

Employee Benefits Reference Guide

July 1, 2023–June 30, 2024



Your Comprehensive Employee Benefits Package

Cedars-Sinai is committed to the health and wellbeing of our employees. Our benefits program helps you meet your goals for a healthy lifestyle and provides superior healthcare for you and your family when you need it. The passion for providing high-value care to our patients begins with providing high-value care for our staff.

Healthcare Benefits

	Page
Medical Benefits <ul style="list-style-type: none"> Shared expense between you and Cedars-Sinai. Choose from three Anthem plans: Blue Cross PPO, Blue Cross HMO or Vivity HMO. Medical premiums include pharmacy benefits. 	12
Dental Benefits <ul style="list-style-type: none"> Shared expense between you and Cedars-Sinai. Choose either the DeltaCare USA (similar to an HMO) or Delta Dental PPO. 	21
Vision Benefits <ul style="list-style-type: none"> Employee paid through payroll deduction. Vision exams and prescription eyewear through Blue View Vision. 	23
Wellness Matters Program <ul style="list-style-type: none"> Cedars-Sinai paid. Numerous onsite classes and programs that cultivate multidimensional wellness. Opportunity to earn a Wellness Matters incentive contribution, if enrolled in a Cedars-Sinai medical plan. 	24

Flexible Spending Accounts

Healthcare Flexible Spending Account <ul style="list-style-type: none"> Contribute up to \$3,050 pretax through payroll deduction from July 1, 2023–June 30, 2024. Helps reduce the cost of out-of-pocket healthcare expenses. 	28
Child/Adult Care Flexible Spending Account <ul style="list-style-type: none"> Contribute up to \$5,000 (or \$1,200 if you earn more than \$135,000/year) pretax through payroll deduction from July 1, 2023–June 30, 2024. Helps reduce the cost for child care or dependent adult care expenses so you can work. 	28

Financial Protection Benefits

Basic Life Insurance <i>Change as of 7/1/2023</i> <ul style="list-style-type: none"> Cedars-Sinai paid. Cedars-Sinai provides 1.5x annual base pay (\$50,000 minimum up to \$400,000 maximum) of life insurance for you. 	31
Supplemental Life Insurance <ul style="list-style-type: none"> Employee paid with after-tax dollars through payroll deduction. Purchase additional life insurance for yourself, your spouse and/or children. 	31
Basic AD&D Insurance <i>Change as of 7/1/2023</i> <ul style="list-style-type: none"> Cedars-Sinai paid. Cedars-Sinai provides 1.5x annual base pay (\$50,000 minimum up to \$400,000 maximum) of accidental death & dismemberment insurance for you. 	33
Supplemental AD&D Insurance <ul style="list-style-type: none"> Employee paid with after-tax dollars through payroll deduction. Purchase additional accidental death & dismemberment insurance for yourself and your family. 	33
Basic LTD Insurance <ul style="list-style-type: none"> Cedars-Sinai paid. Cedars-Sinai provides 50% of basic monthly pay in long term disability insurance for you. 	34
Supplemental LTD Insurance <ul style="list-style-type: none"> Employee paid with after-tax dollars through payroll deduction. Purchase an additional 10% of basic monthly pay in long term disability insurance (buy-up). 	34

Retirement Benefits

- 403(b) Plan**
- Your pretax savings through payroll deductions, matching contributions from Cedars-Sinai and investment earnings.
 - Contribute up to the IRS maximum each year (\$22,500 in 2023); if 50 or older, make additional catch-up contributions each year (up to \$7,500 in 2023).
 - Cedars-Sinai makes matching contributions to employees eligible to participate in the Choice Retirement Program and who contribute to the 403(b) Plan.

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- Choice Retirement Program: DB Plan or DC Plan**
- 100% funded by Cedars-Sinai.
 - Choose to participate in either the DB Plan or DC Plan (the first day of the quarter after one year of service with a minimum of 1,000 paid hours).

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Time-Off Benefits

- Vacation Holiday Time (VHT)**
- Year 1–3: 16 days of vacation/year
 - Year 4–9: 21 days of vacation/year
 - Year 10+: 26 days of vacation/year
 - 6 national holidays/year
 - 4 floating holidays/year

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- Sick Time (SICA) Approved Leave Pay (ALP)**
- 5 sick days/year
 - 1 ALP day/year

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Home Life Benefits

Voluntary coverage; employee paid with after-tax dollars through payroll deduction.

- Hospital Indemnity Insurance**
- Pays a daily benefit if you have a covered stay in a hospital, critical care unit or rehabilitation facility.

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- Auto and Home Insurance**
- Personal auto and/or home insurance.
 - Employee-paid payroll deduction or other payment methods available.

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- Accident Insurance**
- Pays you benefits for specific injuries and events resulting from a covered accident.

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- Pet Insurance**
- Insurance for veterinary fees.
 - Employee-paid payroll deduction or other payment methods available.

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- Critical Illness Insurance**
- Pays a lump-sum benefit if you are diagnosed with a covered disease or condition.

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- Legal Plan**
- Pay a flat monthly amount for legal services (limits apply).

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Benefit Questions? Ask the MBC HR Benefits Help Desk

- Phone: 888-302-3941
- Fax: 206-299-3158
- Email: MBC.cshs@milliman.com
- Web: Cedars-Sinai.MyBenefitChoice.com
- Hours: Open Monday–Friday 5 a.m.–5 p.m. PT (Closed major holidays)

This guide presents an overview of the organization's benefits program and is not intended to be all-inclusive, nor is it to be used as a summary plan description, plan document or Policy. In the event of any conflict between this guide and the official plan documents or policy, the official documents or policy will govern. The organization reserves the right to change or modify its benefit plans as appropriate, contingent on any required advance notice.

Enrollment Checklist

For new employees on [page 3](#).

Eligibility and Enrollment

Starting on [page 5](#).

Additional Benefits

Employee Assistance Program (EAP), entertainment benefits, cellular account discounts, family support services, rideshare, Employee Referral Program, Tuition Assistance Program and Credit Union on [page 48](#).

Payroll Calendars

Including holidays on [page 51](#).

Si tiene preguntas de los beneficios que le ofrece Cedars-Sinai o de como inscribirse a ellos, el Centro de Ayuda MBC HR tiene representantes en español para asistir con cualquier duda o pregunta. Favor de llamar al 888-302-3941 o mande un correo electrónico a MBC.cshs@milliman.com.

Employee Benefits Enrollment Checklist

If you're new to Cedars-Sinai, welcome! In addition to your wages, Cedars-Sinai offers valuable compensation in the form of healthcare, life insurance and disability benefits for you and your family. As a benefits-eligible employee, you will automatically be enrolled in medical coverage unless you decline. Most other benefits coverage is not automatic; you must enroll to be covered. Follow these steps to enroll:

1 Within 30 days enroll in healthcare, insurance and FSAs

You have 30 days from your date of hire, rehire or transfer to a benefits-eligible job to enroll for healthcare, insurance and flexible spending accounts (FSAs).

Enroll online: Cedars-Sinai.MyBenefitChoice.com*

Enroll by phone: 888-302-3941

COVERAGE OPTIONS FOR YOU AND YOUR FAMILY:

Medical and prescription drug benefits

- Cedars-Sinai pays most of the premium; you pay only a small portion through payroll deduction; to keep coverage affordable, your premium is based on pay rates (see [page 16](#)).
- When enrolling in medical, if you select an HMO you may choose your Primary Care Physician at that time, or do it later (see [page 13](#)).
- If you do not go on the enrollment site and either elect or decline Cedars-Sinai medical coverage, you will be automatically enrolled for employee-only coverage based on your home address:

Home Address:	Default Medical Plan
Vivity HMO service area (generally L.A. and Orange counties)	Vivity HMO
In California, but not in the Vivity HMO service area	Blue Cross HMO
Outside California	Blue Cross PPO

Dental benefits

Vision benefits

Healthcare FSA

To help you save on out-of-pocket healthcare expenses.

