



WELCOME TO BOSTON MEDICAL CENTER HEALTH SYSTEM

To assist you in your benefit enrollment process, please review this Guide to Benefits and the important information featured below.

Enrollment Process

You have 30 days from your date of hire to complete your benefit elections in Workday. Benefits are effective on your date of hire. Step by step enrollment instructions on how to elect your benefits as a new hire are available on the Hub at <https://hub.bmc.org/doc/workday-benefit-transactions-tip-sheets>.

Your Dependent(s)

- **Eligibility Verification:** If you enroll a dependent in a health plan as a new hire, you will be required to verify their eligibility with Dependent Specialists, Inc. (DSI). DSI will contact you within 60 days of your enrollment via email and USPS to request the required documentation. See page 2 in the Guide to Benefits for dependent eligibility rules.
- **Out-of-State Dependents:** Enrolled children ages 19–25 can receive care for covered services wherever they reside in the US, regardless of student status. You must call HPI (844.926.2262) in advance to register your child for out-of-state coverage. HPI can direct you and your child to out-of-state providers.
- **Disabled Child over Age 25:** If you have a disabled, financially dependent child over the age of 25 that you wish to enroll, please contact Health Plans, Inc. (844.926.2262) at the time of enrollment, as they must review and confirm eligibility of any disabled adult dependents enrolled on your medical plan.

Address Updates

If you move during the year, be sure to update your address in Workday through the Personal Information app. This will ensure you receive important benefit and payroll information such as the 1095-C and W-2 tax forms.

Change of Coverage Area

If you move outside of the BMC Select enrollment area (100 miles from Boston) or outside of the BMC Tiered HMO area (New England), please be aware this may impact your ability to enroll in these plans.

Qualifying Events

Outside of your new hire election and Open Enrollment period in November, you may only make changes to your benefits if you experience a “qualifying event.” You have 30 days from the date of the event to complete the enrollment process in Workday. See page 3 of the Guide to Benefits for details.

Contact Information

You may contact the BMCHS HR Service Center with any questions:

- Phone: 617.638.8585, option 4
- Email: HRConnect@bmc.org
- Website: <https://hub.bmc.org/employee-center/benefits-resource-center>



2023 Guide to Benefits For Employees

Boston Medical Center
HEALTH SYSTEM

 **WellSense**
HEALTH PLAN



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Enrolling in Benefits

WHO IS ELIGIBLE

If you are a regular employee of BMCHS and are scheduled to work at least 20 hours per week, you and your dependents are eligible for the Boston Medical Center Flexible Benefits Plan ("Flex Benefits") as described in this booklet, unless otherwise noted.

Your eligible dependents include:

- Your legal spouse;
- Your legal children and stepchildren up to the age of 26;
- Your legal children of any age who are physically or mentally disabled as **confirmed by the health plan** and **dependent on you** for their support, provided they became disabled before age 26; and
- Your covered child's child(ren) if your child is under the age of 19 and you claim both as qualified tax dependents.

Dependents in active military service and those who live permanently outside the United States are not eligible for BMCHS coverage.

ENROLL IN WORKDAY

Whether you are enrolling in benefits as a new hire or during an enrollment period, you can access enrollment through Workday.

- New Hire and Open Enrollment elections will be listed in the **"Awaiting Your Action"** section.
- For mid-year changes and updating your 403(b) Retirement elections, go to the Workday **Benefits app**.

Download a click-by-click guide on how to enroll from hub.bmc.org/employee-center/hr-forms.

Dependent Verification

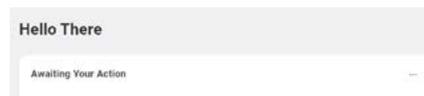
Dependent eligibility is routinely verified. Please ensure you have documentation available for submission when requested. Required documentation can be found at hub.bmc.org/employee-center/benefits/health-and-insurance-benefits.



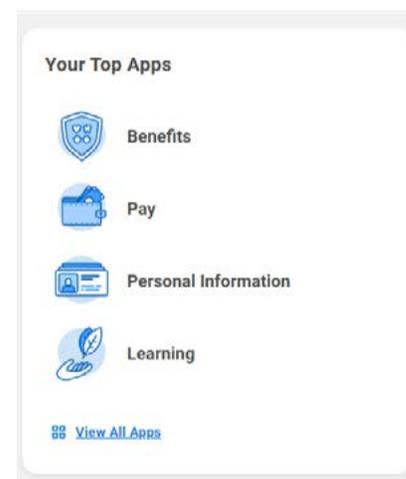
What are Flex Benefits?

Flex benefits are a variety of health and insurance plans available to you to choose from. This allows you to customize your benefits package to best meet the needs of you and your family.

"Awaiting your Action" section for New Hire and Open Enrollment



Benefits app for mid-year changes



WHEN TO ENROLL

There are three opportunities to elect coverage or make changes to your flex benefits.

1 When you are newly hired

If you are a new hire, you have **30 days from your hire date** to elect your benefits which begin on your date of hire.

Once you make your election, your benefits will be effective until the end of the calendar year – unless you have a life event that lets you change your coverage.

2 During Open Enrollment

Each November you will have an opportunity to review your current benefits and make changes, or enroll for the first time. The changes you make take effect the following January 1.

- **If you do not enroll** or make changes online during Open Enrollment, your current benefits remain in effect in the new plan year, with the new payroll deductions for that year. The exceptions are the Flexible Spending Accounts (FSA): you must re-enroll in an FSA each year if you want to participate.
- **For new hires, if you are within your 30-day election window during the Open Enrollment period**, you will need to enroll in benefits for the remainder of the current year – in addition to making your benefit elections for the next year.

3 If you experience a Qualifying Life Event

Sometimes an event, such as a marriage or a birth, means you need to change your benefits or who you cover. In that case, you have **30 days from the event date** to complete your elections in Workday. Some Qualifying Life Events include:

- Birth or adoption of a child;
- Marriage or divorce;
- Death of your spouse or child;
- Your child no longer qualifies as an eligible dependent under the plan(s);
- A change in your spouse's employment status that affects their benefits eligibility;
- A change in your employment status that affects your benefits eligibility;
- Your spouse has a conflicting Open Enrollment period.



Changing your benefits mid-year

If you or a family member experience a Qualifying Life Event, you can make IRS-allowable changes to your benefits. Instructions on how to do so are available at hub.bmc.org/employee-center/hr-forms.

- Request a change online in **Workday**. Be prepared to upload supporting documentation.
- Submit your request within 30 days of the event.
- The Benefits Office will review your request and documentation to see if you qualify to make your requested changes.
- The effective date for benefits changes **will be the day you submit your request**, except in the event of the **birth or adoption of a child** ("Special Enrollment Rights") which **will be effective on the birth/ placement date**.

You cannot change your benefits mid-year if:

- You missed the 30-day limit to submit your elections; or
- You do not provide the documentation required.

In this case, you will have to wait until the next Open Enrollment period to make any changes.



Your Health

Medical & Prescription, Dental, and Vision Plans

BMCHS offers three comprehensive medical plans. Depending on which plan you choose, you will have different contributions out of your paycheck, pay different amounts when you receive care, and have access to different networks of providers.

BMC SELECT

A Great Place to Work. A Great Place to Receive Care.

The BMC Select plan is built around our nationally recognized physicians and facilities. **BMCHS covers the cost of this plan.** You can choose from a wide selection of providers and most services are covered in full when you and your family receive your care within the BMC Select network. There is no out-of-network coverage. To enroll in this plan, you must live within 100 miles of BMC.

Contributions: There are no payroll contributions.

Cost of Care: As long as you receive care in the BMC Select network, most services are free, or have a \$7 copay.

PCP/Referrals: You must have a Primary Care Provider (PCP), but you don't need referrals for specialty care within BMC. (However, certain department or specialists at BMC may still require one.)

Network: You and your covered family members must receive care from the BMC Select network. This includes Boston Medical Center, Boston University Affiliated Providers (BUAP) and most providers at the Boston HealthNet Community Health Centers.

Out-of-Network Coverage: There is no coverage for services received outside the BMC Select network - with a few exceptions: ER, Same Day Care (urgent care centers, CVS Minute Clinics, Doctor on Demand telemedicine), behavioral health, dialysis, acupuncture or services BMC doesn't provide, like chiropractic and pediatric dental.



Who's in the BMC Select network:

1. All BMC providers

2. Boston HealthNet

Community Health Centers:

Attleboro: Manet Community Health Center

Dorchester: Codman Square Health Center, DotHouse Health, Upham's Corner Health Center, Geiger-Gibson Community Health Center, Neponset Health Center

East Boston: East Boston Neighborhood Health Center

Hull: Manet Community Health Center

Mattapan: Mattapan Community Health Center

Plymouth: Harbor Health

Quincy: Manet Community Health Center (5 locations)

Roslindale: Greater Roslindale Medical and Dental Center

Roxbury: Dimock Center, Whittier Street Health Center

South Boston: South Boston Community Health Center (4 locations)

South End: South End Community Health Center

Taunton: Manet Community Health Center

Not all providers in the HealthNet Community Health Centers are part of the BMC Select Network. Call 844.926.2262 or visit healthplansinc.com/bmc to confirm.

Using the BMC Select network

- Providers in the BMC Select network **cost little or nothing** for members in the **BMC Select** plan.

Care allowed outside the BMC Select network

- Chiropractic services, behavioral health, acupuncture, dialysis and pediatric dental within the Harvard Pilgrim network are all treated as part of the BMC Select network. For services not provided by BMCHS, you or your doctor may submit a request by contacting HPI member services for an “extra-contractual” payment.

BMC TIERED HMO

Your Choice of Care.

To enroll in this plan, you must live in one of the 6 New England states. With this plan, you have access to the Harvard Pilgrim network.

Contributions: See Paying for Coverage on page 8.

Cost of Care: Copayments are determined based on the type of service you receive and where you receive it. Most Harvard Pilgrim network providers are in a lower cost Core Tier. However, a limited number of services will have a higher copay at a limited number of higher cost locations. See pages 10 and 11 for full details.

PCP/Referrals: You need to choose a Primary Care Provider (PCP), and get referrals for most kinds of specialty care.

Network: You and your covered family members can receive care from any hospital or provider in the Harvard Pilgrim network, including at BMC.

Out-of-Network Coverage: Other than emergency care or Same Day Care options, no services are covered out-of-network.



