 2024 must re-enroll during this open enrollment period.

The deadline to enroll is 11:59 p.m. (PST) on Nov. 15.

Employees are required to participate in open enrollment only if:

- The employee wants to enroll or re-enroll in an FSA for 2024.
- The employee wants to make changes to current benefits.
- The employee wants to add or remove dependents from coverage.
- The employee wants to elect ETO cash-out.

How to enroll



1. Go to *myHR*: <https://hr.asante.org> and click **Continue to Sign In** (if you're automatically signed in, skip to step 3).
2. You will be asked to sign in:
 - If you are completing this from home, use your Asante email address (e.g., *john.doe@asante.org*) and Asante network password.
 - If you are completing this from any Asante network workstation, use your Asante network username and password.
3. On the *myHR* home page, click the link titled **My Open Enrollment** located on the Open Enrollment widget.
4. If you plan to add new dependents to your 2024 benefits, click on the **Dependents** tab on the menu on the left side of the screen.
5. Click the **Add** button.
6. To start your enrollment in benefits, click on the **Enrollment** tab. A list of benefits will display.
7. Select only the benefits you plan to change.
8. When finished making elections, you will land on the **Review and Submit** page, or you can scroll to the bottom of the menu and click on **Review and Submit**.
9. All of your elections will display at the bottom of the **Review and Submit** page. To submit your elections, click the blue **Submit** button at the top of the page.
10. **Confirm** your submission. Once you've submitted your elections, a confirmation statement will be sent to your Asante email address.
11. To make changes to elections you have already submitted, open the session again from the **My Open Enrollment** link on the *myHR* home page and resubmit by **11:59 p.m. (PST) on Nov. 15**.

Medical/Rx

Semimonthly amount (taken from the first two pay periods of each month)

Asante PPO Health Plan	Employee only	Employee + spouse	Employee + child(ren)	Employee + family
Regular (0.9-1.0 FTE)	\$45.92	\$203.85	\$159.11	\$263.55
Regular (0.7-0.8 FTE)	\$85.64	\$249.15	\$194.48	\$322.06
Regular (0.5 -0.6 FTE)	\$122.39	\$317.10	\$247.48	\$409.90
Asante Savings Health Plan				
Regular (0.9-1.0 FTE)	\$8.41	\$77.86	\$65.56	\$106.53
Regular (0.7-0.8 FTE)	\$23.44	\$110.65	\$93.42	\$152.44
Regular (0.5-0.6 FTE)	\$38.27	\$152.42	\$118.95	\$197.02
Asante Reimbursement Health Plan				
Regular (0.9-1.0 FTE)	\$18.26	\$132.39	\$103.32	\$171.15
Regular (0.7-0.8 FTE)	\$46.97	\$161.81	\$126.30	\$209.03
Regular (0.5-0.6 FTE)	\$67.10	\$205.93	\$160.71	\$266.19
Asante Flexible Workforce Health Plan				
Flexible (0.1-0.4 FTE)	\$328.46	N/A	\$525.56	N/A

Refer to the eligibility rules for definitions of regular and flexible employees.

Dental

Semimonthly amount (taken from the first two pay periods of each month)

Regular employees	Employee only	Employee + spouse	Employee + child(ren)	Employee + family
MetLife core plan	\$5.28	\$16.20	\$15.80	\$24.08
MetLife buy-up plan	\$8.05	\$22.24	\$21.67	\$33.04
Willamette Dental Group	\$5.37	\$16.51	\$16.13	\$24.52

Vision

Semimonthly amount (taken from the first two pay periods of each month)

Regular employees	Employee only	Employee + spouse	Employee + child(ren)	Employee + family
Core vision	\$0.90	\$2.69	\$2.80	\$6.56
Buy-up vision	\$4.36	\$7.98	\$8.21	\$15.28

Asante Health Plan medical premium assistance

This program is intended to help offset a portion of the cost of health plan coverage for lower-wage employees. It is based on your hourly wage and health plan tier. Qualifying employees will automatically see the appropriate amount semimonthly in the earnings section of their check, marked "Premium Assistance."