Child/Adult care FSA

To help you save on child or dependent adult care expenses that make it possible for you to work.

Supplemental LTD Insurance

Cedars-Sinai provides 50% of base pay coverage; you can purchase an additional 10% of base pay coverage.

Supplemental employee life insurance

Purchase coverage from 1x to 7x your annual base pay (up to \$3 million maximum)¹

Supplemental spouse/domestic partner (DP) life insurance

Purchase coverage in \$5,000 increments up to \$200,000 (not to exceed 50% of your coverage)¹

One-time opportunity for life insurance coverage without proof of good health¹

If you apply for supplemental life insurance within 30 days of hire or first becoming eligible for benefits, you can get up to the guaranteed issue amount of coverage without insurer approval:

- You: 2x annual base pay (to \$2 million maximum)
- Spouse/DP: \$25,000

¹If you apply after your first 30 days, or for coverage amounts over the guaranteed issue, you'll need to complete a health questionnaire (called an EOI form) and receive insurance company approval for coverage.

Supplemental child life insurance

Purchase in \$2,500 increments up to \$10,000 of coverage. One premium covers all your children under 26. Be sure to add your children on the benefits enrollment site. (If they're enrolled for healthcare benefits, they'll already be there.) To add a dependent, go to: [Make a Change > Update Dependents > Add a Dependent](#).

Supplemental AD&D insurance

Designate beneficiaries for:

- Basic life insurance
- Basic AD&D insurance
- Supplemental employee life insurance
- Supplemental AD&D insurance

Hospital indemnity insurance

Pays a \$100 daily benefit if you (or a covered family member) have a covered stay in a hospital, critical care unit or rehabilitation facility.

Accident insurance

Pays you (or a covered family member) benefits for specific injuries and events resulting from a covered accident.

Critical illness insurance

Pays a lump-sum benefit if you (or a covered family member) are diagnosed with a covered disease or condition.

- You: Purchase \$10,000, \$20,000 or \$30,000 in coverage
- Spouse/DP: Purchase coverage in \$5,000 increments up to \$30,000
- Child(ren): Coverage = 50% of employee coverage amount

Legal Plan

Benefit questions?

Visit the Benefits Portal at

Cedars-Sinai.MyBenefitChoice.com

Your go-to place for employee benefits in one, convenient stop:

- Access benefits information easily (no login required)
- Link to retirement plans and other benefit vendors
- Log in to enroll.

Benefits information at your fingertip with two Cedars-Sinai apps!

- Cedars-Sinai Employee App (download it from [csemployeeapp.com](#))
- MyCS-Link (download it from the Apple app store or Google Play store)

*If you have any difficulty using the website, try logging in and enrolling from your home computer or tablet, or call the MBC HR Employee Benefits Help Desk at 888-302-3941 and they can enroll you over the phone.

2 Enroll in the 403(b) Plan

There's no waiting period. Enroll anytime!

The 403(b) Plan is a voluntary retirement savings plan that allows you to save for retirement on a pretax basis. You decide how much to contribute (up to IRS limits) and it is transferred directly from your paychecks to your plan account.

Cedars-Sinai matches 50% of what you contribute to the 403(b) Plan up to 6% of eligible pay (after one year of service).

Enroll in the 403(b) Plan

Enroll online:
[Cedars-Sinai.BeReady2Retire.com](https://cedars-sinai.com/BeReady2Retire)

Enroll by phone: 800-584-6001

Plan Number: VFZ032
Verification Number: 246598
Location Code: 0001

Designate 403(b) beneficiaries

Voya Financial representatives can meet with you to help with investment education and retirement planning. Call for an appointment.

Phone: 310-423-0974

Location: Ray Charles Cafeteria
Suite 1631 A
regular business hours

3 Apply for auto and home insurance

Cedars-Sinai makes it possible for you to purchase home, renter's, vehicle, boat and umbrella insurance at group rates. You may enroll anytime.

Apply for Farmers GroupSelect™ insurance

Enroll online:
myautohome.farmers.com

Enroll by phone: 800-438-6381

4 Apply for pet insurance

To help you manage veterinary costs, Cedars-Sinai makes it possible to get coverage for your pet at discounted rates. You may enroll anytime.

Apply for Nationwide® pet insurance

Enroll online:
petinsurance.com/cedarssinai

Enroll by phone: 877-738-7874

5 Earn rewards with our wellbeing program

To support you on your path to wellbeing, Cedars-Sinai offers onsite activities and generous incentives. If you're enrolled in a Cedars-Sinai medical plan, you can earn a Wellness Matters incentive contribution each benefit year (July 1–June 30) by taking certain healthy actions.

Find out how to earn a Wellness Matters incentive contribution to your HRA account starting on [page 25](#).

Create a personal account with TRI-AD, our HRA account administrator:

- Online at: tri-ad.com
- Via mobile app (search for "TRI-AD Benefits on the Go" at your app store and use client ID TIDCEDARS to register)

6 Choose your retirement plan

- The quarter after one year of service (with a minimum 1,000 paid hours), you will have an opportunity to select which Cedars-Sinai retirement plan you want to participate in, either the:
 - Defined Contribution (DC Plan) or
 - Defined Benefit (DB Plan)
- Both plans are paid 100% by Cedars-Sinai.
- Once you meet the eligibility requirements, Cedars-Sinai will mail you a choice packet with information to help you decide. Make sure your address is up to date to ensure you receive this packet (see right).



Has your address or phone number changed?

Be sure to let us know!

The quickest way is on the Cedars-Sinai intranet:

- > Click **Service Center** (under Helpful Links)
- > Click **Changing Your Address and/or Phone Number** (under Frequently Asked Questions)
- > Click **Change My Address or Phone Number eForm** in the article or under **Additional Resources** near the bottom of the page
- > Complete the online eForm and click the **Submit** button (on the right)

If you do not have access to the Cedars-Sinai intranet or need help, contact the HR Service Center:

- Call: 424-314-myHR (6947)
- Email: myHR@cshs.org

7 Activate your MyCS-Link™ account

This secure online tool connects you to important information at Cedars-Sinai about:

- Your personal health information: If you are a patient at Cedars-Sinai, MyCS-Link allows you to communicate with your physician, request appointments and access test results.
- Employee Health Services: Complete your annual clearance questionnaire in MyCS-Link before visiting with the Employee Health Services nurse.

To activate your account go to:

- [Cedars-Sinai.org/MyCSlink](https://cedars-sinai.org/MyCSlink)
- Select "New User Signup."
- Enter your access code as it appears on your enrollment letter or email; if you don't have one, you may request one online.
- Create your ID, password and password hint.

Get the MyCS-Link App!

After activating your online account, download the app from your mobile provider's store (search "Cedars-Sinai").

Eligibility and Enrollment Q&As

Who can enroll?

HEALTHCARE, INSURANCE AND SPENDING ACCOUNTS

If you are a benefits-eligible employee who is regularly scheduled to work 20 or more hours per week, or an Employment Services Agreement employee, you can enroll in the benefits described in this booklet.

The following types of employees are not eligible, or have limited eligibility for benefits:

- **If you are a per diem employee who has worked an average of 30+ hours per week during a 12-month measurement period** (also referred to as full time per diem), you may enroll yourself (and eligible family members) in any of the medical plan options offered and Cedars-Sinai pays most of the premium. However, you are not eligible for a Wellness Matters incentive contribution or any other healthcare, insurance, wellbeing, FSA benefits or retirement benefits, except you are eligible to make tax-deferred contributions to the 403(b) Plan and use family support services.

