

Benefits



FAQ



BENEFITS ENROLLMENT

Q 1: How do I enroll in benefit plans?

A: New Hire: You have 31 days from your date of hire to enroll in benefits. To enroll, contact BCI, our enrollment vendor, at 877-540-6761, Monday – Friday, 8 a.m. - 5 p.m. Coverage is effective the first of the month following 30 days of employment. Status Change (moving into a benefits eligible status such as full-time): You have 31 days from your status change effective date to enroll in benefits. To enroll, contact BCI, our enrollment vendor, at 877-540-6761, Monday – Friday, 8 a.m. - 5p.m. A benefits packet will be emailed to you. Coverage is effective the first of the month following your enrollment, assuming you have been employed at least 30 days.

Q 2: What happens if I do not enroll in benefit plans or miss the deadline?

A: You will not be eligible to enroll in benefit plans past your deadline, unless you experience a Qualifying Life Event (refer to next question). All benefit eligible employees are offered an opportunity to make changes to their benefit plans during Annual Enrollment, which are effective January 1 of the following year.

Q 3: I experienced a Qualifying Life Event, QLE, such as a gain or loss of coverage, marriage or divorce. How can I make changes to my benefit plans?

A: You have 31 days from the date of the QLE to make changes to your benefit plans. To make changes, consistent with the QLE, you will need to complete a QLE form, which can be found on the HR Benefits website. Refer to the QLE form for other required items.

Q 4: I enrolled in pre-tax (medical, dental, vision and/or FSA) benefit plans but no longer want them. How can I cancel my benefit plans?

A: Pre-tax benefit plan elections are final and must be continued throughout the entire benefit plan year (calendar year), unless you experience a QLE, as addressed above.

GENERAL INSURANCE QUESTIONS

Q 5: I do not think my benefits deductions on my paycheck are correct. What should I do?

A: Please contact HR Benefits.

Q 6: I misplaced or never received my insurance card(s). How can I get a new one?

A: You will need to contact the insurance carrier or submit your request through the carrier's online portal. Please do not throw away your insurance cards unless you have received a replacement. Some insurance carriers will not mail new cards each year, as they do not expire.

Q 7: How can I locate a provider listing?

A: All provider listings are displayed on the insurance carrier's website. You may review the Employee Benefits Guide, available on the HR Benefits website, to view the website associated with each carrier.

Q 8: Can I continue Hendrick medical insurance when I become Medicare eligible?

A: Yes. Hendrick insurance will be primary, and Medicare will be secondary (except if member has end stage renal failure in which case Hendrick insurance will be secondary). For more information, refer to the Plan Document.

**Q 9: How can I request an Insurance Verification?**

A: Please complete an Insurance Verification request form, which can be found on the HR Benefits website.

Q 10: I have been requested to complete an Evidence of Insurability (EOI) for Life Insurance, Short Term and/or Long Term Disability coverage. Why am I receiving this?

A: Newly elected coverage or an increase in coverage for these plans, outside of your initial (new hire) enrollment, requires EOI. The insurance carrier, Lincoln Financial, requires this documentation, and their underwriting team will make the determination to approve or deny coverage. To learn more about the EOI process, please visit the HR Benefits website.

Q 11: Should I complete the Wellness Screening?

A: The Wellness Screening is voluntary; however, if you would like to receive discounts on your medical premium, you and your spouse, if applicable, will need to complete a wellness screening with your PCP, register with Managewell, and meet defined criteria to be eligible. For more information contact Employee Wellness.

Q 12: Where can I find the Benefits Guide, Plan Documents, SBCs, Claim Forms and other important benefit documents?

A: The HR Benefits page on the Hendrick Hub or on the HR Benefits website.

ANNUAL ENROLLMENT**Q 13: When is Annual Enrollment?**

A: Annual Enrollment occurs in the fourth quarter of each benefit plan year. Employees are notified of the Annual Enrollment Period in advance.

Q 14: When is Annual Enrollment coverage effective?

A: Annual Enrollment coverage will be effective January 1 of the following year, assuming you have been employed at least 30 days.

Q 15: Is Annual Enrollment mandatory even if I don't want coverage or don't want to make changes?

A: Yes, all benefits-eligible employees are required to complete Annual Enrollment on an annual basis.

Q 16: What happens if I do not complete Annual Enrollment?

A: Failure to enroll may result in loss of coverage, and you will not be eligible to enroll in benefit plans for the entire benefit plan year, unless you experience a QLE.

Q 17: My spouse or parent's Annual Enrollment does not align with Hendrick's Annual Enrollment. What should I do?

A: You should elect the benefits you would like in place for January 1 during Annual Enrollment. You will have 31 days from the date of a QLE, such as a gain or loss of coverage, to make applicable changes. Please check with your spouse or parent's employer to ensure they can accommodate similar changes, if applicable.

COBRA**Q 18: How do I elect COBRA?**

A: A packet will be mailed to your home address after your last day of employment or your last day as a benefits-eligible employee. WEX administers COBRA for Hendrick Health.

Q 19: How long can it continue?

A: Generally, coverage may be continued for up to 18 months.

RETIREMENT**Q 20: How can I make changes to my Fidelity retirement plan?**

A: You may change the percentage amount of your retirement contributions at any time during the year by visiting www.netbenefits.com (this website may also be accessed on the HR Benefits website).

**Q 21: How can I withdraw from my retirement plan?**

A: Employees should visit www.netbenefits.com and connect with Fidelity to request a withdrawal from their retirement account. The withdrawal options are based on IRS guidelines.

Q 22: How can I take out a loan against my retirement plan?

A: Participant loans are permitted under the retirement plan at Hendrick. Employees should visit www.netbenefits.com and connect with Fidelity for more information regarding loan options.