Health plan category	2024 hourly wage	
	<\$17	\$17-\$22
Employee only	Up to \$7	N/A
Employee + spouse	\$20	\$15
Employee + child(ren)	\$20	\$15
Employee + family	\$35	\$25

For complete details about plan benefits, including plan provisions, limitations and exclusions, please refer to the Summary Plan Descriptions posted to [myHR](#) or [asante.org/employee-benefits](#). You can also find the Notice of Privacy Practices at [asante.org/employee-benefits](#) under Benefit Summaries and Legal Notices.



Medical	Asante PPO Health Plan				Asante Savings Health Plan				Asante Reimbursement Health Plan						
	Asante Preferred Network (Category 1)	Regence Network (Category 2)	Regence Limited Network (Category 3)	Out-of-network (Category 4)	Asante Preferred Network (Category 1)	Regence Network (Category 2)	Regence Limited Network (Category 3)	Out-of-network (Category 4)	Asante Preferred Network (Category 1)	Regence Network (Category 2)	Regence Limited Network (Category 3)	Out-of-network (Category 4)			
Deductible – individual	\$500			\$1,500	\$2,500	\$1,600			\$3,200	\$4,800	\$1,000	\$1,500	\$2,500	\$4,000	
Deductible – family	\$1,000			\$3,000	\$4,000	\$3,200			\$6,400	\$9,600	\$2,000	\$3,000	\$5,000	\$7,000	
Out-of-pocket maximum – individual	\$2,500	\$3,500	\$6,000	\$8,250	\$2,000	\$3,000	\$5,000	\$8,000	\$2,000	\$3,500	\$5,500	\$8,000			
Out-of-pocket maximum – family	\$5,000	\$7,000	\$12,000	\$16,500	\$3,200	\$6,000	\$10,000	\$14,000	\$4,000	\$7,000	\$11,000	\$16,000			
Office visit – primary care provider	\$10*	\$25*	\$75*	50%	0%	15%	40%	50%	\$0*	\$25*	\$75*	50%			
Office visit – specialist	\$10*	\$25*	\$75*	50%	10%	15%	40%	50%	\$10*	\$25*	\$75*	50%			
Immediate care†	\$50	N/A	N/A	N/A	10%	N/A	N/A	N/A	\$50	N/A	N/A	N/A			
Inpatient/outpatient professional	15%	15%	40%	50%	10%	15%	40%	50%	10%	15%	40%	50%			
Inpatient/outpatient facility	15%	30%	40%	50%	10%	30%	40%	50%	10%	30%	40%	50%			
Lab/X-ray	15%	30%	40%	50%	10%	30%	40%	50%	10%	30%	40%	50%			
Urgent care	N/A	\$25*	\$75*	50%	N/A	30%	40%	50%	N/A	\$25*	\$75*	50%			
Emergency Department	\$150* (waived if admitted)				15%	15%	15%	15%	\$150* (waived if admitted)						
Acupuncture (Limited to 12 visits per year)	\$10*	\$25*	\$75*	50%	10%	15%	40%	50%	\$10*	\$25*	\$75*	50%			
Chiropractic (Limited to 12 visits per year)	\$10*	\$25*	\$75*	50%	10%	15%	40%	50%	\$10*	\$25*	\$75*	50%			
beWell Healthy Living Incentives (see page 10 for details)															
Asante Health Fund	Contributions to HRA				Contributions to HSA				Contributions to HRA						
Annual basic contributions <small>Only full-time employees enrolled as of Jan. 1, 2024, are eligible. Contributions will be made in January 2024.</small>	\$0				\$300 – Employee-only coverage category \$600 – All other coverage categories				\$300 – Employee-only coverage category \$600 – All other coverage categories						
Annual beWell Healthy Living Incentive	\$525 (EE only) \$900 (EE + SP)				\$675 (EE only) \$1,225 (EE + SP)				\$750 (EE only) \$1,350 (EE + SP)						
Prescription drug (Rx)															
	Asante Pharmacies	Asante Pharmacies Retail 31-90 days	Regence Participating Pharmacies	Regence Participating Pharmacies Mail Order (90 days)	Out-of-network	Asante Pharmacies	Asante Pharmacies Retail 31-90 days	Regence Participating Pharmacies	Regence Participating Pharmacies Mail Order (90 days)	Out-of-network	Asante Pharmacies	Asante Pharmacies Retail 31-90 days	Regence Participating Pharmacies	Regence Participating Pharmacies Mail Order (90 days)	Out-of-network
Annual deductible	N/A				Not covered	Shared with medical deductible				Not covered	N/A				Not covered
Annual out-of-pocket maximum	Shared with medical out-of-pocket maximum				Not covered	Shared with medical out-of-pocket maximum				Not covered	Shared with medical out-of-pocket maximum				Not covered
Tier 1 (generic Rx)	\$5*	\$10*	\$20*	\$40*	Not covered	\$5	\$10	\$20	\$40	Not covered	\$5*	\$10*	\$20*	\$40*	Not covered
Tier 2 (preferred brand Rx)	\$40*	\$80*	\$80*	\$160*	Not covered	\$40	\$80	\$80*	\$160	Not covered	\$40*	\$80*	\$80*	\$160*	Not covered
Tier 3 (non-preferred brand Rx)	\$100*	\$300*	40% up to \$200 max	40% up to \$600 max	Not covered	\$100	\$300	40% up to \$200 max	40% up to \$600 max	Not covered	\$100*	\$300*	40% up to \$200 max	40% up to \$600 max	Not covered
Tier 4 (specialty Rx)	20% up to \$200 max	N/A	40% up to \$250 max	N/A	Not covered	20% up to \$200 max	N/A	40% up to \$250 max	N/A	Not covered	20% up to \$200 max	N/A	40% up to \$250 max	N/A	Not covered