For New Hires

- New hires must log in to Workday and waive coverage if you already have coverage outside of BMCHS.
- If you do NOT select a plan or you DON'T waive coverage, you will be defaulted into the BMC Select plan.
- For remote workers who live outside of New England or if you do not update your address in Workday after you move into New England, you will be defaulted into the HPHC PPO.
- All default enrollment will be at the individual coverage level for the remainder of the calendar year. Due to insurance industry rules, this will become your Primary Plan. You will need to file a Coordination of Benefits for every service not covered by your default plan.



Sign up for MyChart

Employees who receive their care at BMC have access to MyChart, a free and secure health information portal. With MyChart you can communicate with your doctor, view details of your appointments, review your medical history, receive test results, and search health education topics.

Go to mychart.bmc.org and click the “Sign Up Now” button to get started.

Parking for Patients at BMC

Parking validation is available when you or your family member has a medical appointment at BMCHS.

Patient parking is \$8/day at the 710 Albany St. garage. You may request validation at your outpatient visit, or, show proof of your appointment when paying the garage cashier.

HPHC PPO

Go In- or Out-of-Network.

The Harvard Pilgrim Health Care PPO plan offers coverage for services received in- and out-of-network. However, your costs will be lower when you receive care from in-network providers.

Contributions: See Paying for Coverage on page 8.

Cost of Care: This plan has the highest out of pocket expenses. For most services other than preventive care, you pay an annual deductible before coverage applies. Once you pay the deductible, you are responsible for a percentage of the cost of most services until you reach the annual out-of-pocket maximum.

PCP/Referrals: You do not need to choose a Primary Care Provider (PCP), although it is recommended. You do not need referrals to see specialists.

Network: You may go in or out of the Harvard Pilgrim network.

In-Network care

Hospitals and providers in the Harvard Pilgrim network, including BMC services, are in-network for members on the HPHC PPO. This includes the vast majority of Massachusetts providers.

Out-of-Network Care

- Members on the **HPHC PPO** plan can also receive care outside of the Harvard Pilgrim network.

Out-of-network services are much more costly than in-network care. You are responsible for paying the full price for out-of-network services each year until you reach your **annual deductible**. Once you reach the deductible, you will pay 20% or 30% of the cost of care – depending on the services you receive – until you reach your annual **out-of-pocket maximum**.

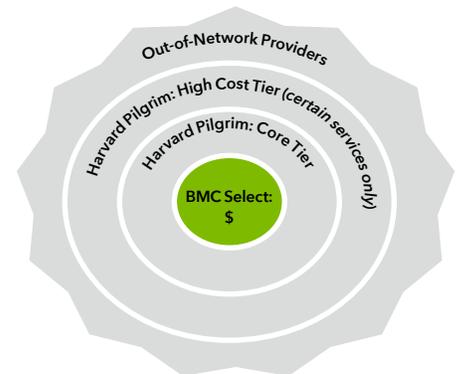
Furthermore, if you use out-of-network services and your provider bills you a higher amount than what Harvard Pilgrim pays for that service, YOU are responsible for those added costs. This is called **balance billing**, and it does not count towards your out-of-pocket maximum.

Provider Networks

Each of our medical plans gives you access to one or more provider networks. The wider the network, the more you pay for care: from very little at BMC to larger amounts out-of-network.

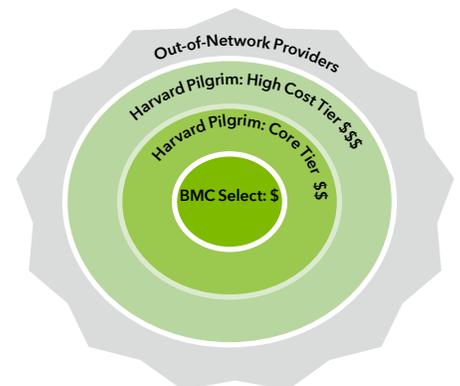
BMC Select Plan

You have access to the BMC Select network.



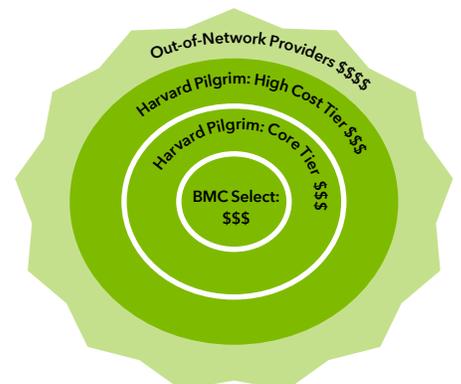
BMC Tiered HMO

You have access to Harvard Pilgrim in-network providers.



HPHC PPO

You have access to all Harvard Pilgrim providers plus out-of-network providers.



BENEFITS ACROSS ALL PLANS

Same Day Care Options

Emergency Room Care is covered at any location in the world. If you are hospitalized, call your PCP within 48 hours, or as soon as you can (or ask someone to do it for you).

Need Same Day Care and your PCP isn't available or you're traveling away from home? View the Choosing the Right Care Option directory in the "Your Plan Options" section of www.healthplansinc.com/bmc. These three same-day options are all available for just a **\$7 copay**.

Doctor on Demand: You and covered family members can consult with a doctor live using online video from your phone or computer. Visit doctorondemand.com/health-plans-inc for details.

CVS Minute Clinics: Are available throughout the United States with extended hours on evenings and weekends. Visit www.cvs.com/minuteclinic for hours and locations.

Urgent Care Centers: Stand alone sites not at a hospital are readily available. Most local Centers are part of our medical plans. Call HPI at 844.926.2262 to confirm.

Please note: BMC's Rapid Assessment Zone is part of the emergency room, and not an urgent care center. Therefore, you will be charged the \$150 emergency room copay.

Coverage for Dependents

Dependent children (under the age of 19) in the BMC Select and BMC Tiered HMO plans must live in your Plan's enrollment area.

Adult dependent children (ages 19-26) can be covered on any plan, regardless of which state they live in or their student status. Please call HPI at 844.926.2262 to register your child for out-of-area coverage and to receive a list of available providers.

Adult disabled dependent children must be deemed disabled by HPI while actively enrolled in an employee medical plan, prior to the child turning age 26. Call HPI to obtain the necessary documentation to complete the process. Recertification may be required.

LYRA HEALTH

Lyra Health provides access to mental health coaching, therapy, and medication management via live video, messaging, phone, or in-person care. Additional mental health care through self-guided exercises are also available. To get started, visit bmc.lyrahealth.com and use Learning Code "#bmchs123".



Is My Doctor In-Network?

Go to healthplansinc.com/bmc or call 844.926.2262 to find out if your doctor is covered and what your out-of-pocket costs will be.

Download these apps for ease and convenience!

- **Lyra Health:** Connect directly with a mental health provider or access other digital tools and resources.
- **Doctor on Demand:** Consult with a doctor 24/7
- **Pocket Rx:** Manage your prescriptions at BMCHS pharmacies
- **WithMe Health:** Receive personalized assistance 24/7 on your prescriptions to lower your costs and improve your health outcomes.



Decide on a PLAN

- BMC Select Plan** provides free coverage for members. Most care must be provided at BMC.
- BMC Tiered HMO** provides coverage throughout New England.
- HPHC PPO** provides out-of-network coverage and has highest cost share for members.

CHOOSING YOUR PRIMARY CARE PROVIDER

A Primary Care Provider (PCP) is a doctor or nurse practitioner you choose to serve as your regular provider: someone you see for annual checkups. Your PCP can refer you to specialists and coordinate the medical services you need.

In the BMC Select plan:

You need a PCP, but you won't need referrals for specialty care covered under the plan (unless required by the specialty department). HPI will assign a BMC Select network PCP to you at the time of enrollment. You may change your PCP at any time by calling HPI's Member Services Department at 844.926.2262.

In the BMC Tiered HMO plan:

You need to choose a PCP - and you must receive referrals for most kinds of specialty care. Otherwise, your PCP functions the same as in the BMC Select plan. To choose your PCP, you may call HPI Member Services at 844.926.2262 or sign into your account at www.healthplansinc.com/bmc.

In the HPHC PPO plan:

You do not need to select a PCP in the PPO plan, but you are encouraged to have one to coordinate your care.



Covering Family

We offer four coverage levels on the medical plans:

- Employee: Yourself
- Employee + Child(ren): You and one or more children
- Employee + Spouse: You and your spouse
- Family: You, a spouse, and one or more children

PAYING FOR COVERAGE

BMCHS covers most of the cost of the benefits we offer. Your contributions, which you pay through pre-tax payroll deductions, cover the rest. Your contributions each pay period depend on your scheduled hours, your plan, and the family members you cover.

Compare Medical Plan Costs

| | BMC Select | BMC Tiered HMO | HPHC PPO |
|-------------------------------|--|----------------------------------|-----------------------|
| (PCP) required? | Yes | Yes | No |
| Out-of-Network Coverage? | No (only in case of emergencies) | No (only in case of emergencies) | In and Out-of-Network |
| Referral to see a Specialist? | No (unless required by BMC department) | Yes | No |
| Cost? | \$ | \$ \$ | \$ \$ \$ |

Biweekly Medical Contributions for 2023

| Medical Plans: | 20 - 35 hour work week: | | | | 36 - 40 hour work week: | | | |
|----------------|-------------------------|-----------------------|-------------------|----------|-------------------------|-----------------------|-------------------|----------|
| | Employee | Employee + Child(ren) | Employee + Spouse | Family | Employee | Employee + Child(ren) | Employee + Spouse | Family |
| BMC Select | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| BMC HMO | \$140.58 | \$253.02 | \$323.31 | \$470.91 | \$70.29 | \$126.51 | \$161.66 | \$235.45 |
| HPHC PPO | \$152.99 | \$275.37 | \$351.85 | \$512.49 | \$76.49 | \$137.68 | \$175.93 | \$256.24 |

Prescription Drug Benefits

Your prescription drug benefits are the same, regardless of which BMCHS medical plan you choose.

Where can I get my prescriptions filled?

You have the option of filling them at a BMCHS pharmacy or through pharmacies that belong to Express Script's network.

You save the most when you get your prescriptions filled at a BMCHS pharmacy. **You can save 75% or more off your copays** and have the convenience of filling your prescriptions right where you work! You can take advantage of BMCHS's offsite mail order pharmacy, Cornerstone Health Solutions and have your prescriptions mailed to your home. Or, there's even a concierge program that **delivers your medications directly to you at your work site on the hospital campus**. The BMCHS pharmacies can also assist you with transferring your current prescriptions to their locations.