The initial 12-month measurement period for medical coverage begins on the first day of the month following date of hire; after that, the measurement period is the previous May 1 to June 30.

- **If you are a per diem employee who hasn't worked an average of 30 hours per week during a 12-month measurement period**, you may enroll yourself (and eligible family members) in the Blue Cross HMO on a self-pay basis. However, you are not eligible for a Wellness Matters incentive contribution or any other healthcare, insurance, wellbeing, FSA benefits or retirement benefits, except you are eligible to make tax-deferred contributions to the 403(b) Plan and use family support services.
- **If you are part time** (regularly scheduled to work fewer than 20 hours per week), a visiting guest, a temporary employee or working on a project basis, you are not eligible for a Wellness Matters incentive contribution, healthcare, insurance, wellbeing, FSA benefits or retirement benefits, except you are eligible to make tax-deferred contributions to the 403(b) Plan and use family support services.

WELLNESS MATTERS INCENTIVE CONTRIBUTION

You must be a benefits-eligible employee enrolled in a Cedars-Sinai medical plan to earn a Wellness Matters incentive contribution and reward.

CHOICE RETIREMENT PROGRAM

The following types of employees are not eligible to participate in the Choice Retirement Program:

- All per diem employees hired after June 30, 1989
- Physicians in training
- Executives and faculty members who participate in the grandfathered executive retirement plan

May I enroll my family?

If you are eligible for benefits and you enroll, you may cover your spouse or domestic partner and children, as defined below and on the next page.

To cover your family members for medical benefits, you must provide their Social Security Number or Federal Tax ID Number. Or, when enrolling on [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com), you may complete the pop-up screen indicating why you won't be providing it.

SPOUSE

You may cover your spouse (of any gender), as long as you provide evidence of marriage. Otherwise, you are required to meet the criteria for domestic partnership and complete a domestic partner affidavit.

Your spouse is not eligible if you are divorced or legally separated from them or if your marriage has been annulled.

DOMESTIC PARTNER (DP)

Under the Cedars-Sinai policy, DPs are defined as two adults (of any gender) who reside together, sharing their lives in an intimate and committed relationship with a mutual obligation of support. For your DP to be eligible for benefits, you must either:

- Be publicly registered as domestic partners under state or local law or
- Complete (and have notarized) a Cedars-Sinai DP affidavit and meet all of the following criteria; you:
 - Have been sharing a common residence* for at least six months and intend to do so indefinitely
 - Are not related by blood to a degree of closeness that would prohibit marriage
 - Have assumed mutual responsibility for basic living expenses*
 - Are at least age 18 and capable of consenting to the domestic partnership
 - Are not married to anyone else or in a declared domestic partnership with anyone else.

You can get a Cedars-Sinai DP affidavit online at

[Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) or from the MBC HR Employee Benefits Help Desk.

* Although you don't have to show proof of common residence or evidence of joint responsibility for basic financial obligations to enroll, the insurance company may require it before paying claims.

The premium you and Cedars-Sinai pay for your DP's coverage is considered taxable income, called "imputed income." To find out how imputed income affects your paycheck, see [Do I pay income taxes on my healthcare benefits?](#) on [page 10](#).

(Domestic partner eligibility continued)

If you're in a new domestic partnership, your DP (and children) become eligible for benefits on the date you:

- Have lived together for six months or
- Received your state-issued domestic partnership certificate.

Within 30 days from the date your DP becomes eligible, you must do one of the following:

- **Enroll online at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com)** (log on to the Benefits Enrollment Site > Make a Change > Add a Life Event > Select "Domestic Partner—New")
- **Enroll by calling** the MBC HR Employee Benefits Help Desk at 888-302-3941

For your DP's coverage to become effective, you must submit your state-issued domestic partnership certificate or completed (and notarized) Cedars-Sinai DP affidavit to the MBC HR Employee Benefits Help Desk by the **documentation deadline** (see below).

The Cedars-Sinai DP affidavit is posted on the Benefits Enrollment Site: [About Our Benefits > Eligibility + Enrollment > Affidavit of Domestic Partnership](#).

Spouse/domestic partner coverage ends the last day of the month they lose eligibility due to divorce, legal separation, annulment or termination of domestic partnership.

Documentation deadline: 45 days

When you enroll a family member, you must provide documentation showing they are eligible (such as a birth certificate, marriage certificate, etc.).

For a list of accepted documentation, see [Family Member Eligibility and Documentation](#) posted on [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) [Log in > Get Answers > Enrollment and Eligibility](#).

You have 45 days to submit required documents by:

- Uploading them to the benefits enrollment site. [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) [Log in > Get Answers > Upload Documents](#)
You can upload the following types of files: .pdf, .jpg, .png, .bmp, .gif, .doc or .docx.
- Sending them to the MBC HR Employee Benefits Help Desk:
 - Email: HWFormsProcessing@milliman.com
 - Fax: 206-299-3158
 - Mail: Cedars-Sinai HR Benefits Department
c/o MBC Service Center
P.O. Box 600610
Dallas, TX 75360-0610

For the enrollment to become effective, you must submit the required documentation within 45 days from your benefit start date; see [When does coverage start?](#) on [page 9](#).

CHILDREN

You may enroll your children under your medical, dental and vision coverage, hospital indemnity insurance, accident insurance, critical illness insurance and for supplemental child life insurance.

You can cover children until age 26 if they are your or your current spouse's/DP's:

- Biological children
- Stepchildren (the children of your current spouse/DP)
- Adopted children
- Children placed with you for adoption
- Children for whom you are the legal guardian
- Children a court ordered you to cover under your healthcare plan including a Qualified Medical Child Support Order (QMCSO); Cedars-Sinai determines whether an order qualifies as a QMCSO; you can obtain a free copy of QMCSO procedures by emailing GroupHRBenefits@cshs.org.

Children age 26 and older can be covered if, in addition to meeting the above requirements for children under age 26, all of the following apply:

- A doctor certifies in writing that they are incapable of getting a self-supporting job because of a physical or mental condition (and the certification is approved by the insurance company).
- They are unmarried and chiefly dependent on you or your spouse/DP for support and maintenance.
- They have six months of creditable coverage or were already covered under Cedars-Sinai benefits when they turned age 26.

You must submit the doctor's certification to the insurer/benefit provider within 30 days of their request (or a later deadline, if accepted by the insurer/benefit provider). To continue coverage, you may have to supply the doctor's certification once a year.

If enrolling in supplemental child life insurance, be sure to add your children on the benefits enrollment site. (If they're enrolled for healthcare benefits, they'll already be there.) To add a dependent, go to: [> Make a Change > Update Dependents > Add a Dependent](#).

Children's benefits end the month they turn 26.

When your youngest child listed on the enrollment site turns 26:

- Your medical, dental and vision premiums will change automatically.
- Child supplemental life insurance coverage (if any) will be canceled, and premiums will automatically stop.

FAMILY OR DEPENDENTS NOT ELIGIBLE

You cannot enroll the following family members, even if they otherwise meet the eligibility requirements:

- Other family members (like parents, aunts, etc.), even if they are legal dependents
- Stepchildren from a previous marriage*
- Grandchildren*
- Foster children*
- Family members in active service of the armed forces of any country or subdivision of any country
- Family members living outside the United States (the 50 states, District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands, Northern Mariana Islands, Guam and American Samoa)

* Unless you or your (current) spouse/DP is their legal guardian or a court-ordered Qualified Medical Child Support Order (QMCSO) requires you to cover them.