* = Deductible waived % = Coinsurance (amount you pay) † = Immediate care services will be covered as outpatient facility/professional. The copay will be split between facility and professional.

You have the freedom to choose your providers on all Asante Health Plans; however, depending on which network your provider has chosen to participate in, it will affect your out-of-pocket costs differently.

Four categories in each plan

Each plan offers four categories of network coverage.



Best value

Category 1 — Asante Preferred Network (Jackson and Josephine counties, Oregon)

- (1) Asante providers, services and facilities and (2) independent providers, services and facilities aligned with Asante through the Asante Health Network.*



More options

Category 2 — Regence Network (applies nationwide)

- Providers, services and facilities not in the Asante Preferred Network but part of the Regence-contracted network
- Independent specialty services not offered in the Asante Preferred Network



Costlier

Category 3 — Regence Limited Network (Jackson and Josephine counties, Oregon)

- Providers and facilities that are contracted in the Regence BlueCross BlueShield of Oregon PPO Network that provide services already offered in the Asante Preferred Network



Rare

Category 4 — Out-of-network (applies nationwide)

- Providers or facilities that are not contracted with the Regence Blue Cross Blue Shield of Oregon PPO Network or providers that are not contracted with the national BlueCard network are considered non-participating (out of network)

**To check providers in the Asante Health Network go to asantehealthnetwork.org. You can also visit Regence.com to check provider categories.*

Frequently asked questions

What if my provider is in the Asante Preferred Network (Category 1) but refers me outside that network for services such as an imaging scan or laboratory test?

Imaging, lab services and procedures performed outside an Asante Preferred Network facility fall under the Regence Limited Network (Category 3).

My doctor is not in the Asante Preferred Network. Will an Asante provider be available for me?

Asante employees who choose to establish care with an Asante Physician Partners primary care provider are given preferential access. The new-patient access team can be reached at **(541) 789-1234**.

What if I want to continue seeing my specialist who is not part of the Asante Preferred Network?

If that provider offers the same clinical services as an Asante Preferred Network specialist, your out-of-pocket costs will fall under the Regence Limited Network (Category 3). If the Asante Preferred Network does not offer that specialty service, however, that provider would be under the Regence Network (Category 2).

Basic and supplemental life insurance

Asante pays for a basic life insurance policy for all regular employees, and you are automatically enrolled on the first day of the month following or coinciding with your date of hire (or benefit eligibility date). For details about this plan, please refer to *myHR*. Employees may elect to purchase additional life insurance for themselves, their spouse or their child(ren). Refer to *myHR* for rates and biweekly premium amounts. Coverage limitations are as follows.