For maintenance medications, you will save when you order refills for 90 days instead of 30 - either at a BMCHS pharmacy or mail order. Please note, there is no coordination of benefits with the pharmacy program.

What do prescriptions cost?

Prescription drugs are divided into tiers. When you fill a prescription, your copay will depend on which tier the drug is in. Visit www.express-scripts.com/bmc to learn more.

- **Tier 1:** Composed mostly of generic drugs, which contain the same active ingredients as brand-name drugs but cost less. You can always ask your pharmacist if there is a generic alternative to a brand-name drug.
- **Tier 2:** This tier includes both high-cost generic drugs and lower-cost preferred brand-name drugs.
- **Tier 3:** These are higher-cost brand-name drugs.
- **Tier 4:** These are a limited number of extremely high-cost specialty drugs for certain conditions.

Prescription Drug Copays for 2023

| Type of Drug | 30-Day Supply Copay | | 90-Day Supply Copay | |
|-------------------------|---------------------------|--------------------------|-------------------------------|--------------------------|
| | BMC Pharmacies | Other Pharmacies | BMC Pharmacies and Mail Order | Other Mail Service |
| Tier 1 Drug | \$5 | \$20 | \$10 | \$40 |
| Tier 2 Drug | \$10 | \$40 | \$20 | \$80 |
| Tier 3 Drug | \$20 | \$80 | \$60 | \$240 |
| Tier 4 Drug (Specialty) | \$20 (cost may be waived) | 20% of cost, up to \$250 | \$60 (cost may be waived) | 20% of cost, up to \$750 |



Virtual Pharmacy Program: WithMe Health

WithMe Health offers personalized assistance to employees and their family members on a BMCHS medical plan with Health Plans, Inc. This virtual resource is available 24/7 to provide guidance, address side effects, and review your medications to help improve your health outcomes and lower the cost of your prescriptions.

A WithMe "guide" may contact you directly to discuss your prescriptions. You may also download the "WithMe Health" app to have all of your family's medications at your fingertips, to chat with a prescription expert, and see more details on your pharmacy costs.

BMC Pharmacies

Cornerstone Health Solutions (BMCHS Mail Order Pharmacy): 781.805.8220
 • M-F: 7:00 AM - 6:00 PM

Employee Pharmacy at Yawkey: 617.414.4883
 • M-F: 9:00 AM - 8:00 PM
 • Sat: 9:00 AM - 4:00 PM
 • Sun: 10:00 AM - 2:00 PM

Doctor's Office Building: 617.638.8130
 • M-F: 8:00 AM - 6:00 PM

Shapiro Pharmacy: 617.414.4880
 • M-F: 7:00 AM - 7:00 PM
 • Sat: 9:00 AM - 5:00 PM
 • Sun: 10:00 AM - 3:00 PM

Connect with a BMCHS Pharmacist

Sign up for mail order, request a refill, ask a question on a medication, and more.

DG-EmployeePharmacyServices
 @bmc.org

Health Plan Comparison

| Plan Features | BMC Select | BMC Tiered HMO | | HPHC PPO | |
|------------------------------------|--------------------------------------|--------------------------------------|----------------|--------------------------------------|--------------------------------------|
| | at BMCHS | Core Tier | High Cost Tier | In-Network | Out-of-Network* |
| Annual Deductible | none | none | | \$1,500/individual \$3,000/family | \$2,000/individual \$5,000/family |
| Out-of-Pocket (OOP) Maximum | \$2,500/individual \$5,000/family | \$3,000/individual \$6,000/family | | \$3,000/individual \$6,000/family | \$3,000/individual \$6,000/family |

- The Annual Deductible is what you pay each year before you pay just a copay or coinsurance.
- The OOP Maximum is the most you will pay in a year for covered services (such as deductibles, copays and coinsurance).
- * In the PPO, out-of-network providers may charge balance billing, charges beyond the usual and customary amounts allowed by insurance companies. Balance billing only arises from out-of-network services and does not count towards the OOP maximum.

When you visit a provider or have an emergency:

| Service | BMC Select | BMC Tiered HMO | | HPHC PPO | |
|---|-------------|----------------|----------------|----------------------------------|----------------------------------|
| | at BMCHS | Core Tier | High Cost Tier | In-Network | Out-of-Network |
| Preventive Care (routine physical, mammograms, immunizations) | \$0 copay | \$0 copay | | \$0 copay | Deductible, then 30% coinsurance |
| Primary Care Visits | \$7 copay | \$25 copay | | \$50 copay | Deductible, then 30% coinsurance |
| Specialist Office Visits | \$7 copay | \$30 copay | | \$65 copay | Deductible, then 30% coinsurance |
| Chiropractic Care (limited to 16 visits per calendar year) | \$20 copay | \$20 copay | | \$20 copay | Deductible, then 30% coinsurance |
| Acupuncture (limited to 16 visits per calendar year) | \$20 copay | \$20 copay | | \$20 copay | Deductible, then 30% coinsurance |
| ER Visit | \$150 copay | \$150 copay | | \$150 copay | |
| Emergency Admission | \$0 copay | \$0 copay | | Deductible, then 20% coinsurance | |

When you stay at a hospital or other facility:

| Service | BMC Select | BMC Tiered HMO | | HPHC PPO | |
|--|------------|----------------|-----------------|----------------------------------|----------------------------------|
| | at BMCHS | Core Tier | High Cost Tier | In-Network | Out-of-Network |
| Inpatient Hospital Services (per admission) | \$0 copay | \$250 copay | \$1,000 copay** | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| Skilled Nursing Facility (up to 100 days per calendar year) | \$0 copay | \$0 copay | | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| Inpatient Rehab. (up to 60 days per calendar year) | \$0 copay | \$0 copay | | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |

When you have a same-day hospital or lab visit:

| Service | BMC Select at BMCHS | BMC Tiered HMO | | HPHC PPO | |
|---|------------------------|----------------|----------------|----------------------------------|----------------------------------|
| | | Core Tier | High Cost Tier | In-Network | Out-of-Network |
| Day Surgery | \$0 copay | \$100 copay | \$650 copay** | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| Laboratory Tests and X-rays | \$0 copay | \$0 copay | | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| Chemotherapy and Radiation Therapy (per visit) | \$0 copay | \$0 copay | | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| High End Radiology at a Physician's Office or Non-Hospital Facility | \$0 copay | \$50 copay | \$400 copay** | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| High End Radiology at a hospital | \$0 copay | \$100 copay | \$400 copay** | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |

When you need maternity services:

| Service | BMC Select at BMCHS | BMC Tiered HMO | | HPHC PPO | |
|--|-----------------------------|-----------------------------|----------------|----------------------------------|----------------------------------|
| | | Core Tier | High Cost Tier | In-Network | Out-of-Network |
| Infertility Services | Depends on service provided | Depends on service provided | | Depends on service provided | Deductible, then 30% coinsurance |
| Prenatal and Postpartum Care | \$0 copay | \$0 copay | | \$0 copay | Deductible, then 30% coinsurance |
| All Hospital Services for Mother (per admission) | \$0 copay | \$100 copay | \$650 copay** | Deductible, then 20% coinsurance | Deductible, then 30% coinsurance |
| Routine Nursery Charges for Newborn | \$0 copay | \$0 copay | | \$0 copay | Deductible, then 30% coinsurance |

****Please Note:** The current High Cost Tier is comprised of Brigham and Women's Hospital, Boston Children's Hospital, Cape Cod Hospital, UMass Memorial Medical Center and Mass General Hospital.

How to read this table

- With a **copay**, you pay this flat amount for the service each time you receive care.
- With **coinsurance**, you pay this percent of the bill.
- **"Deductible"** means that you pay the deductible first. When the deductible is met for the year, then either copay or coinsurance applies.

Dental Plans

CHOOSE FROM TWO DENTAL PLANS

Delta Dental offers two plans to allow you to select the plan that best meets your needs.

Select a Plan

- **Delta Dental Core:** This Plan has comprehensive coverage for all dental needs with a lower premium cost for members.
- **Delta Dental Enhanced:** This Plan has a higher level of coverage for members who prefer to have lower out-of-pocket costs by paying a higher premium.

Gain Access to Two Networks

Whether you select the Core or Enhanced Plan, you have the flexibility to access two different Delta Dental networks that allow you to manage your out-of-pocket costs. An estimated 95% of the providers in Massachusetts, and ¾ of providers nationally participate in one or both networks, so you are covered where you live and where you may travel.

- **The Delta Dental PPO network:** a smaller network of dentists who offer dental care at a deeply discounted rate, allowing you to maximize the value of your plan
- **The Delta Dental Premier network:** provides a larger network of dentists, but you will have a higher out-of-pocket cost for services not covered in full

You can also see a dentist outside of the contracted networks - however, you will likely pay more. All out-of-network claims must be submitted within one year of the date of service.

Find a provider

To find a provider or to see if your current provider is in one of the networks, visit www.deltadentalma.com and click on "Find a Dentist", or call 855.343.4275.

This is an example of how your Plan and Network selection can impact your out-of-pocket costs.

| Porcelain Crown Procedure | PPO Network | Premier Network | Out-of-Network* |
|--|--------------|-----------------|-----------------------|
| Standard Rate | \$1,288 | \$1,288 | \$1,288 |
| Delta Dental Contracted Rate | \$928 | \$1,094 | <i>not contracted</i> |
| Core Plan: Covered Benefit % for Major Restorative Services | 50% | 50% | 50% |
| Core Plan: Member Pays | \$464 | \$547 | \$741 |
| Enhanced Plan: Covered Benefit % for Major Restorative Services | 60% | 60% | 60% |
| Enhanced Plan: Member Pays | \$371 | \$437 | \$631 |

*The standard rate is for illustrative purposes only. Non-contracted providers are reimbursed at the Delta Dental Premier maximum allowable fees in Massachusetts, or at the 90th percentile outside of Massachusetts. The member pays the difference between the amount charged and the allowable fee.