When can I enroll in or change healthcare, insurance and flexible spending account (FSA) benefits?

- Within 30 days of being hired or rehired as a benefits-eligible employee or of becoming eligible for benefits
- During open enrollment (held in May)
- Within 30 days of having a qualified life event that changes your eligibility for benefits

If you leave and then return to Cedars-Sinai employment:

- **Reinstatement:** If you leave and then return within 30 days, you will be automatically re-enrolled in the same benefits you had when you left.
- **Rehire:** If you leave Cedars-Sinai employment and then return after 30 days, you will need to re-enroll in benefits (and re-apply and receive insurance company approval for any supplemental life insurance).

If you miss the enrollment deadline(s), you will have to wait until next year's open enrollment to enroll or change benefits.

What's a qualified life event?

It's a situation that allows you to change some or all of your benefits outside of the normal enrollment periods.

Healthcare, insurance and FSA benefit elections run from July 1 (or, for new employees, from the first day of the month following your hire date) to the next June 30. Generally, you cannot change benefits during the July 1–June 30 period, unless you have a qualified life event or special enrollment right. Qualified life events and special enrollment rights are listed in the next column.

If your family or job status changes, resulting in a change in your or your family's eligibility for benefits, it's your responsibility to make the change online at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.com/mybenefitchoice) (Benefits Enrollment Site > Make a Change) or to notify the MBC HR Employee Benefits Help Desk at 888-302-3941.

Life or job changes = benefit changes

Make sure you change your benefits to match your new situation in time. You have 30 days after the qualified life event to change your benefits through the MBC HR Employee Benefits Help Desk:

Web: [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.com/mybenefitchoice)
(Benefits Enrollment Site > View Your Benefits > Make Changes)

Phone: 888-302-3941

Email: MBC.cshs@milliman.com

Benefit Changes — Action Required!

You have 30 days following any of these qualified life events to change your coverage.

If you don't enroll new family members (including new babies) within 30 days of birth, marriage, etc., they won't be covered.

- Childbirth, adoption or placement for adoption (see **Will my newborn baby be automatically covered by the plan?** on the next page)
- New spouse or child (in this situation, you may enroll yourself and family members if you have never enrolled)
- Domestic partner (DP) becoming eligible for benefits
- Family members becoming eligible
- Child losing eligibility (turning 26)
- Spouse/DP losing eligibility due to divorce, legal separation, annulment or domestic partnership termination*
- Death of spouse/DP or child
- Involuntary loss of other healthcare coverage (for reasons other than failure to pay the premiums or termination of coverage for cause)
- Gaining healthcare coverage under another employer's plan (including enrolling in your spouse's/DP's employer plan during their annual/open enrollment)
- Regular work schedule reduced to fewer than 30 hours per week and you are enrolling in another health plan with minimum essential coverage
- Going on or returning from an unpaid leave of absence
- Enrolling in a state/federal marketplace plan during its open enrollment or special enrollment period
- Enrolling in Medicare
- Significant increase in healthcare premiums or decrease in healthcare benefits
- Changes in employment status that affect eligibility status
- Change in residence so that you are no longer in the HMO provider area
- Judgment, decree or order requiring coverage for dependent(s) (including Qualified Medical Child Support Orders)

**You cannot cover your ex-spouse under Cedars-Sinai plans. If your divorce or legal separation decree requires you to cover your ex-spouse, you'll have to purchase a policy for your ex-spouse elsewhere. COBRA will be offered if your ex-spouse had coverage under your benefits and the MBC HR Employee Benefits Help Desk is notified within 60 days of the divorce.*

You have 60 days following these events to change your coverage:

- Gaining premium assistance through Medicaid or a state Children's Health Insurance Program (CHIP)
- Losing Medicaid or CHIP assistance

How do I change my benefits if I have a qualified life event?

Within 30 days of the life event, you may either:

- Make the change online at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com):
 - Log in to the benefits enrollment site. Go to: > Make Changes > Create Life Event.
 - Select the life event that matches your situation; you'll be permitted to change only the benefits that apply to your situation.
 - You will be asked to upload documentation supporting the change (for example a birth certificate, divorce decree or marriage certificate).

or

- Contact the MBC HR Employee Benefits Help Desk at 888-302-3941 or email MBC.cshs@milliman.com to report the change and have them enter the change into the enrollment system for you.

Why can't I change my benefits any time?

Because the IRS considers healthcare and flexible spending account benefits tax-free compensation, it sets the rules about when employees can enroll and change benefits. Cedars-Sinai must follow these rules so employees can receive the tax breaks. Otherwise, the IRS could take away the plans' tax-free status and all employees would owe income tax, employment taxes and penalties on the cost of healthcare benefits. We're strict about following these enrollment rules to protect your tax advantages.

Will my newborn baby be automatically covered by the plan?

No! You have **30 days from the date of birth** to enroll your child. You must enroll your newborn, even if you're covered by the medical plan. Note: If the mother is enrolled in the medical plan, only childbirth is covered under the medical plan.

See *How do I change my benefits if I have a qualified life event?* (above) for enrollment instructions.

What if I don't enroll my new child (or make the qualified life event change) in 30 days?

Your next opportunity to enroll your child or make the election changes will be during open enrollment in May for coverage starting the next July 1.

To avoid a lapse in coverage in the interim, you might be able to enroll your child in a state marketplace health plan; these plans allow changes up to 60 days after a qualifying life event. Visit coveredca.com or healthcare.gov for more information.

For benefit plan summaries and everything you need to know about your benefits

Visit the Benefits Portal: [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com)

Can I be enrolled in two medical plans?

No double Cedars-Sinai coverage — If you and a family member both work at Cedars-Sinai and you both enroll as employees, you cannot be enrolled as a dependent at the same time. Children can be enrolled only under one parent's coverage. If anyone is double covered, Cedars-Sinai will cancel one of the coverages.

Coordination of benefits — People often mistakenly think that with dual coverage, the secondary plan will pay everything the primary plan does not cover, but that's not how it works.

If you are covered by more than one medical or dental plan (such as both yours and your spouse/DP's employer plan), usually the plans work together so the total payment (from both plans) equals the total benefits from the plan with the higher benefits.

The plan that covers you as an employee will be primary and the other plan will pay only if it covers a higher benefit. For example, if your employer plan covers 80% and the other plan covers 90%, your employer's plan will pay 80% and the other plan will pay 10%. If both plans cover 80%, the other plan pays 0%.

Neither plan pays more than the allowed amount (maximum the insurer pays). Rules are different for Medicare and some other situations. For details about your plan, see your medical or dental Summary Plan Description booklet posted on the Benefits Portal: [About Our Benefits > Summary Plan Descriptions](#).

Your total compensation more than just a paycheck

Paycheck + benefits = total compensation

Log in to: [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) to see your personalized report showing the monetary value of your pay and benefits for:

- Year-to-date (updated quarterly)
- Previous years (2021, 2022)

Benefits can be worth up to 30% of your paycheck!

What happens if I don't enroll?

HEALTHCARE, INSURANCE AND FLEXIBLE SPENDING ACCOUNTS (FSAs)

If you are a newly hired or newly benefits-eligible employee and you don't enroll for benefits:

You'll automatically be enrolled for employee-only medical coverage based on your home address:

Home address	Default medical plan
Vivity HMO service area (generally L.A. and Orange counties)	→ Vivity HMO
In California, but not in the Vivity HMO service area	→ Blue Cross HMO
Outside California	→ Blue Cross PPO

If you have other medical coverage and do not need it through Cedars-Sinai, you must log into the enrollment site and decline coverage.