Supplemental life insurance coverage limitations

Employee coverage	<ul style="list-style-type: none"> ■ Guarantee issue at initial eligibility: up to \$150,000. ■ Guarantee issue increases at open enrollment: \$20,000.* ■ Maximum coverage with evidence of insurability: \$450,000.
Spouse coverage	<ul style="list-style-type: none"> ■ Guarantee issue at initial eligibility: up to \$25,000. ■ Guarantee issue increases at open enrollment: \$10,000.* ■ Maximum coverage with evidence of insurability: up to \$250,000 (but not more than employee coverage**).
Child(ren) coverage	<ul style="list-style-type: none"> ■ Guarantee issue at any time: up to \$10,000. ■ Coverage options: \$2,500, \$5,000, \$7,500, \$10,000.

*Increases above the guarantee issue amount are approved following medical underwriting approval. If you or your covered spouse reaches an age shown below, the amount of life insurance will be the amount you have, reduced to the following percentage of your benefit: age 70-74: 67%; age 75 and older: 50%. Limitations apply to coverage increases when the covered member is not actively at work on the coverage effective date.

**Employee coverage includes the employee’s supplemental life insurance policy in addition to the basic life insurance policy that Asante pays for.



Additional benefits options†

- Accident insurance
- Auto and home insurance
- Critical illness insurance
- Dental insurance
- Dependent care FSA, health FSA, limited-purpose FSA
- Hospital indemnity insurance
- MetLife Legal Services
- Mercy Flights
- Pet insurance
- Short-term disability insurance
- Vision insurance

†Please refer to *myHR* or asante.org/employee-benefits for detailed benefits information.

2024 beWell Healthy Living Incentive Program

Healthy Living activities

Engage in these activities and maximize your HSA or HRA contribution for 2024! Incentives apply to enrolled employees and their enrolled spouses; some restrictions apply.

1. Annual preventive exam that is age-appropriate (complete one):

Age-appropriate preventive exams include: adult physical, routine OB/GYN exam, colorectal cancer screening, cervical cancer screening and routine mammogram. Also included are establish-care visits as well as preventive dental and vision exams.

2. Complete an interactive program on Regence Empower (13 options to choose from to support you where you are).

Interactive programs include: Improving Your Blood Pressure, Managing Your Stress, Improving Your Sleep, Enriching your Emotional Wellbeing,

Achieving Your Healthy Weight, Maintaining your Healthy Weight, Building Resilience, Enhancing Your Physical Activity, Nutrition for Better Health, Quitting Tobacco, Staying Tobacco-Free, Improving Your Oral Health and Financially Fit.

3. Complete one quarterly featured challenge on Regence Empower:

- March: Don't Lose Your Snooze
- May: Get Self-Care Aware
- July: The Bright Side of the Outside
- December: Better Together

4. The Movement Incentive includes 500,000 steps or 2,000 exercise minutes.

Employees and spouses may sync a device or app with their Regence Empower account to earn badges for completing steps or exercise minutes.

5. Designating a primary care provider requires you to complete an attestation on Regence Empower.

Annual beWell Healthy Living Incentive amounts

Healthy Living activities	Who is eligible?	Asante PPO Health Plan (HRA)	Asante Savings Health Plan (HSA)	Asante Reimbursement Health Plan (HRA)
		Award amount		
Complete an age-appropriate preventive exam.	Employee and spouse	\$50 (EE/SP)	\$125 (EE/SP)	\$125 (EE/SP)
Complete any interactive program on Regence Empower. <i>13 options to choose from.</i>	Employee and spouse	\$75 (EE/SP)	\$200 (EE/SP)	\$225 (EE/SP)
Complete one featured quarterly challenge.	Employee and spouse	\$200 (EE) \$125 (SP)	\$175 (EE) \$100 (SP)	\$200 (EE) \$125 (SP)
Movement: Get a badge for 500,000 steps or 2,000 minutes of exercise. <i>(Up to five badges per year.)</i>	Employee and spouse	\$30/badge (EE) (MAX=\$150) \$15/badge (SP) (MAX=\$75)	\$30/badge (EE) (MAX=\$150) \$15/badge (SP) (MAX=\$75)	\$30/badge (EE) (MAX=\$150) \$15/badge (SP) (MAX=\$75)
Designate a primary care provider.	Employee and spouse	\$50 (EE/SP)	\$50 (EE/SP)	\$50 (EE/SP)
Total potential incentive funds		\$900 (\$525 EE + \$375 SP)	\$1,225 (\$675 EE + \$550 SP)	\$1,350 (\$750 EE + \$600 SP)