Dental Plan Comparison

| Plan Provision | Delta Dental Core | Delta Dental Enhanced |
|--------------------------------|---------------------------------------|---------------------------------------|
| Annual Maximum | \$1,700 per person | \$2,000 per person |
| Maximum Rollover | Up to \$500/year | Up to \$600/year |
| Orthodontic Services | 50% up to \$1,700 per person lifetime | 50% up to \$2,000 per person lifetime |
| Preventive/Diagnostic Services | 100% covered | 100% covered |
| Basic Services | 80% covered | 100% covered |
| Major Restorative Services | 50% covered | 60% covered |



Decide on a PLAN

- Delta Dental Core** is less expensive out of your paycheck, but more costly at the time of service for some services.
- Delta Dental Enhanced** provides a higher level of coverage, but costs more out of your paycheck.

Download the App

- Delta Dental

Discounts

Take advantage of discounts on many covered services. Discounts are available on ZSonic toothbrushes and replacement heads, as well as with Amplifon on their hearing aids and network providers.

Get details at <https://deltadentalma.com/dental-plans/healthy-living-discounts>.

Delta Dental app

Download the Delta Dental app to access information at your fingertips! Through the app you can view your member ID card, find a dentist, view your coverage, look through claim history, and more.

Teledentistry.com Virtual Visits

Virtual visits are available for free for urgent dental problems. If you need to consult with a dentist after hours or you're traveling from home, Teledentistry.com dentists diagnose the problem, provide treatment options, and can refer you to a Delta Dental dentist for follow-up care. To get started visit www.teledentistry.com/ddma.

Biweekly Dental Contributions for 2023

| Dental Plans: | 20 - 35 hour work week: | | | 36 - 40 hour work week: | | |
|-----------------------|-------------------------|----------------|---------|-------------------------|----------------|---------|
| | Employee | Employee + One | Family | Employee | Employee + One | Family |
| Delta Dental Core | \$16.33 | \$34.58 | \$52.78 | \$14.45 | \$32.69 | \$50.90 |
| Delta Dental Enhanced | \$21.62 | \$45.12 | \$62.75 | \$19.74 | \$43.23 | \$60.85 |

Vision Care Benefits

To help cover the cost of eyewear, which is not covered under our medical plans, BMCHS offers vision coverage through Metlife's Davis Vision Plan. When you use in-network providers and the Exclusive Collection of frames and lenses, you receive a higher level of coverage.

| Plan Provision | In-Network | Out-of-Network |
|--|--|--|
| Routine Eye Exams | \$5 copay at participating providers | Outside of Davis Vision participating providers, partial reimbursements are available. |
| Eyeglass Frames Covered in full: Fashion/Designer frames from Davis Vision's Collection (up to \$160) Frame allowance: \$150 towards any frame, plus 20% off any balance Visionworks frame allowance: \$200 towards any frame, plus 20% off any balance | Plan covers \$150 plus 20% off the balance | |
| Eyeglass Lenses | Plan covers 100% for most lenses | |
| Contact Lenses (6-12 month supply) | Plan covers \$130 plus 15% off the balance | |

When deciding whether to enroll in the Vision Care Plan, you will want to think about the following:

- Annual eye exams are also available through your BMCHS medical plan.
- If you are not enrolled in a BMCHS medical plan, does your medical plan provide coverage for routine eye exams or discounts on eyewear?
- How much do you estimate you will have to pay for eye exams, glasses and contact lenses for yourself and your family during the year?
- Will your vision care expenses for the year be more than the premium cost for coverage under the Vision Care Plan?
- Are you planning to establish a Medical Flexible Spending Account to reimburse yourself, tax-free, for unreimbursed vision care expenses?

For more information and to find a participating provider, visit www.metlife.com/mybenefits. A detailed brochure with pricing on eyeglass lens options and contact lens information is available on hub.bmc.org/employee-center/benefits/health-insurance-benefits. You can also call Member Services at 833.393.5433.



Decide on COVERAGE:

- No Vision Plan**
You may use the medical plan for eye exams only.
- Vision Care Plan**
Provides additional coverage and discounts towards eyeglasses and contact lenses.

To consider:
Review what you spend annually on eyeglasses and contact lenses before making your decision.

Where can I go?
Metlife's Davis Vision Plan has a network of participating providers. Find them at www.mybenefits.metlife.com.

Download the App

- [MetLife Mobile App](#)

Biweekly Vision Contributions for 2023

| Davis Vision | Employee | | |
|--------------|----------|--------|--------|
| | Employee | + One | Family |
| | \$2.41 | \$4.10 | \$4.86 |

Flexible Spending Accounts

Flexible Spending Accounts (FSAs) are a convenient way to put aside money, on a tax-free basis, to pay for certain medical and day care expenses. BMCHS offers two FSAs: a Medical FSA and a Dependent Daycare FSA. You may enroll in one or both, and determine separately the amount to set aside for these expenses each year.

You must re-enroll each year during the Open Enrollment period if you wish to set up an FSA for the following year. Changes to your annual FSA election(s) during the year are not allowed unless you have a qualifying event. (See the Eligibility and Enrollment section.)

MEDICAL FSA

Maximum election: Up to the IRS allowable amount each year, divided evenly among the pay periods remaining in the year.

Carryover: The carryover limit for unused funds is limited to 20% of the current year's IRS annual contribution limit.

Reimbursement: You receive a debit card to use for eligible expenses. If you pay out of pocket, you can submit claims for reimbursement to BMCHS's FSA administrator.

Eligible expenses: Costs that your health plans (medical, dental and vision) do NOT cover, including: deductibles, coinsurance, copays, prescriptions, dental/vision care not covered by your plans, and parking at your doctor's office.

DEPENDENT DAYCARE FSA

Maximum election: Up to \$5,000 (\$2,500 if married and filing separate tax returns), divided evenly among the pay periods remaining in the year.

Carryover: You are not able to carry over any unused funds from one calendar year to the next.

Reimbursement: If your provider accepts it, you may use the debit card to pay for eligible expenses. Otherwise, you pay for all services and then submit your claims for reimbursement to BMCHS's FSA administrator.

Eligible expenses: Daycare expenses needed for you and your spouse to work full-time. Daycare is eligible for reimbursement for children under the age of 13 and for IRS-recognized disabled dependents of any age.

Each year, BMCHS is required by IRS regulations to perform non-discrimination testing to balance FSA participation levels between highly compensated employees and those less highly paid. Depending on the results of this testing, the Dependent Daycare FSA elections for some program participants may need to be reduced.



Debit Card for Medical FSA

When you enroll in the Medical FSA, you'll receive a debit card to use FSA funds directly at the point of payment. Many transactions will be "auto-adjudicated" - no paperwork required.

You may need to submit claims for some dental and vision expenses, as well as deductibles and coinsurance. You will be notified by email or mail if you are required to submit receipts.

Before you enroll, read the FSA descriptions on the Hub at <https://hub.bmc.org/employee-center/benefits-resource-center> to understand the plans.

Download the App

- BenStrat Reimbursement Plan



Decide on CONTRIBUTION:

- Medical FSA**
Set aside up to \$3,050
- Dependent Daycare FSA**
Set aside up to \$5,000



Your Wealth

Insurance, Retirement, and Financial Resources

It's important to plan even for the unthinkable. These insurance benefits help provide financial protection to those you care about.

BASIC LIFE INSURANCE

BMCHS pays for:

- \$50,000 benefit for benefits-eligible employees

You are automatically enrolled in basic life insurance at no cost.

OPTIONAL LIFE INSURANCE

You may purchase:

- 1x to 5x your annual salary, up to \$750,000, rounded up to nearest \$1,000

If you wish for more protection than the basic life insurance plan, you can select this additional coverage in multiples of your annual salary. Rates are based on your age and the coverage you select.

During Open Enrollment:

- If you wish to elect an amount of coverage over \$300,000 or increase by two or more levels, you must provide Evidence of Insurability (EOI) for a determination of insurability.*
- You may elect 1x your salary without submitting EOI, or you may increase your current coverage by one salary level without providing EOI - as long as the amount is \$300,000 or less.

For new hires:

- Only amounts over \$300,000 require employees to complete an EOI form and submit it to the insurance carrier for a determination of insurability.



Age Reduction

Your optional life coverage will be reduced to 65% of your elected coverage once you reach age 65 and to 50% once you reach age 70.

What is Waiver of Premium?

If you are receiving Short Term Disability benefits, are under age 60, and are out of work for 6 months, you may apply for premium waiver. This will allow you to keep your life insurance benefits, but you will no longer need to pay the premium.

What is Evidence of Insurability?

*Evidence of Insurability (EOI) is a medical history questionnaire that must be submitted to the insurance company to determine if they will approve your election.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

You may purchase:

- 1x to 5x your annual salary, up to \$750,000, rounded up to nearest \$1,000
- You must first enroll in the Optional Life plan for an equal or greater benefit in order to elect the AD&D coverage. (Example: If you want 2x salary of AD&D coverage, you must also elect at least 2x Optional Life Insurance.)

AD&D provides additional insurance if you were to die in an accident or lose a limb or your vision due to a non-work related accident. EOI is never required.

DEPENDENT LIFE INSURANCE

You may purchase:

For Your Spouse

- Your coverage options for your spouse are: \$10,000, \$25,000 or \$50,000.
- Your spouse's election cannot exceed 50% of your total life (Basic plus Optional) election.
- EOI may be required to cover your spouse:
 - To enroll or to increase coverage for your spouse during Open Enrollment, you will need to provide EOI.
 - New hires may elect up to \$50,000 of coverage without providing an Evidence of Insurability for your spouse.

For Your Dependent Children

Coverage for your dependent children is automatically included when you purchase any amount of coverage for your spouse.

- Live birth to 14 days: \$1,000
- 15 days up to the age of 26: \$10,000 each, regardless of how many children you are covering.
- If you are not covering a spouse, you may purchase just the \$10,000 benefit for your child or children.
- You are not required to provide an EOI to enroll your child(ren).



Decide on COVERAGE:

Basic Life Insurance

You are automatically enrolled.

Optional Life Insurance

Elect a multiple of your salary:

- 1x
- 2x
- 3x
- 4x
- 5x

AD&D Insurance

You can elect up to an amount equal to your Optional Life Insurance.

Dependent Life Insurance

You may choose an amount below to cover your spouse; children are included automatically with any election.

- \$10,000
- \$25,000
- \$50,000

Beneficiary Designation

All employees need to make a beneficiary designation in Workday to avoid probate and ensure your intended beneficiary receives the benefit.

To consider:

Coverage above a certain amount will require you to submit Evidence of Insurability before you are approved.