You'll automatically be provided with employer-paid:

- Basic life insurance
- Basic accidental death & dismemberment (AD&D) insurance
- Basic long term disability (LTD) insurance

You won't be covered under these Cedars-Sinai-sponsored benefits:

- Dental
- Vision
- Healthcare FSA
- Child/Adult care FSA
- Supplemental life insurance
- Supplemental AD&D insurance
- Supplemental LTD
- Hospital indemnity insurance
- Accident insurance
- Critical illness insurance
- Legal plan
- Auto and home insurance
- Pet insurance

RETIREMENT

- You can enroll in the 403(b) Plan anytime. Unless you enroll you will not participate.
- You'll automatically become a Choice Retirement Program participant the first day of the calendar quarter after you have one year of service with at least 1,000 paid hours. At that time you will be mailed a choice packet and have the opportunity to select either the Defined Benefit Plan (DB Plan) or the Defined Contribution Plan (DC Plan). If you do not choose a plan during the enrollment period, you will be enrolled in the DC Plan by default.

When does healthcare, insurance and FSA coverage start?*

- **Open enrollment** for benefits is held every May. Your enrollment choices and changes will be effective the following July 1–June 30 period.
- **New employee/newly benefits-eligible enrollment/rehired.** Usually, coverage starts on the first day of the month after your date of hire (or rehire). For example, if Anna is hired on Aug. 1, their coverage starts Sept. 1.
- **Qualified life events or changing to a benefits-eligible status.** If you change your elections because of a qualified life event or new job status, your new benefits usually start the first day of the month after the life event. For example, if Jose gets married on Sept. 1, their spouse's coverage starts on Oct. 1.
- **Reinstatement.** If you leave and then return to employment within 30 days, you will be automatically re-enrolled in the same benefits you had before, starting on the first of the next month. For example, if Alex's last day was May 15 and they're rehired June 14, the benefits Alex had before would restart on July 1.

*EXCEPTIONS TO WHEN COVERAGE STARTS

Birth, adoption or placement of a child for adoption in your home:

In these situations, if you enroll your new child (and yourself and eligible family members if not already covered) within 30 days of birth/placement, medical, dental and vision coverage will be retroactive to the birth or placement date; if you enroll in other benefits, coverage starts the first day of the next month.

Life and disability insurance:

- **Insurers require employees to be actively at work** (and family members must not be disabled or hospitalized) for coverage to start. If not actively at work when coverage is scheduled to start, basic and supplemental life, basic and supplemental AD&D, hospital indemnity insurance, accident insurance, critical illness insurance and basic LTD insurance coverages will be delayed until you return to work. If not actively at work when your supplemental LTD is scheduled to start, the coverage will not become effective. If you want supplemental LTD, you will need to enroll again during the next open enrollment. See the insurance company booklets for more information, including how actively at work is defined.
- **Pending supplemental life insurance evidence of insurability (EOI):** If you (or your spouse/DP) applied for new or additional supplemental life insurance, you may need to complete an EOI form and receive approval from our life insurance carrier, Voya Life. Voya Life will mail this form to your home address at the end of your enrollment period. You'll have 35 days to submit a completed form to Voya Life; otherwise, the application for this new or additional amount will be closed.
- **If you apply for supplemental life insurance** for yourself or your spouse/DP, amounts requiring insurer approval start the first day of the month after receiving insurer approval and payment of premiums (or July 1 for open enrollment changes).
- **During your first 12 months of coverage,** LTD does not cover conditions you've had for three months before your coverage started, but it will cover new conditions. See the insurance company booklet for more information.

When do I receive benefit ID cards?

Our healthcare insurers will mail you an ID card a few weeks after your enrollment deadline, when you enroll as a new employee, or you enroll or switch plans during open enrollment. (Otherwise, you should continue to use your current card.)

- **Medical:** Vivity HMO and pharmacy benefits: You'll receive one card to use for both medical and pharmacy, and vision (if you enroll).
- **Medical:** Blue Cross HMO, Blue Cross PPO and pharmacy benefits: You'll receive two new cards:
 - Medical: from Anthem Blue Cross
 - Prescription drugs: from MedImpact
 - Vision: Blue View Vision (if you enroll)

For the Vivity and Blue Cross HMOs, review your benefit card to ensure the correct medical group or Primary Care Physician (PCP) is listed; if not, contact Anthem Blue Cross to change your PCP. To find out how, see [pages 13 and 14](#).

- **Dental:** You'll receive either a Delta Dental PPO or DeltaCare USA card. If you enrolled in DeltaCare USA, you either selected or were assigned a primary dentist. If you want to change the assigned dentist, search for a DeltaCare USA primary dentist online at deltadentalins.com and call DeltaCare USA at 800-422-4234 to make the change.
- **Healthcare FSA or HRA account:** If you enroll in the healthcare FSA, you'll receive a benefits card from TRI-AD. If you didn't enroll, you'll receive a TRI-AD benefits card upon earning a Wellness Matters incentive contribution to your HRA account for the first time. (Both accounts use the same card; see [page 29](#) for details.)
- **Vision:** If enrolled in vision, you'll be sent an Anthem ID card. If you're also enrolled in an Anthem medical plan, you'll receive one card for both medical and vision. Find a network provider at anthem.com/ca. When you make an appointment with a network provider, tell them you're covered by Blue View Vision and give them your Anthem ID number, then bring your card with you to your appointment.

Do I pay income taxes on my healthcare benefits?

Usually, no. Although your employee benefits are part of your total compensation from Cedars-Sinai, what Cedars-Sinai pays for your healthcare (medical and dental) benefits coverage is not treated as income and isn't taxed (except as noted below). Also, the amounts deducted from your paycheck for your share of healthcare premiums are paid on a pretax basis. You don't usually owe income taxes on the part of your salary used to pay healthcare premiums.

If you cover your domestic partner (and their children who are not legally your children) the premium you and Cedars-Sinai pay for your DP's coverage is considered taxable income, called "imputed income." Imputed income is added to your paycheck to determine your income taxes and Social Security and Medicare taxes.

Cedars-Sinai automatically withholds Social Security and Medicare taxes on imputed income, but not federal or state income taxes. You may want to increase your federal and state income tax withholding to cover the taxes you will owe. If you have questions, please contact the MBC HR Employee Benefits Help Desk at 888-302-3941 or: MBC.cshs@milliman.com

Do I need to take action during open enrollment if I'm not making any changes?

YES! OPEN ENROLLMENT IS A PERFECT OPPORTUNITY TO:

- **Make sure Cedars-Sinai has your current address and phone number.** If they've changed, follow the instructions on [page 54](#) to update them.
- **Consider if your healthcare benefit elections match your current needs.** Open enrollment is your once-a-year opportunity to add, drop or switch plans, or enroll or drop eligible family members from:
 - Medical
 - Dental
 - Vision
- **Reduce your out-of-pocket healthcare and/or dependent care expenses** by enrolling in the:
 - Healthcare FSA
 - Child/Adult care FSA**Note: Annual re-enrollment is required to continue FSA benefits.**
- **Adjust your supplemental life insurance** to reflect your current life and family situation by purchasing (or dropping):
 - Supplemental employee life insurance
 - Supplemental spouse life insurance
 - Supplemental child life insuranceNew or increases in supplemental life insurance coverage require an evidence of insurability form and insurer approval.
 - Supplemental AD&D insurance for yourself and your family
- **Update your life and AD&D insurance beneficiaries** if needed. Check your coverages and beneficiaries and make benefit changes online: Cedars-Sinai.MyBenefitChoice.com
- **NEW! Enroll for supplemental insurance** to help pay for expenses not covered by your medical plan, like deductibles or copays, lost wages, child care, housecleaning or any of your regular household expenses. You can purchase coverage for yourself only or for you and your eligible spouse/DP and children:
 - Hospital indemnity insurance
 - Accident insurance
 - Critical illness insurance
- Get help drafting a will or simply ensure peace of mind knowing you have legal help by enrolling in the **legal plan**.
- Purchase an additional 10% of pay in **supplemental LTD insurance**.