Annual basic contribution

In addition to the above incentives, every January all full-time employees (0.9 FTE and above) enrolled in the Asante Saving Health Plan or the Reimbursement Health Plan will receive a contribution to their HSA or HRA:

- \$300 – Employee-only coverage.
- \$600 – All other coverage.



Asante Health Plan

ANNUAL REQUIRED NOTICES

This document provides you with important notices and information about the Asante Health Plan.

- Women's health and cancer rights
- Special enrollment rights
- Newborns' and mothers' health protection
- Premium assistance under Medicaid and the Children's Health Insurance Program (CHIP)

Notice about women's health and cancer rights in the Asante Health Plan

The Women's Health and Cancer Rights Act of 1998 requires group health plans to cover certain expenses relating to a mastectomy. The Asante Health Plan complies with this law and covers the following:

- Medical and surgical charges directly related to a mastectomy
- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast as necessary to provide a symmetrical appearance
- Prosthetic devices relating to such breast reconstruction
- Treatment of physical complications arising from a mastectomy

These benefits will be provided subject to the same deductibles, co-pays and co-insurance provisions applicable to other medical and surgical benefits provided under the plan.

If you have any questions regarding this law, please contact the Asante Human Resources Department at (541) 789-4551 or Regence at (888) 344-8235.

Notice about special enrollment rights in the Asante Health Plan

Loss of other coverage. If you declined enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). You do not need to wait for the next open enrollment period. You must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

New dependent by marriage, birth, adoption or placement for adoption. If you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents without waiting for the next open enrollment period. You must request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

Individuals who become eligible for state premium assistance subsidy.

If you declined enrollment for yourself or your dependents (including your spouse), you may enroll yourself or your dependent(s) in this plan if:

- The family loses its Medicaid or CHIP coverage because its employment situation improves; the family can then sign up for employer-sponsored coverage without having to wait for the open enrollment period and experiencing a gap in coverage. Enrollment must be requested within 60 days following the date of the eligibility event.
- A child becomes eligible for Medicaid or CHIP and has access to employer-sponsored coverage that the state wishes to subsidize through a premium assistance option; the family may then sign up immediately and does not have to wait for the open enrollment period. Enrollment must be requested within 60 days following the date of the eligibility event.

For information about eligibility for coverage either through Medicaid or Oregon's CHIP program (typically administered through the Oregon Health Plan), please contact the Department of Human Services:

Oregon Department of Human Services, Office of Medical Assistance Programs

Phone: (503) 945-5600

TTY: (503) 945-6214 • Email: odhs.info@odhsoha.oregon.gov

Website: oregon.gov/odhs

Address: 500 Summer St. NE E37, Salem, OR 97301-1079

To request special enrollment or obtain more information, contact the Asante Human Resources Department at (541) 789-4551.

Notice about newborns' and mothers' health protection

Group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn to less than 48 hours following a vaginal delivery or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain

authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

Notice about premium assistance under Medicaid and the Children's Health Insurance Program

If you or your child(ren) are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from its Medicaid or CHIP program. If you or your child(ren) are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the health insurance marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are not currently enrolled in Medicaid or CHIP and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office, call (877) 543-7669 or visit insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP and are eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at askebsa.dol.gov or call (866) 444-EBSA (3272).

If you live in Oregon, you may be eligible for assistance paying your employer health plan premiums. If you reside in another state, please contact Asante Human Resources at (541) 789-4551.

The following is current as of July 31, 2023. Contact your state for more information about eligibility.