Disability Benefits

All benefits-eligible employees are automatically enrolled in Basic Short-Term Disability and Basic Long-Term Disability, paid for by BMCHS. You have the option to purchase additional coverage.

SHORT-TERM DISABILITY

Short-Term Disability (STD) is an income protection benefit that provides salary replacement through week 26 from when you become unable to work due to pregnancy, illness, or injury. You are covered from the date you are eligible and there are no limitations on pre-existing conditions (conditions that existed before you were eligible for coverage under the plan).

If you are sick or injured and anticipate being out of work more than 5 days, to avoid any payment delay, please call the insurance provider, Lincoln, at 844.869.3474 to file for a leave and initiate your claim.

Note: If you live or work in Massachusetts or another state that has a required paid leave benefit, your disability benefits will be reduced by the state payment amount.

LONG-TERM DISABILITY

BMCHS's Long-Term Disability (LTD) plan provides salary replacement in the event of an illness or injury (not job related) that lasts more than 6 months. Coverage begins after a 180-day waiting period and ends on the earlier of:

- The date you are no longer disabled; or
- The date you become eligible for full Social Security benefits (65-67); or
- After 2 years for mental health conditions.
- If you are 60 or over when you become disabled, the coverage period is limited per the following table:

| Age at Disability | Maximum Benefit Period |
|-------------------|------------------------|
| 60 | 60 months |
| 61 | 48 months |
| 62 | 42 months |
| 63 | 36 months |
| 64 | 30 months |
| 65 | 24 months |
| 66 | 21 months |
| 67 | 18 months |
| 68 | 15 months |
| 69+ | 12 months |



Absences from Work

Learn about available leaves in the Absences from Work section on page 26.



Decide on COVERAGE:

STD Options*

- Basic (paid by BMC)**
60% of basic weekly earnings (up to \$1,730)
- Buy Up (paid by you)**
75% of basic weekly earnings (up to \$2,165)

*MA residents, see how MPFML may impact your benefit on page 26.

LTD Options

- Basic (paid by BMC)**
50% of basic monthly earnings (up to \$8,000)
- Buy Up (paid by you)**
60% of basic monthly earnings (up to \$9,600)
- Buy Up (paid by you)**
66 2/3% of basic monthly earnings (up to \$10,670)

403(b) Retirement Plan

INVEST IN YOURSELF

Everyone deserves a secure retirement. BMCHS's retirement plan makes it easy to prepare for your future by enrolling you in our retirement plan automatically. You can leave your account alone, or increase your contributions at any time – the important thing is that you are investing now to give your money time to grow.

403(b) Retirement Plan

Eligibility: Everyone who receives a paycheck from BMCHS is eligible to participate.

How it works: After you are hired, you are auto-enrolled in the plan with a 3% pre-tax contribution. Your contribution rate will automatically increase by 1% each year, unless you make changes to your election. (New hires may 'opt-out' within 90 days of the first automatic withdrawal by calling TIAA at 800.410.6649.) The money is directed to a Life Cycle fund based on your expected year of retirement.

You may also choose your own investment options. Changes to your investments and contribution elections can be made at any time during the year. This plan allows for both pre-tax and post-tax (Roth) contributions.

Employees who have worked at least 1,000 hours and simultaneously completed one of service or who have worked 1,000 hours in any subsequent calendar year, will automatically begin to receive the BMCHS contribution.

To Make Changes

If you are not currently participating in the 403(b) Plan and would like to enroll, change the amount that you're currently contributing, or update your beneficiary information, you can do so by either:

- Signing into Workday and clicking on the "Benefits" app, then clicking on "BMCHS 403(b) Retirement Plan" under the External Links header, or
- Calling TIAA (800.410.6649) and making your elections/changes over the phone.



Decide on COVERAGE:

- 403(b) Retirement Plan:**
You are automatically enrolled at a 3% contribution rate, which increases by 1% each year.
- Opt-out:**
Within 90 days of the first automatic withdrawal, you may opt-out of the auto enrollment and receive back previously contributed funds by calling TIAA at 800.410.6649.
- Change:**
You can change your contribution amount or investments at any time.
- BMCHS Contribution:**
Make sure you are contributing at least 2% to the Plan. If so, after a year, as long as you've worked 1,000 hours that year, you will begin to receive the BMCHS contribution amount of 3%, which increases over time.

To consider:

The contributions you make early in life compound over time. If you can, try to contribute more than the minimum.

TIAA Investment and Savings Advice Sessions

BMCHS employees are eligible to receive free personalized retirement plan advice from a TIAA financial consultant. This session will cover the 403(b) plan's investment options and how to project the amount of money you'll need in retirement. This service is available as part of the BMCHS retirement program and can be done onsite at BMCHS, online, by phone or shared screen.

Sessions onsite at BMC are temporarily suspended. If you wish to meet in person, the following locations are available by appointment only: Cambridge/Andover, MA; Hanover, NH; Providence, RI; Portland, ME. Other TIAA branch locations may be found at [tiaa.org](https://www.tiaa.org).

For retirement plan and investment information, to enroll in the Plan, or to schedule a 1-on-1 advice session, please contact TIAA at 800.410.6649.

Managing Your Retirement Plan Online

To access your TIAA account online, log into Workday, click on the *Benefits app*, and then select the *BMCHS 403(b) Retirement Plan* link. Once in your account, you can:

- View your account balance
- Manage your contributions
- Update your beneficiary designation
- Change your investment elections
- Register for eDelivery of statements and communications

TIAA-EVERFI

Do you know if you should:

- Contribute to your 403(b) account on a Roth or Pre-tax basis?
- Pay off debt in the "Avalanche" or "Snowball" method?
- Ask for a mortgage modification?
- Increase (or start) an emergency fund?

If you're not sure, take a tour of TIAA's online financial education program, EVERFI. This program offers an engaging digital learning experience that you can access from your computer, phone or tablet, in both English and in Spanish. Once there, you will find a series of tracks on personal financial topics that contain a sequence of activities for you to complete such as watching a short video, working an interactive module, or completing a calculator tool to gain an understanding of the topic.

To get started, visit bmc.everfi-next.net.



BMCHS Contribution

Eligible employees who contribute at least 2% will receive additional contributions from BMCHS to the Retirement Plan based on their years of service.

| Years of Service | BMCHS Contribution |
|------------------|--------------------|
| 1-4 years | 3% |
| 5-9 years | 5% |
| 10-19 years | 7% |
| 20 or more years | 8% |



Financial Resources

FINANCIAL PLANNING

Working Credit

Through Working Credit, BMCHS employees can work for free with a credit building financial counselor to improve their credit score and manage their debt. A good credit score helps you save money on loans and gives you greater access to credit. After attending a virtual workshop on how the credit system works, you can choose to work one-on-one with a credit building counseling. You'll receive a thorough review of your credit report and score, a personalized Credit Action Plan, and ongoing support to execute your Plan. For more information, visit <http://info.workingcredit.org/join/bmc> or contact Kristin at kristin@workingcredit.org or call 314.252.8342.

Garrett Planning Network (GPN)

GPN offers discounted fee-only financial planning services for BMCHS employees. GPN planners do not accept commissions, and can assist with tax planning strategies, investment portfolio analysis, estate planning needs and more. For more information, visit hub.bmc.org/employee-center/employee-wellbeing.

Certified Financial Planners & Certified Public Accountants

BMCHS's Employee Assistance Program has CFP's and CPA's who can assist with a wide range of financial topics, including retirement planning, estate planning, and more. All phone consultations are free and unlimited. Call 888.628.4824, Monday-Friday, 9 a.m. and 6 p.m.

COLLEGE FINANCING

U.Fund College Investing Plan

MA residents can claim a MA state tax deduction for contributions to this state-sponsored 529 plan (\$1,000 if single, \$2,000 if married). Visit meffa.org/products/u-fund-college-investing-plan.

ScholarShare 529 Savings Plan

BMCHS employees may contribute via payroll direct deposit into a 529 education savings plan to save for a loved one's future education expenses. Withdrawals for qualified education expenses are income tax free. Visit scholarshare.com or call 800.544.5248.

Laurel Road Student Loan Refinancing

BMCHS employees and their families are eligible for rate reductions on student loan refinancing. There are no application fees or prepayment penalties. Visit laurelroad.com/bmc.

Savi - Public Service Loan Forgiveness benefit

Savi's online platform helps people track their activity and stay in compliance with their Public Service Loan Forgiveness paperwork. The cost to participate is \$60/year. Visit www.tiaa.org/bmc/student.



Working Credit is offered at no cost to employees!

Join one of the following virtual workshops to start your credit building journey!

Workshop in English

- Mondays at 8:00 pm: <https://bit.ly/credit-evening>
- Fridays at 12:30 pm: <https://bit.ly/credit-afternoon>

Workshop in Spanish

- Thursdays at 8:00 pm: <https://bit.ly/credit-spanish>



Your Wellbeing

Programs and support for your whole life.

EMPLOYEE ASSISTANCE PROGRAM (EAP)

The EAP provides employees and their families with confidential counseling and referrals on a wide range of concerns, including behavioral health, substance use, smoking cessation, family problems, stress, and more. Visit guidanceresources.com, (Username: LFGSupport, Password: LFGSupport1). For counseling and referrals, call 888.628.4824.

EMPLOYEE RESILIENCE PROGRAM

The Employee Resilience Program provides direct care and support for employees across BMCHS.

Short Term Individual Support for work-related issues.

Care Navigation to BMCHS Behavioral Health Benefits for long-term counseling & Social Support Resources such as housing, food, and family issues.

Team and Department training sessions on Stress First Aid, Conflict Resolution, Mindfulness, and more.

They can be reached by email: resilience@bmc.org, phone: 617.414.4357, or pager: 8010.

CIRCLES CONCIERGE SERVICE

Contact Circles, BMCHS's personal assistant program, with any request for free assistance in planning and coordinating projects. Circles can help with snow removal services, pet services, dining recommendations, travel arrangements, moving services, product comparison, party planning, and more. Place a request by calling 877.231.0456, e-mailing bmcsupport@circles.com, or going to my.circles.com (use code "circlesBMC").

CARE@WORK

Backup Care: Last-minute care for children, adults, & elders for work-related needs. Cost is \$6/hour for in-home care or \$10/day/child for in-center care. Employees may use 10 backup care days/year.