If you don't have a computer or have difficulty using the website, call the MBC HR Employee Benefits Help Desk at 888-302-3941 and they can make your changes over the phone.

When you can enroll in or change benefits

Enrollment Type	Benefit Plans Covered	Enrollment Period	Benefits Start	Coverage Period
Open enrollment <i>Once-a-year opportunity to change benefits</i>	<ul style="list-style-type: none"> Healthcare plans: medical/Rx, dental, vision Supplemental insurance plans: life, accidental death & dismemberment (AD&D) and/or supplemental long term disability (LTD) insurance Flexible spending accounts (FSAs): healthcare and child/adult care Legal plan 	Friday, May 5– Friday, May 26, 2023	July 1, 2023	<ul style="list-style-type: none"> July 1–June 30 FSAs: yearly re-enrollment required
New employee or newly benefits-eligible enrollment	<ul style="list-style-type: none"> Healthcare plans Insurance plans FSAs Legal plan 	Within 30 days after hire or job change date	First day of the month after date of hire (if you enroll)	Through the next June 30
Enroll anytime	<ul style="list-style-type: none"> 403(b) Plan Auto and home insurance Pet insurance 	Enroll anytime	Varies by plan	Stop anytime
Qualified life events <i>Situations that allow you to change some of your healthcare, insurance and FSA benefits outside of the enrollment periods</i>	<ul style="list-style-type: none"> Childbirth, adoption or placement for adoption New spouse or child Family members becoming eligible Child losing eligibility (turning 26) Spouse/DP losing eligibility due to divorce, legal separation, annulment or domestic partnership termination Death of spouse/DP or child Gaining or involuntarily losing other group healthcare coverage Medicare enrollment Regular work schedule reduced to fewer than 30 hours/week and you are enrolling in another health plan with minimum essential coverage Enrolling in a state/federal marketplace plan during its open enrollment or special enrollment period Significant increase in healthcare premiums or decrease in healthcare benefits Marriage/domestic partnership (meeting criteria on page 5) Moving into or out of HMO service area Going on or returning from an unpaid leave of absence Judgment, decree or court order requiring coverage 	Within 30 days after the life event	First day of the month after the event For birth and adoption/placement, coverage is retroactive to date of birth or placement	Through the next June 30
Choice Retirement Program	<ul style="list-style-type: none"> You choose to participate in either the DB Plan or the DC Plan 	Within 60 days after the event	The quarter after one year and 1,000 paid hours at Cedars-Sinai and eligible status Retroactive to the quarter after one year and 1,000 paid hours at Cedars-Sinai	Until leaving Cedars-Sinai or changing to ineligible status

Action required!
Coverage is not automatic.
 To be covered you must take action and enroll yourself and/or your eligible family members within 30 days of becoming eligible or experiencing a qualified life event.

Healthcare Benefits

Cedars-Sinai is committed to the health and wellbeing of our patients and employees. Our benefits are designed to help you meet your goals for a healthy lifestyle, provide superior medical care for you and your family and protect you from catastrophic medical expenses.

MEDICAL BENEFITS

Our medical plans offer two ways to get coverage: an HMO or PPO. Both offer comprehensive medical coverage. So what's the difference?

A Health Maintenance Organization (HMO) is designed to:

- Keep your out-of-pocket costs low and predictable.
- Keep you healthy by having your Primary Care Physician (PCP) coordinate your care. Your PCP focuses on your whole health. This includes preventive care, guiding you through the healthcare system when you need a specialist or hospital care and working with you to make decisions about your health.
- Find out more about HMOs on the next page.

A Preferred Provider Organization (PPO) is designed to:

- Offer greater flexibility when it comes to choosing doctors and other healthcare providers; however, you will usually pay more out of pocket.
- You're not required to have a PCP (like the HMOs); however, it's a good idea to have a primary care doctor for regular check-ups and to help you manage your care.

Deductibles run on a calendar year

When calculating your deductible and out-of-pocket maximum under the healthcare plans, it's important to understand that these limits run on the calendar year. This means the deductible and out-of-pocket maximum will reset back to zero every Jan. 1.

This is different from our benefit year, which is aligned with the fiscal year (July 1–June 30).

For example, if you were newly hired and enrolled for employee-only coverage in the PPO Plan effective Aug. 1, 2023, your deductible of \$750 would apply to the rest of the calendar year (Aug. 1–Dec. 31).

It would reset and start again on Jan. 1, 2024 and run through Dec. 31, 2024.

How PPOs Work

- You can see any licensed provider for covered medical services.
- You and the plan share costs. The graphic below shows what you pay out of pocket (in addition to your monthly premiums), and what the plan pays.
- You pay less when you receive care from Prudent Buyer (in California) or BlueCard (outside California) network doctors and providers.

1 Preventive care: Plan pays 100%

Certain preventive care services are covered 100% without paying the deductible first.

2 Calendar-year deductible: You pay 100%

Each calendar year you must pay the annual deductible before the plan starts covering your medical bills.

You may use your HRA account or healthcare FSA to help pay your deductible.

3 Coinsurance: You and the plan pay

- In-network: you pay 25% and the plan pays 75%
- Out-of-network: you pay 60% and the plan pays 40%*

Once the deductible is paid, the plan usually pays a percentage of the charges for medical services and you pay the remainder. The plan pays a higher percentage if you use a doctor or healthcare provider in the PPO network.

You may use the funds in your HRA account or healthcare FSA to help pay your coinsurance.

4 Reach out-of-pocket maximum: Plan pays 100%

If you meet the out-of-pocket maximum for the calendar year, the plan pays 100% of your covered medical expenses for the rest of that calendar year.

*For out-of-network services, you pay the coinsurance and the difference between the provider's usual charges and the maximum allowed amount.

How HMOs Work

- For most office visits and medical services, your only charge is a small fee (a copay), usually paid at the time of the appointment.
- Everyone in an HMO must have a Primary Care Physician (PCP).
- Your PCP provides general medical care such as annual check-ups and authorizes referrals to other doctors, specialists and facilities for services your PCP does not provide.

HMOs: PCP SELECTION IS KEY

Upon enrolling in an HMO, you'll choose a PCP; you may select any PCP in the HMO network who is taking new patients; for children, you can designate a pediatrician as their PCP.

PCP selection determines which specialists, services, facilities and hospital you may use. Every PCP is part of a group practice that is either:

- A medical group staffed by a team of doctors, nurses and other healthcare providers. Usually you can see other PCPs in the medical group without a referral. (This can be helpful in urgent care situations when your doctor has no openings.)
or
- An independent practice association (IPA), which is a group of doctors in private offices who usually have ties to the same hospital. In an IPA, you can see only your PCP; you'll need a referral to see other doctors in the IPA.

Your PCP will refer you only to specialists and facilities who contract with your PCP's group practice.

REFERRALS FROM YOUR PCP REQUIRED

If you need services your PCP doesn't provide, your PCP authorizes referrals to the appropriate healthcare provider (for instance, imaging centers, labs, hospitals or specialists).