OREGON – Medicaid

healthcare.oregon.gov • Phone: (800) 699-9075

To see if any other states have added a premium assistance program since July 31, 2023, or for more information about special enrollment rights, contact either of the following:

**U.S. Department of Labor
Employee Benefits Security Administration**
dol.gov/agencies/ebsa • (866) 444-EBSA (3272)

**U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services**
cms.hhs.gov • (877) 267-2323, menu option 4, ext. 61565

Notice regarding Asante Wellness Programs

The Asante Wellness Program ("Program") is a voluntary wellness program available to employees and their spouses participating in one of the Asante medical plan options. The Program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008 and the Health Insurance Portability and Accountability Act (HIPAA), as applicable, among others.

Asante Wellness Programs

The Program provides incentives of up to \$1,350 in annual contributions to the employee's health reimbursement account (HRA) or health savings account (HSA) based on the plan enrollment. These incentives are available if the employee or spouse completes one of the following tasks:

Task 1: Have one of the following preventive exams that is age-appropriate: adult physical, routine OB/GYN exam, colorectal cancer screening, cervical cancer screening and routine mammogram. Also included are establish-care visits as well as preventive dental and vision exams.

Task 2: Complete any interactive program on Regence Empower. These include: Improving Your Blood Pressure, Managing Your Stress, Improving Your Sleep, Enriching Your Emotional Wellbeing, Achieving Your Healthy Weight, Maintaining Your Healthy Weight; Building Resilience; Enhancing Your Physical Activity, Nutrition for Better Health, Quitting Tobacco, Staying Tobacco Free, Improving Your Oral Health and Financially Fit.

Task 3: Featured fitness challenge sponsored quarterly by Regence.

Task 4: Movement activities — five badges available to earn full amount.

Task 5: Designate a primary care provider.

For an employee or spouse participating in the Asante PPO Health Plan:

1. If the employee or spouse completes Task 1, the employee will receive a \$50 contribution into the employee's HRA. If both the employee and spouse complete Task 1, the employee will receive a \$100 contribution into the employee's HRA.
2. If the employee or spouse completes Task 2, the employee will receive a \$75 contribution into the employee's HRA. If both the employee and spouse complete Task 2, the employee will receive a \$150 contribution into the employee's HRA.
3. If the employee completes Task 3, the employee will receive a \$200 contribution into the employee's HRA. If the spouse completes Task 3, the employee will receive a \$125 contribution into the employee's HRA.
4. If the employee completes Task 4, the employee will receive a \$30 contribution for each badge, for a maximum of \$150 into the employee's HRA. If the spouse completes Task 4, the employee will receive a \$15 contribution for each badge, for a maximum of \$75 into the employee's HRA.
5. If the employee or spouse completes Task 5, the employee will receive a \$50 contribution into the employee's HRA. If both the employee and spouse complete Task 5, the employee will receive a \$100 contribution into the employee's HRA.

For an employee or spouse participating in the Asante Savings Health Plan:

1. If the employee or spouse completes Task 1, the employee will receive a \$125 contribution into the employee's HSA. If both the employee and spouse complete Task 1, the employee will receive a \$250 contribution into the employee's HSA.
2. If the employee or spouse completes Task 2, the employee will receive a \$200 contribution into the employee's HSA. If both the employee and spouse complete Task 2, the employee will receive a \$400 contribution into the employee's HSA.
3. If the employee completes Task 3, the employee will receive a \$175 contribution into the employee's HSA. If the spouse completes Task 3, the employee will receive a \$100 contribution into the employee's HSA.
4. If the employee completes Task 4, the employee will receive a \$25 contribution for each badge, for a maximum of \$125 into the employee's HSA. If the spouse completes Task 4, the employee will receive a \$15 contribution for each badge, for a maximum of \$75 into the employee's HSA.
5. If the employee or spouse completes Task 5, the employee will receive a \$50 contribution into the employee's HSA. If both the employee and spouse complete Task 5, the employee will receive a \$100 contribution into the employee's HSA.