Free Premium Membership: Free access to bmc.care.com to find pre-screened, high quality caregivers for ongoing child, adult, pet and household needs.

For assistance, call 855.781.1303, visit bmc.care.com, or download the "Care@Work" app.

ASTHMA CARE REWARDS PROGRAM

This is a free program for BMCHS employees/family members enrolled in an employee medical plan with HPI to help control your asthma. Receive personalized support from a health coach and learn techniques to best manage your condition. The program consists of six virtual or phone sessions. Program participants earn eligibility for \$0 copays on generic asthma medication and inhalers when filled at BMC pharmacies or through BMC's Cornerstone home delivery. Enroll at enroll.trestletree.com or call 866.234.4635.

DIABETES SUPPORT PROGRAM

This is a free program for BMCHS employees/families in BMCHS's medical plans that helps people with diabetes effectively manage their condition. By meeting program requirements, diabetes medication and supplies will be free at the BMCHS pharmacies or Cornerstone home delivery! Call 800.643.8028 for more information or enroll online at goodhealthgateway.com and select "Boston Medical Center."

HYPERTENSION CARE REWARDS PROGRAM

If you've been diagnosed with high blood pressure, you can successfully control it with help from a Health Coach. Learn how to make lifestyle changes that will help bring your numbers down to a healthy level. Complete at least four appointments and receive a free blood pressure monitor and your generic high blood pressure medications for a \$0 copay when filled at BMCHS pharmacies or through Cornerstone home delivery. Enroll at enroll.trestletree.com or call 866.234.4635.

BURNALONG

Burnalong offers 13,000+ online fitness and wellness classes across 45+ wellness categories including Fit over 50, kickboxing, Zumba, core workouts, meditation, as well as condition specific classes for people with diabetes, arthritis and more. These classes are for people of all ages, interests and fitness levels and range from 1 minute to 120 minutes in length. Each employee can invite four additional friends or family members to join the platform for free. All classes are available on-demand via phones, tablets, computers & smart TVs. Activate your free account at join.burnalong.com/BMC.

SLEEPIO

The sleep experts at Sleepio can help you get the best sleep possible. This 6-week personalized sleep program will teach you techniques to get your sleep schedule, thoughts, lifestyle, and sleep environment into shape. Discover your Sleep Score and how to improve it at sleepio.com/bmc.

DAYLIGHT

Daylight is a digital therapy program designed to help you build your resiliency so you can feel better when facing life's tough challenges. It teaches you ways to manage your daily stress, worries, and anxiety, based on your specific needs. Get started at www.trydaylight.com/bmc.



Wellbeing

If some of these programs seem too good to be true, we don't offer them by accident. BMCHS has worked hard to find programs that improve the wellbeing of our employees and families - many of your coworkers have already experienced how helpful they can be. We encourage you to try one today!

Employee Testimonials

"After 30 years of being a smoker, I am now completely a non-smoker...4 weeks and counting. My coach was an enormous help to me.... Thank you."

- BMC Smoking Cessation Program

"This is such an excellent resource. I have used this to help me purchase appliances for my home, vacation, traveling, and fun things to do during COVID. I am so impressed and happy with this benefit. The assistance I receive from Circles helped me save time and decrease stress, which in turn allows me to focus."

- Circles

"This course helped me to refocus my thoughts using different tools as needed. When the stress level goes up I am now able to quiet the negative thoughts, real or perceived and move on through my day."

- Mindfulness Class

LEGAL PLAN

MetLife provides the Legal Plan to BMCHS employees. If you elect this benefit, you and your eligible dependents are entitled to receive certain personal legal services related to family law, real estate, immigration assistance, document preparation, debt matters, and more. The only cost to you is the per pay period payroll deduction. To learn more about the Plan, call 800.821.6400 or visit [legalplans.com](https://www.legalplans.com). You must enroll in Workday as a new hire, during Open Enrollment, or after a qualifying event.

EMPLOYEE DISCOUNTS

Many discounts are available for you to save on gym memberships, theatre, ski resorts, mortgages and banking, cell phone providers, transportation, and travel. Examples include: Broadway in Boston, Canobie Lake Park, Water Country, Bruins games, the YMCA and Boston Sports Club. Visit the BMCHS intranet: hub.bmc.org/employee-center/employee-discounts.

Working Advantage

All employees have access to the Working Advantage discount network which allows you to save up to 60% at amusement parks, movie tickets, retailers, and more. For questions, please call Working Advantage Customer Service at 800.565.3712, or contact a vendor directly. Register at workingadvantage.com/bmc.

Auto and Home Insurance

BMCHS employees are eligible for discounted rates off auto and home insurance through payroll deduction.

- Farmers Insurance: 800.438.6381 (Discount Code: "BVO")
- Liberty Mutual: 800.730.6975 (Client Number: "300332")

Cafeteria Discounts and Convenient Pay Option

All BMCHS employees receive a 20% discount with a valid employee ID at the BMC hospital campus cafeterias. Employees may also swipe their ID badge at the cafeterias or BMCHS pharmacies to use Quickcharge to pay for their purchases. Any purchases made using Quickcharge will be deducted from their next paycheck.

Pet Insurance

BMCHS employees have access to discounted pet insurance through Nationwide's "My Pet Protection" plans. This coverage allows for use of any veterinarian and provides reimbursements for eligible vet bills. This includes unlimited 24/7 phone access to a veterinary professional for advice on routine care or urgent care matters. Optional wellness coverage for dental cleaning, vaccinations and other preventive services is also available. For a quote and to enroll, visit benefits.petinsurance.com/bmc. (To enroll your bird, rabbit, reptile or other exotic pets, call 877.738.7874.)



Decide on COVERAGE:

- Legal Plan:**
Provides comprehensive access to legal services for a bi-weekly premium.
- No Legal Plan:**
EAP provides limited free legal services.



Commuting to Work

BMCHS offers benefits and programs to ease the cost and stress of commuting to work.

DISCOUNTED MBTA PASSES THROUGH COMMUTER BENEFIT SOLUTIONS (CBS)

Regular employees who do not participate in the on-campus parking program and are scheduled to work at least 24 hours a week are eligible for 35% off the cost of monthly MBTA passes. Sign up at commutercheckdirect.com (Company ID: 1535), or call 888.235.9223 to sign up or ask questions. You must pre-pay for your MBTA pass in the month prior to the effective month. For example, for an April pass, you must elect your pass by March 5th; deductions will be taken from your last paycheck in March and your first paycheck in April.

PARKING AND TRANSPORTATION SERVICES

To sign up for one of the following programs, contact the Parking Office. Visit them at 710 Albany St., Mon. - Fri., 7 am - 5 pm or call 617.638.4915. More information is available at <https://www.bumc.bu.edu/parking/>.

Car Parking

Parking on campus is limited and permits are subject to availability. Permit price varies by location. Carpoolers are eligible for preferential parking in the 610 Albany Street Garage. For rates, visit www.bumc.bu.edu/parking/parking/permits-rates. Call the office for current availability.

Bike Registration and Parking

Register your bike for free access to the secure bike cage behind the 710 Albany St garage.

Subsidized Bluebikes Membership

BMCHS offers employees discounted memberships for Bluebikes – the Boston area’s bike share system. With 3,000 bikes and 300 stations (including two on campus), Bluebikes is a convenient, fast and healthy way to get around. Visit member.bluebikes.com/group/bmc and use program code “BikeBMC” to register.

Zipcar Membership Discount

Zipcar offers their members hourly car rental with rates that include gas and insurance. For BMCHS employees, Zipcar waives their \$25 application fee and charges just \$35 for the first year of membership (normally \$70). Visit zipcar.com, click on the “for business” tab, and search for Boston Medical Center to sign up.

Personalized Commuter Assistance

Could your commute be faster, cheaper, or less stressful? Fill out an online form and Parking & Transportation Services will respond with personalized suggestions for other commute options.



A Better City and GoMassCommute

BMCHS is a member of A Better City, a Transportation Management Association (TMA) which gives our employees access to their GoMassCommute platform and all its benefits including:

- Guaranteed Ride Home
- Carpool Matching
- Bike Benefits
- Prize Drawings
- Other Commute Incentives

Sign up today by visiting abctma.com.

Absences from Work

BMCHS offers two types of approved absences from work: **leaves** and **time off**.

Leaves

Leaves are for time needed away from work lasting more than 5 days or on an intermittent basis. They require approval from Human Resources. Most leaves are governed by State or Federal regulation. Examples include FMLA, MA Parental Leave, MPFML and Military Deployment.

Continuous leaves are for time off lasting more than 5 consecutive days for the serious health condition of an employee or for their family member.

Intermittent leaves are for time off intermittently for the serious health condition of an employee or for their family member.

Salary Replacement while on an Approved Absence

All employees must use earned time for their first week out of work. After the first week, payment may be covered by extended sick leave, MPFML, short-term disability, long-term disability or additional earned time depending on your absence type, work status and the reason for your absence.

When to Apply

The general rule is that **you must apply for a leave of absence 30 days prior** to the beginning of your requested leave date. Exceptions to this rule are made for unexpected events such as emergency surgery or illness. In those situations, you must notify your manager as soon as possible and follow the application process.

How to Apply for a Leave

1. As soon as you become aware of your need to be out of work more than 5 days, notify your manager.
2. Call Lincoln at 844.869.3474 or go to www.MyLincolnPortal.com (Company Code BostonMC).

Time Off

Time off is generally for a short period of time and is approved by your manager. Most time off is governed by HR Policy or your CBA. Examples include vacation, sick days, bereavement, and jury duty.



Massachusetts Paid Family and Medical Leave

Massachusetts Paid Family and Medical Leave (MPFML) is a state-sponsored benefit that provides paid leave for medical or family reasons. MPFML is funded by payroll taxes.

To calculate your benefit, visit calculator.digital.mass.gov/pfml/yourbenefits.

Leave can be taken for yourself for a serious personal health condition (up to 20 weeks); to bond with a new child or manage family affairs when a family member is on active duty in the armed forces (up to 12 weeks); to care for a family member who is a covered service member (up to 26 weeks).

Leaves are also allowed for the care of a family member with a serious health condition (up to 12 weeks).

For more information, go to www.mass.gov/paid-family-and-medical-leave-benefits or call the Massachusetts Department of Family and Medical Leave at 833.344.7365.