If you get care without a referral from your PCP (or your PCP's medical group) you will likely have to pay for those expenses yourself. However, you don't need a referral from your PCP or the HMO:

- To get mental health or substance abuse services from another provider within your HMO's network
- For OB-GYN specialist care within your medical group (the OB-GYN 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)

DIRECT ACCESS

Under the Vivity HMO and Blue Cross HMO, many medical groups allow you to see dermatologists, ear, nose and throat doctors, OB-GYNs and allergists in your medical group without a referral from your doctor.

Vivity HMO referrals

Multisystem Super Medical Group

With Vivity's Physician Directed Access, you may be able to see a specialist at another Vivity health system.

- Cedars-Sinai
- Cedars-Sinai Marina del Rey Hospital
- Cedars-Sinai Valley Network
- Huntington Hospital
- MemorialCare
- PIH Health
- PIH Health Good Samaritan Hospital
- Providence
- Torrance Memorial
- UCLA Health

Care is best maintained when you see physicians in your own medical group. However, cross-system referrals are permitted for second opinions or when another health system has a special expertise. To see a Vivity specialist who is outside of your medical group, first discuss it with your PCP and then request the referral.

PCP Selection Q&As

Must everyone in my family have the same PCP?

No. Each family member may have a different PCP. For instance, you can select a Cedars-Sinai Medical Group™ (CSMG) or Cedars-Sinai Health Associates™ (CSHA) PCP for yourself and a PCP/medical group that is close to home for your family.

How do I find a PCP?

Use the Find a Doctor search tool at [anthem.com/ca](https://www.anthem.com/ca). (Both the Blue Cross HMO and Vivity HMO are Anthem medical plans.)

When selecting criteria in the Find a Doctor search tool, you'll be asked to select a plan/network. Choose either:

- Blue Cross HMO (Cal Care)—Large Group
or
- Vivity plan

Be sure to check the box that says "Able to Serve as Primary Care Physician" when selecting the criteria for your search.

When you find a doctor you want to be your PCP, click on the name to see that doctor's group practice and hospital affiliation(s). Remember, if you need medical services your PCP does not provide, your PCP will refer you to doctors and specialists in that same medical group or facilities that contract with that medical group. You will receive hospital services only from the hospital affiliations listed there (except for emergencies).

To receive Cedars-Sinai hospital services, you must select a PCP with CSMG or CSHA.

If you want help selecting a CSMG or CSHA PCP, or for questions about doctors and medical services, call Cedars-Sinai Medical Network™ Patient Services at 800-700-6424. (Tell the rep you're a Cedars-Sinai employee.)

Can any type of doctor be my Primary Care Physician?

Your PCP must be an internist, family practitioner or pediatrician who practices as a PCP. Specialists such as cardiologists, orthopedic specialists or urologists cannot be your PCP under an HMO.

What if I don't select a PCP when I enroll?

If you do not select a PCP when you first enroll, Anthem will assign you to a PCP close to your home. You may change your PCP through Anthem. See below for details.

Can I change my PCP?

You may change your PCP anytime, as long as you are not in the course of treatment with your current PCP or medical group. Changes will take effect on the first of the following month if requested by the 15th. Otherwise the effective date will be the first of the month after.

When you find the PCP you want at [anthem.com/ca](https://www.anthem.com/ca):

- Write down the numbers for the following fields (you'll need them to select or change your PCP):
 - PCP ID/Enrollment ID (paper/online)
 - PCP ID/Enrollment ID (phone)
- Doctors may be affiliated with more than one HMO network. Be sure the PCP numbers are for the medical group/IPA you want.

Contact your medical plan to change your PCP:

- | | |
|--|--|
| Blue Cross HMO | Vivity HMO |
| • Phone: 800-227-3641 | • Phone: 844-659-6878 |
| • Web: anthem.com/ca | • Web: anthem.com/ca |

NEW! HINGE HEALTH FOR JOINT AND MUSCLE PAIN

Hinge Health is a virtual exercise and therapy program to help you overcome back and joint pain (knee, hip, neck, shoulder, etc.) without surgery. Hinge Health offers:

- Exercise therapy tailored to your condition
- Wearable sensors for instant feedback in the app
- A personal coach and physical therapist, as needed
- Convenience: you can do it from the comfort of home, on your schedule

It's \$0 cost to you and your family members (age 18+) enrolled in a Cedars-Sinai medical plan.

To sign up or learn more:

- Web: hingehealth.com/for/cedarssinai
- Phone: 855-902-2777
- Email: hello@hingehealth.com

Enrollment starts July 1, 2023, and space is limited. Join the waitlist at: hingehealth.com/for/cedarssinai

Questions about what's covered?

Visit the website (all plans): [anthem.com/ca](https://www.anthem.com/ca)

Call customer service	phone number	group number:
• Vivity HMO	844-659-6878	57ANCA
• Blue Cross HMO	800-227-3641	57ADZG
• Blue Cross PPO (BlueCard)	877-800-7339	1858RE (in CA) 1858RL (outside CA)

If an HMO has a service area, am I covered when I am out of the service area?

You are covered for emergency care when you are out of the service area.

If you or a family member will be living outside of California for 90 days or longer, you may be able to get a guest membership in the Blue Cross Blue Shield plan in your temporary home area. Guest membership is offered by all our medical plans, but covers only those living outside California.

The guest membership program offers comprehensive care at the best price available and is ideal for out-of-state college students or a spouse on an extended out-of-state work assignment. However, it's not available everywhere. To inquire, call Anthem's guest membership coordinator at 800-827-6422.

About 90 days before you want your guest membership to start, call Anthem's guest membership coordinator at 800-827-6422. (This isn't a deadline. If you call later, your guest membership may not start until a month or so later.)

What's the difference between the Vivity and Blue Cross HMOs?

The plans also have some important differences, shown in this table. For more details, see the next page.

Comparing the HMOs				
	Vivity HMO	Blue Cross HMO		
Employee premiums	Lower	Higher		
Medical network	Vivity	CalCare		
Service area	L.A. and Orange counties	California		
Pharmacy network and formulary	CarelonRx	MedImpact and Walgreens (retail)		
Out-of-pocket maximum	Medical + Rx combined = Total \$1,500/1 person \$2,500/2 persons \$3,500/3 or more	Medical + Rx = Total	\$1,500 \$6,100 \$7,600/1 person	\$4,500 \$11,700 \$16,200/2 or more

Both the Vivity and Blue Cross HMOs offer care from Cedars-Sinai, as long as you select a PCP from either:

- Cedars-Sinai Medical Group (CSMG)
- Cedars-Sinai Health Associates (CSHA)

Comparing Your Medical Plan Options

Below is a high-level summary of how much you pay for each plan's benefits and coverage. For details, see each plan's Summary of Benefits and Coverage or the Summary Plan Description. You can find these documents, and the Uniform Glossary (of health insurance terms), posted on the Benefits Portal at: [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com)
For a paper copy, email the MBC HR Employee Benefits Help Desk at MBC.cshs@milliman.com or call 888-302-3941.