Q 23: I am retiring. What do I need to do with my retirement account?

A: Employees who have participated in the retirement program have the option to keep their funds invested with Fidelity, roll it over to a retirement account with their new employer or withdraw the funds. Fidelity will not be notified of your retirement until after your final retirement contribution has been sent and posted to their account, which is typically the Wednesday following the final pay date. Former employees with account balances less than \$1,000 will be cashed out and balances between \$1,000 and less than \$7,000 will be rolled over to an IRA managed by Millennium Trust. The rollover occurs once per quarter. The IRA remains in the former employee's name.

Q 24: Am I Hendrick retiree eligible?

A: To be Hendrick retiree eligible, you must meet the following criteria:

1. Age 55 with 10 or more years of continuous full-time employment immediately preceding retirement; or
2. 25 years of continuous employment immediately preceding retirement.

Hendrick retirees will receive 100% CTO payout, a Hendrick benefit card, will be honored with a plaque, and will continue to be invited to Hendrick employee holiday events.

MEDICAL LEAVE**Q 25: What is FMLA and how do I apply for it?**

A: The Family and Medical Leave Act (FMLA) entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health coverage under the same terms and conditions as if the employee had not taken leave. For additional information, the FMLA policy may be found in PolicyStat on the Hendrick Hub.

To apply for the FMLA, please complete the FMLA/LOA Request on the HR Benefits website or Hendrick Hub.

Q 26: How will I receive my FMLA paperwork?

A: After submitting your request, HR Benefits will send you paperwork by email within five business days.

Q 27: What is a Leave of Absence and how do I apply for it?

A: If your need for leave is non-medical and will exceed 30 days, you can apply for a Personal Leave of Absence (LOA). LOAs are approved by your manager in 30 day increments, not to exceed 90 days. For additional information, the LOA policy may be found on PolicyStat on the Hendrick Hub. To apply for a LOA, please complete the FMLA/LOA Request on the HR Benefits website or Hendrick Hub.

Q 28: How can I submit a Short-Term Disability claim?

A: To submit a Short-Term Disability claim, you should contact Lincoln Financial Group at 866-783-2255. For additional information, visit the HR Benefits website.

CTO AND EIB**Q29: When do I begin accruing CTO and EIB?**

A: New Hire: CTO and EIB accruals begin in the pay period that includes the 30th day of employment.

Status Change: CTO and EIB accruals begin upon the effective date of the status change, assuming the employee has been employed at least 30 days.



Q 30: Am I required to use CTO for scheduled shifts missed?

A: Hourly Employees: Yes, if you have CTO available and you miss a scheduled shift, you are required to utilize CTO.

If you miss work due to a bad weather day, holiday or low census, you can choose to utilize CTO or go unpaid. If you do not have a CTO balance large enough to cover such days, you may elect to utilize CTO not yet accrued, thus resulting in a negative CTO balance.

Exempt Employees: If you have CTO available and you miss a scheduled shift, you are required to utilize CTO. If you miss work due to low census, bad weather day or holiday, you will be required to utilize CTO. If you do not have a CTO balance large enough to cover such days, you will be required to utilize CTO not yet accrued, thus resulting in a negative CTO balance.

Q 31: I opted in to receive a CTO Cash-Out in June and/or December. Can I change or cancel my election?

A: No, as stated on the application, the election is irrevocable - per IRS guidelines. Please note: your CTO balance will not be dropped below the cash equivalent of 40 hours.

Q 32: I am off work due to a personal illness. Can I access my EIB?

A: You will need to use the cash equivalent of 16 hours of CTO, or go unpaid if no CTO is available for the first 16 hours, and then you may access your EIB. If you, the employee, are immediately hospitalized or undergoing an invasive procedure, you may have immediate access to your EIB.

Q 33: I am off work to care for my sick child. Can I access my EIB?

A: You will need to use the cash equivalent of 16 hours of CTO, or go unpaid if no CTO is available for the first 16 hours, and then you may access your EIB. You do not have access to use immediate EIB when out to care for an eligible family member.

PROCARE

Q 34: I have been injured at work. What should I do?

A: Report: A ProCare/Employee Event report should be completed within 48 hours from the time of illness or injury via the Event Management System (RL), which is accessible from the Hendrick Hub.

Treatment: Care coordination must be directed by the ProCare Coordinator. Care directed by the employee will not be covered, except in an emergent situation. You will have 14 days from the date of illness or injury to seek treatment; otherwise, your ProCare case will close.

I need treatment – Contact the ProCare office within your 14-day benefit period.

I do not need treatment – No further action is necessary; however, if the nature of your illness or injury changes during your 14-day benefit period, you will need to contact the ProCare Office for care coordination.

Q 35: Will I receive pay while covered on ProCare?

A: If you are not able to perform regular or modified duty work, as determined by the ProCare Treating Physician, the ProCare income replacement benefit is equal to 75% of your current base wage and is payable for up to nine months from the date of injury. You may choose to supplement the ProCare income replacement benefit with accrued CTO and/or EIB, not to exceed 100% of your base wage.

QUESTIONS?

Human Resources

HMC: 325-670-3181

HMC South: 325-428-1062

HMC Brownwood: 325-649-3430

Fidelity

800-343-0860

www.netbenefits.com

retirement@hendrickhealth.org

Employee Wellness

HMC: 325-670-7777

HMC South: 325-428-1072

HMC Brownwood: 325-649-3427

HR Benefits

325-670-3163

benefits@hendrickhealth.org

Hendrick.Health/employeebenefits

ProCare

325-670-3314

procare@hendrickhealth.org

BCI (Enrollment Vendor)

877-540-6761

For further detailed information, visit the Hendrick Hub and HR Benefits website.