EARNED TIME

Earned Time is paid time for scheduled and unscheduled absences such as vacations, holidays, sick days and personal days. Accrued, unused earned time will be paid in full at termination.

All regular full-time and part-time employees have access to an Earned Time bank. Please refer to the "Paid Time Off" policy for additional details.

Below is the accrual basis for earned time, based on years of service at BMCHS:

| Years of Service at BMCHS | Earned Time Accrual Rates (earned/hours worked) | Annual Accrual for 40 hour/week employees |
|---------------------------|---|---|
| 0-4 years | 1 hour / 7.88 hours worked | 33 days in a year |
| 5-14 years | 1 hour / 7.03 hours worked | 37 days in a year |
| 15-19 year | 1 hour / 6.50 hours worked | 40 days in a year |
| 20+ years | 1 hour / 6.05 hours worked | 43 days in a year |

Holidays

All regular, full-time employees are eligible for Earned Time holiday benefits on the days listed below. (regular, part-time employees are eligible on a pro-rata basis). Please review the "Holidays" policy for complete details, as the process may differ based on position and work schedule.

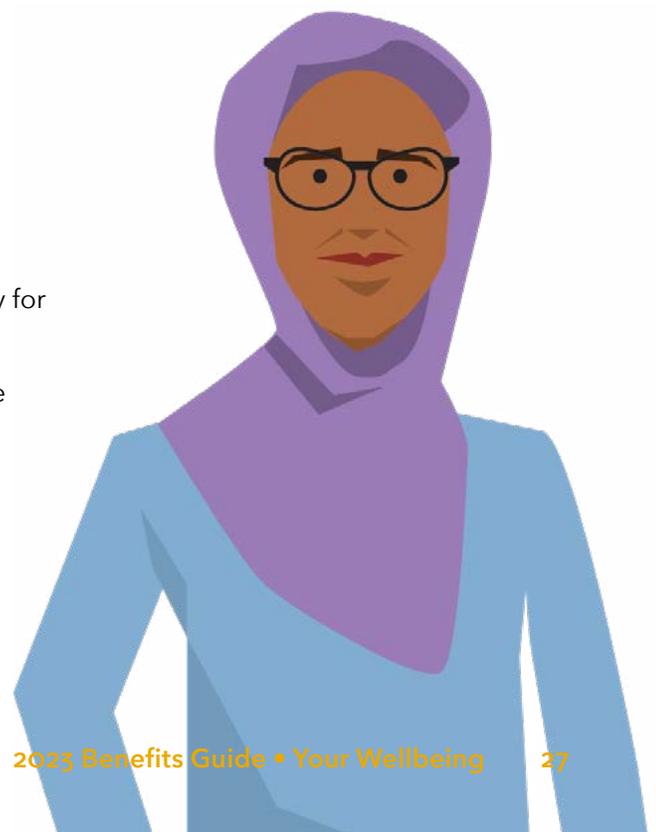
The following holidays are observed at Boston Medical Center:

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

Additional Paid Time Off

Additional time off may be granted for bereavement, military training and jury duty. Please refer to the "Paid Time Off" policy for more information.

The "Paid Time Off" and "Holidays" policies can be found in the Policies and Procedures section of the BMCHS intranet.





BMC Employee Resource Guides

In addition to the programs listed in this guide, the Benefits Team has created a series of Employee Resource Guides with information on topics of interest to our employees. These reference guides contain information on BMCHS sponsored programs as well as helpful external services and community programs related to the topic. The guides are available in the Human Resources department or online at hub.bmc.org/employee-center/employee-wellbeing/employee-wellbeing-resource-guides.

Adult and Elder Care

Caring for an aging loved one, such as a spouse or parent, can be a challenging and emotional time. This resource guide provides a listing of benefits available to you that can assist you and your family throughout this process.

Biking

Whether you're a bike commuter or just ride for fun, the Biking Resource Guide has information for you. Check out the guide for discounts on gear and programs, a free annual bike safety check, a map of campus bike racks, a free bike cage, and more.

College Financing

This guide provides information on the college financing process. Learn how to save for college through a 529 plan, about programs for free or low-cost degree options, and how to receive discounts on student loan refinancing for you and your family.

Divorce Support: Wellbeing Resources and Benefit Updates

Going through a divorce can be a challenging experience. There can be major impacts to many areas of your life including financial, family care, housing, and behavioral health issues. Additionally, there will be many tangible steps to consider after your divorce is finalized. This guide will help you address these topics and Workday transactions.

Homebuying

The Homebuying Guide explains the steps involved in purchasing a home, and the resources and discounts available to you for the purchase and maintenance of your new home. Find discounts on home insurance, mortgage lenders, and home painters, as well as access to a network of lawyers, among other services.

Immigration

This guide contains information on support resources for employees and their family members at BMCHS and in the community. It also includes information on benefits on the BMCHS employee medical plan members applying for a permanent resident status.

Improve Your Health

Managing your health means a better quality of life. Your risk factors for disease and ability for good health outcomes are greatly impacted by lifestyle choices and the management of any chronic health conditions. This guide contains a listing of wellness experts to help you make the changes you need to optimize your health.

Loss, Stress, & Bereavement

Losing a loved one can be an extremely difficult and life changing experience. This guide includes a listing of wellbeing resources for you and your family members, tangible steps to take to ensure your assets and documentation are in order, and a click-by-click guide of how to make the necessary updates to your benefits and personal information in Workday.

Mental Health and Addiction Services

BMCHS is a recognized leader in mental health and addiction medicine. We aim to be a model employer for employees and their family members who need care and support in this area. In addition to innovative programs on campus, this guide provides information on services available for employees outside of BMC and through our employee medical plan.

Military Service Reservists and Veterans

National Guard, Reservists, families of Active Duty Members, and Veterans all face a unique set of challenges in the workplace. This guide outlines the many resources that are available to support you and your family.

Pet Resource Guide

Learn about programs available to support your pet care needs. Resources include pet insurance, discounted pet supplies as well as assistance in finding pet services such as groomers, dog walkers and vacation planning with your pet.

Resource Guide for Parents

This guide includes all you need to know when welcoming a new child to your family. It provides an overview on how to take a leave of absence, your salary replacement while you're out, important information about your health insurance, and wellbeing benefits that can make your life easier during this exciting time in your life.

Resources for Parents of Adopted or Fostered Children

Being a parent can be both joyful and stressful. The Employee Resource Guide for Parents of Adopted or Fostered Children includes a listing of BMCHS benefits, discounts, services, and information to make your family life easier.



Retirement Readiness

Retirement planning is a career-long process. This guide provides an action plan to walk you through the steps you need to take prior to retirement, including how you'll replace your salary, what you'll do for medical coverage, and how you'll spend your time. Read the guide for a listing of resources to support you through this process so you can have a successful and surprise-free retirement.

Smoking Cessation

Learn about the health and financial benefits of quitting smoking, external resources to support you, and a smoking cessation program on campus that is tailored to your individual needs.

Together We Can Thrive

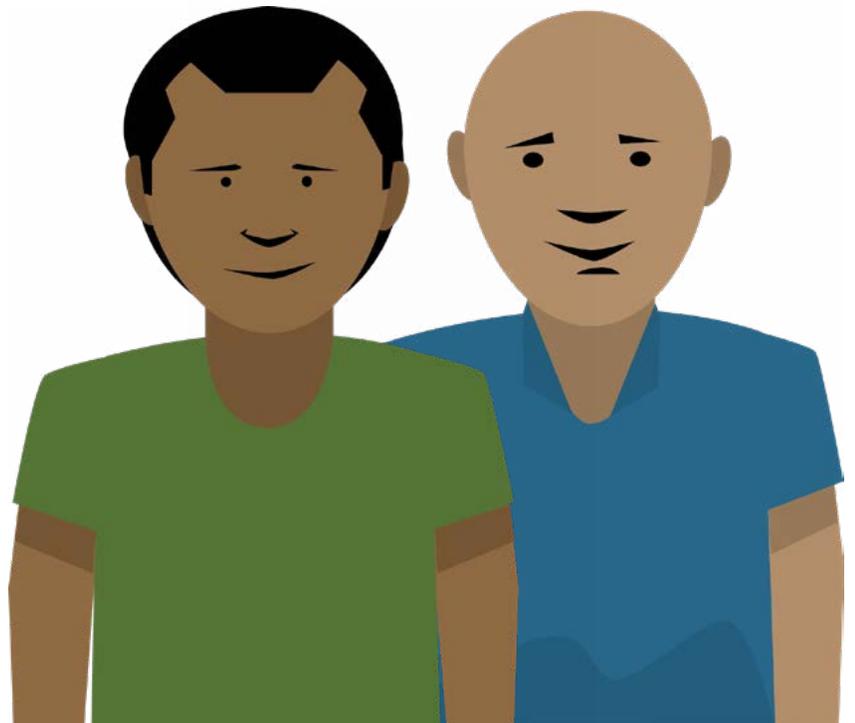
This guide contains resources for housing, food, transportation, childcare, education and legal services from BMCHS programs, community services, and benefits that are exclusive to BMCHS employees.

Transgender

This guide contains medical and general information on support services at BMC and in the community for transgender and gender non-conforming employees, as well as their family members.

Wellbeing Guide

Employee health and happiness are extremely important to who BMCHS is as an organization. This guide provides a comprehensive listing of the wellbeing programs and resources available to our employees.



Benefits Notifications

Special Enrollment Rights

If you do not enroll yourself and your dependents in a group health plan after you become eligible or during annual enrollment, you may be able to enroll under the special enrollment rules under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") that apply when an individual declines coverage and later wishes to elect it. Generally, special enrollment is available if (i) you declined coverage because you had other health care coverage that you have now lost through no fault of your own (or employer contributions to your other health care coverage terminate); or (ii) you have acquired a new dependent (through marriage or the birth or adoption of a child) and wish to cover that person. When you have previously declined coverage, you must have given (in writing) the alternative coverage as your reason for waiving coverage under the group health plan when you declined to participate. In either case, as long as you meet the necessary requirements, you can enroll both yourself and all eligible dependents in the group health plan if you provide notice to the Plan Administrator within 30 days after you lose your alternative coverage (or employer contributions to your alternative coverage cease) or the date of your marriage or the birth, adoption, or placement for adoption of your child. See the Plan Administrator for details about special enrollment.