For an employee or spouse participating in the Asante Reimbursement Health Plan:

1. If the employee or spouse completes Task 1, the employee will receive a \$125 contribution into the employee's HRA. If both the employee and spouse complete Task 1, the employee will receive a \$250 contribution into the employee's HRA.
2. If the employee or spouse completes Task 2, the employee will receive a \$225 contribution into the employee's HRA. If both the employee and spouse complete Task 2, the employee will receive a \$450 contribution into the employee's HRA.
3. If the employee completes Task 3, the employee will receive a \$200 contribution into the employee's HRA. If the spouse completes Task 3, the employee will receive a \$125 contribution into the employee's HRA.
4. If the employee completes Task 4, the employee will receive a \$30 contribution for each badge, for a maximum of \$150 into the employee's HRA. If the spouse completes Task 4, the employee will receive a \$15 contribution for each badge, for a maximum of \$75 into the employee's HRA.
5. If the employee or spouse completes Task 5, the employee will receive a \$50 contribution into the employee's HRA. If both the employee and spouse complete Task 5, the employee will receive a \$100 contribution into the employee's HRA.

Rules applicable to the Program and Annual Incentive Award contributions

You are not required to complete any of the tasks listed above. However, only employees and spouses who choose to complete the tasks will receive incentives under the Program.

Spouses who participate in the Program must complete an authorization form prior to receiving incentives for completing and participating in the tasks of the Program. This form is available from Asante Human Resources; to obtain a copy, please call (541) 789-4551.

If you are unable to participate in any of the tasks required to earn an incentive under the Program, you may be entitled to a reasonable accommodation or an alternative standard. If you think you might be unable to meet a standard for an incentive, you can earn the incentive by different means. You may request a reasonable accommodation or an alternative standard by contacting Asante Human Resources at (541) 789-4551. We will work with you (and, if you wish, your doctor) to find an alternative task with the same incentive that is right for you in light of your health status.

The information from any of the tasks listed above will be used to provide you with follow-up information to help you understand your current health and potential health risks, and in some cases may also be used to offer you additional services through the Program. You also are encouraged to share your results or concerns with your own doctor.

Protections from disclosure of medical information

The medical information received as part of the Program is subject to the privacy and security rules of a federal law called HIPAA. The program is required by HIPAA and our applicable law to maintain the privacy and security of your personally identifiable health information. Although the Program and Asante may use aggregate information Asante receives from the Program to improve program design based on identified health risks in the workplace, the Program will never disclose any of your personal information either publicly or to your employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the Program, or as otherwise expressly permitted by law. Medical information that personally identifies you that is provided connection with the Program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the Program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the Program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the Program will abide by the same confidentiality requirements. The only individuals who will receive your personally identifiable health information are those who will provide you with services under the Program. Task 3, completion of a personalized wellness plan with an Asante Health Coach, may include coordinating with your other Asante providers under the Program to provide follow-up information to help you understand your current health and potential health risks, and in some cases may also be used to offer you additional services through the Program. You may choose to opt-out of having your Asante Health Coach share information for this purpose.

In addition, all medical information obtained through the Program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the Program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the Program, we will notify you immediately.

You may not be discriminated against in employment if you decide not to participate in the Program or because of the medical information you provide as part of participating in the Program. You will not be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Asante Human Resources at (541) 789-4551.

Notice of nondiscrimination

- Asante complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or gender. Asante does not exclude people or treat them differently because of race, color, national origin, age, disability or gender.
- Asante provides free aids and services that allow people with disabilities to communicate effectively with caregivers and others in the organization, including:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats and other formats)
- Asante provides free language services to people whose primary language is not English, including:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Alicia Lorenz at the phone number or email address listed below.

If you believe that Asante has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or gender, you can file a grievance with:

Alicia Lorenz, acting vice president of Human Resources
2635 Siskiyou Blvd., Medford, OR 97504
Phone: (541) 789-4227 • Fax: (541) 789-4509
Email: alicia.lorenz@asante.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Alicia Lorenz is available to help. You can also file a civil rights complaint electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Ave., SW, Room 509F, HHH Building
Washington, DC 20201
Phone: (877) 696-6775 • TDD: (800) 537-7697