Women's Health Coverage and Cancer Rights

The Women's Health and Cancer Rights Act of 1998 ("WHCRA") requires group health plans, insurance issuers, and HMOs who already provide medical and surgical benefits for mastectomy procedures to provide insurance coverage for reconstructive surgery following mastectomies. This expanded coverage includes:

- (i) reconstruction of the breast on which the mastectomy has been performed;
- (ii) surgery and reconstruction of the other breast to produce a symmetrical appearance; and,
- (iii) prostheses and physical complications at all stages of mastectomy, including lymphedemas.

These benefits are subject to the plan's generally applicable deductible, copays, coinsurance, and other cost-sharing.

Patient Protection Disclosure

You have the right to designate any participating primary care provider who is available to accept you or your family members (for children, you may designate a pediatrician as the primary care provider). For information on how to select a primary care provider and for a list of participating primary care providers, contact the Plan Administrator. You do not need prior authorization from the Plan or from any other person, including your primary care provider, in order to obtain access to obstetrical or gynecological care from a health care professional; however, you may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Health Plans Inc (844.926.2262) or view the provider directory online at healthplansinc.com/bmc.

Gender Affirmation Surgery

Gender affirmation surgery and other related services are covered when your provider has determined that you are an appropriate candidate in accordance with the Plan's clinical guidelines. Coverage includes surgery, related physician and behavioral health visits, and outpatient prescription drugs. For more information please call HPI's Member Services Department at 844.926.2262.

Notice of Privacy Practices

The Notice of Privacy Practices can be found in the Flex Summary Plan Description on the Hub, or you may pick up a copy in the Benefits Office on the 5th floor, 720 Harrison Ave, Boston, MA 02118.

Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t 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 www.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 or dial 1- 877-KIDS NOW or www.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, as well as 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 www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2022. Contact your State for more information on eligibility.

ALABAMA - Medicaid

Website: <http://myalhipp.com/>
Phone: 1-855-692-5447

FLORIDA - Medicaid

Website: <https://www.flmedicaidtplrecovery.com/flmedicaidtplrecovery.com/hipp/index.html>
Phone: 1-877-357-3268

GEORGIA - Medicaid

GA HIPP
Website: <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
Phone: 678-564-1162, Press 1
GA CHIPRA
Website: <https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra>
Phone: (678) 564-1162, Press 2

MAINE - Medicaid

Enrollment Website: <https://www.maine.gov/dhhs/ofi/applications-forms>
Phone: 1-800-442-6003
TTY: Maine relay 711
Private Health Insurance Premium Webpage: <https://www.maine.gov/dhhs/ofi/applications-forms>
Phone: 1-800-977-6740
TTY: Maine relay 711

MASSACHUSETTS - Medicaid and CHIP

Website: <https://www.mass.gov/masshealth/pa>
Phone: 1-800-862-4840
TTY: (617) 886-8102

NEW HAMPSHIRE - Medicaid

Website: <https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program>
Phone: 1-603-271-5218
Toll Free Number for the HIPP Program: 1-800-852-3345 ext. 5218

NEW JERSEY - Medicaid and CHIP

Medicaid Website: <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>
Medicaid Phone: 609-631-2392
CHIP Website: <http://www.njfamilycare.org/index.html>
CHIP Phone: 1-800-701-0710

NEW YORK - Medicaid

Website: https://www.health.ny.gov/health_care/medicaid/
Phone: 1-800-541-2831

NORTH CAROLINA - Medicaid

Website: <http://www.ncdhhs.gov/>
Phone: 1-919-855-4100

PENNSYLVANIA - Medicaid

Website: <http://www.dhs.pa.gov/providers/Providers/Pages/Medical/HIPP-Program.aspx>
Phone: 1-800-692-7462

RHODE ISLAND - Medicaid and CHIP

Website: <http://www.eohhs.ri.gov/>
Phone: 1-855-697-4347, or 1-401-462-0311 (Direct Rlte Share Line)

TEXAS - Medicaid

Website: <http://gethipptexas.com/>
Phone: 1-800-440-0493

WEST VIRGINIA - Medicaid and CHIP

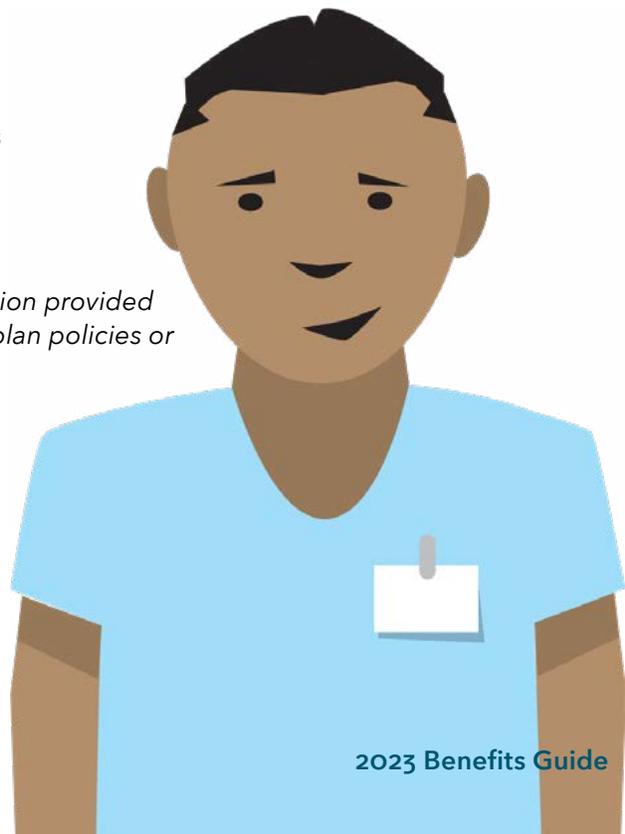
Website: <https://dhhr.wv.gov/bms/> <http://mywvhipp.com/>
Medicaid Phone: 304-558-1700
CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)

To see if any other states have added a premium assistance program since July 31, 2022, or for more information on special enrollment rights, contact either:

**U.S. Department of Labor
Employee Benefits Security Administration**
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

**U.S. Department of Health and Human Services Centers
for Medicare & Medicaid Services**
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

In the event of an inconsistency between the information provided here and the official plan policies or documents, the plan policies or documents will govern.



Contact Information

| | Plan | Vendor | Group # | Contact | Website |
|-------------------------|---|---|----------------------------------|---|---|
| Flex Benefits | BMC Select | HPI | B87 | 844.926.2262 | healthplansinc.com/bmc* |
| | BMC Tiered HMO | HPI | B87 | 844.926.2262 | healthplansinc.com/bmc* |
| | HPHC PPO | HPI | B87 | 844.926.2262 | healthplansinc.com/bmc* |
| | Pharmacy | Express Scripts | B87 | 877.861.0376 | www.express-scripts.com/bmc* |
| | Delta Dental Core | Delta Dental | 0152539901 | 855.343.4275 | www.deltadentalma.com* |
| | Delta Dental Enhanced | Delta Dental | 0152539902 | 855.343.4275 | www.deltadentalma.com* |
| | Vision Plan | MetLife | 149214 | 833.393.5433 | www.mybenefits.metlife.com* |
| | Life and AD&D | Lincoln | 09-LF0114 | 844.869.3474 | hub.bmc.org/employee-center/benefits |
| | Short-Term & Long-Term Disability and Leave of Absences | Lincoln | 09-LF0114 | 844.869.3474 | www.mylincolnportal.com (register with BostonMC) |
| | FSA's | Benefit Strategies | BMC | 833.262.0007 | www.benstrat.com* |
| | Legal Plan | MetLife | BMC | 800.821.6400 | www.legalplans.com |
| | COBRA | Benefit Strategies | BMC | 833.262.0007 | www.benstrat.com |
| | 403(b) Retirement Plan | TIAA | 100910 | 800.410.6649 | Workday -> Benefits worklet -> BMC 403(b) Retirement Plan* |
| | Financial Planning | Garrett Planning Network | BMC | Call advisor directly | hub.bmc.org/employee-center/benefits |
| | Credit Building Program | Working Credit | BMC | 314.252.8342 | http://info.workingcredit.org/join/bmc |
| | 529 College Savings Plan | ScholarShare | BMC | 800.544.5248 | www.scholarshare.com |
| | Student Loan Refinancing | Laurel Road | BMC | 855.245.0989 | www.laurelroad.com/bmc |
| | Employee Assistance Program | ComPsych | BMC | 888.628.4824 | www.guidanceresources.com Username: LFGSupport Password: LFGSupport1 |
| | Employee Resilience Program | BMC | BMC | 617.414.4357 | https://hub.bmc.org/employee-center/employee-wellbeing/employee-resilience-clinicians |
| | Backup Care | Care.com | BMC | 855.781.1303 | bmc.care.com* |
| | Student Loan Assistance | Savi | BMC | 833.604.1226 | www.tiaa.org/bmc/student |
| | Personal Assistant Program | Circles | BMC | 877.231.0456 | my.circles.com* Register with code: circlesBMC |
| | Health Coaching | AchieveHealth | B87 | 866.234.4635 | enroll.trestletree.com |
| | Diabetes Management | Good Health Gateway | BMC | 800.643.8028 | goodhealthgateway.com select "Boston Medical Center." |
| | Sleep Improvement Program | Sleepio | BMC | Email: hello@sleepio.com | www.sleepio.com/bmc* |
| | Digital Therapy App | Daylight | BMC | Email: hello@trydaylight.com | www.trydaylight.com/bmc |
| | BMC Transportation | BMC-BUMC Parking & Transportation Svcs. | BMC | 617.638.4915 | www.bumc.bu.edu/parking/ |
| | MBTA | Commuter Benefit Solutions | BMC | 888.235.9223 | www.commutercheckdirect.com* Company ID: 1535 |
| Online Fitness Platform | Burnalong | BMC | Email: customer@burnalong.com | join.burnalong.com/BMC | |
| Employee Discounts | Working Advantage & various vendors | BMC | 800.565.3712 | workingadvantage.com/bmc & hub.bmc.org/employee-center/benefits | |
| Auto & Home Insurance | Farmers Liberty Mutual | BVO 300332 | 800.438.6381 800.730.6975 | www.myautohome.farmers.com www.libertymutual.com/bmchs | |
| Pet Insurance | Nationwide | BMC | 877.738.7874 | benefits.petinsurance.com/bmc | |

* Website can also be accessed through the Benefits app in Workday.