The following acronyms are used in the table below:

CSMG: Cedars-Sinai Medical Group

CSHA: Cedars-Sinai Health Associates

MDRH: Cedars-Sinai Marina del Rey Hospital

PCP: Primary Care Physician

Plan	Vivity HMO	Blue Cross HMO		Blue Cross PPO	
Type of plan	Health Maintenance Organization	Health Maintenance Organization		Preferred Provider Organization	
Where available	L.A. and Orange Counties only	California only		Anywhere in the U.S. and its territories	
PCP or referrals required?	Yes	Yes		No	
You pay...	In-Network	Cedars-Sinai	In-Network	In-Network	Out-of-Network
Covered providers and networks	Vivity HMO Network	CSMG or CSHA PCP	Any Other CaliforniaCare HMO Network PCP	Prudent Buyer (In California) BlueCard (Outside California)	Any Licensed Provider
Access to Cedars-Sinai care?	CSMG or CSHA PCP: Yes Other PCPs: No Cedars-Sinai access	Yes	No	Check with your provider	Check with your provider
Deductible <i>Per calendar year</i>	\$0	\$0	\$750/1 person ¹ \$1,500/2 or more ¹	\$750/1 person \$2,250/3 or more	\$1,500/1 person \$3,750/3 or more
Out-of-pocket maximum <i>Per calendar year</i>	\$1,500/1 person \$2,500/2 persons \$3,500/3 or more (medical and Rx combined)	\$1,500/1 person \$4,500/2 or more (medical only)	\$1,500/1 person \$4,500/2 or more (medical only)	\$3,000/1 person \$9,000/3 or more (medical only)	\$5,000/1 person \$15,000/3 or more (medical only)
Covered Services You pay...	All PCPs Copay	CSMG or CSHA PCP Copay	Other PCPs Copay	In-Network Coinsurance	Out-of-Network Coinsurance³
Office visit <i>MD/professional</i>	PCP: \$20/visit ² Specialist: \$35/visit ²	PCP: \$20/visit ² Specialist: \$35/visit ²	PCP: \$30/visit Specialist: \$45/visit	25% ² (after deductible)	60% (after deductible)
Preventive care	\$0	\$0	\$0	\$0	60% (after deductible)
Urgent care center	\$20/visit ²	\$20/visit ²	\$30/visit	25% (after deductible) ²	60% (after deductible)
Emergency department <i>Copay waived only if admitted</i>	CS and MDRH: \$150/visit Anywhere else: \$250/visit	CS and MDRH: \$150/visit	Anywhere else: \$250/visit	CS and MDRH: \$150/visit Other in-network: \$250/visit + 25% (after deductible)	\$250/visit + 25% (after deductible)
Diagnostic test <i>X-ray, blood work</i>	\$0	\$10/test ²	\$10/test	25% ² (after deductible)	60% (after deductible)
Advanced imaging <i>CT/PET scan, MRI</i>	\$100/test ⁴	\$100/test ⁴	\$100 /test after deductible)	25% ⁴ (after deductible)	60% (after deductible)
Outpatient surgery	\$100/procedure ⁴	\$100/procedure ⁴	\$100/procedure (after deductible)	25% ⁴ (after deductible)	60% up to \$5,000; then you pay 100% (after deductible)
Hospital Facility	\$200/day (\$600/admit max) ⁴	\$100/day (\$300/admit max) ⁴	\$200/day (\$600/admit max)	\$375/admit + 25% ⁴ (after deductible)	\$375/admit + 60% (after deductible)
Hospital visit <i>MD/professional</i>	\$0	\$0	\$0	25% (after deductible)	60% (after deductible)

1. Deductible applies to hospital and outpatient facility services (no deductible for preventive, X-ray or lab services).

2. Some Cedars-Sinai and Cedars-Sinai Marina del Rey Hospital billed charges waived, including deductibles. Provider charges may or may not apply. Questions about fees and waived charges must be submitted directly to your provider.

3. For out-of-network services, you pay the coinsurance and the difference between the provider's usual charges and the maximum allowed amount.

4. Hospital copay waived at Cedars-Sinai, Cedars-Sinai Marina del Rey Hospital, Torrance Memorial and Huntington Hospital.

Medical and Pharmacy Premiums

Cedars-Sinai is keenly aware of the cost pressures in medicine—for hospitals, clinics, doctors and for patients. Rising premiums can place a burden on household budgets, especially for those who can least afford it. As a healthcare organization, it's important to us that medical coverage remains accessible to all of our employees.

The cost of medical benefits is shared between you and Cedars-Sinai; your share is based on your pay rate, the plan you enroll in and which family members you cover. The monthly amount under You Pay is divided in half and taken from 24 of your 26 annual paychecks starting with your first paycheck in July 2023 (or the remaining paychecks until June 30, 2024).

Monthly Medical Benefit Premiums: July 1, 2023–June 30, 2024

	Employee		Employee and Spouse/Domestic Partner		Employee and Children		Employee and Family	
	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays
Pay rate under \$25.00								
Vivity HMO	\$7.00	\$540.83	\$42.00	\$1,163.24	\$29.00	\$957.12	\$82.00	\$1,616.25
Blue Cross HMO	\$44.00	\$606.84	\$134.00	\$1,297.83	\$111.00	\$1,060.52	\$189.00	\$1,828.61
Blue Cross PPO	\$145.00	\$795.79	\$478.00	\$1,591.79	\$401.00	\$1,292.45	\$700.00	\$2,216.51
Pay rate \$25.00–\$44.99								
Vivity HMO	\$28.00	\$519.83	\$66.00	\$1,139.24	\$53.00	\$933.12	\$114.00	\$1,584.25
Blue Cross HMO	\$56.00	\$594.84	\$166.00	\$1,265.83	\$135.00	\$1,036.52	\$234.00	\$1,783.61
Blue Cross PPO	\$163.00	\$777.79	\$500.00	\$1,569.79	\$424.00	\$1,269.45	\$728.00	\$2,188.51
Pay rate \$45.00–\$59.99								
Vivity HMO	\$56.00	\$491.83	\$110.00	\$1,095.24	\$93.00	\$893.12	\$161.00	\$1,537.25
Blue Cross HMO	\$74.00	\$576.84	\$216.00	\$1,215.83	\$177.00	\$994.52	\$304.00	\$1,713.61
Blue Cross PPO	\$191.00	\$749.79	\$543.00	\$1,526.79	\$460.00	\$1,233.45	\$778.00	\$2,138.51
Pay rate \$60.00–\$74.99								
Vivity HMO	\$95.00	\$452.83	\$162.00	\$1,043.24	\$144.00	\$842.12	\$264.00	\$1,434.25
Blue Cross HMO	\$105.00	\$545.84	\$285.00	\$1,146.83	\$234.00	\$937.52	\$402.00	\$1,615.61
Blue Cross PPO	\$229.00	\$711.79	\$589.00	\$1,480.79	\$507.00	\$1,186.45	\$842.00	\$2,074.51
Pay rate \$75.00–\$89.99								
Vivity HMO	\$99.00	\$448.83	\$169.00	\$1,036.24	\$149.00	\$837.12	\$274.00	\$1,424.25
Blue Cross HMO	\$109.00	\$541.84	\$296.00	\$1,135.83	\$244.00	\$927.52	\$418.00	\$1,599.61
Blue Cross PPO	\$238.00	\$702.79	\$612.00	\$1,457.79	\$527.00	\$1,166.45	\$875.00	\$2,041.51
Pay rate \$90.00–\$149.99								
Vivity HMO	\$100.00	\$447.83	\$172.00	\$1,033.24	\$152.00	\$834.12	\$279.00	\$1,419.25
Blue Cross HMO	\$111.00	\$539.84	\$301.00	\$1,130.83	\$248.00	\$923.52	\$426.00	\$1,591.61
Blue Cross PPO	\$243.00	\$697.79	\$624.00	\$1,445.79	\$537.00	\$1,156.45	\$891.00	\$2,025.51
Pay rate \$150.00 or more								
Vivity HMO	\$112.00	\$435.83	\$191.00	\$1,014.24	\$169.00	\$817.12	\$310.00	\$1,388.25
Blue Cross HMO	\$124.00	\$526.84	\$335.00	\$1,096.83	\$276.00	\$895.52	\$473.00	\$1,544.61
Blue Cross PPO	\$270.00	\$670.79	\$693.00	\$1,376.79	\$597.00	\$1,096.45	\$990.00	\$1,926.51

For medical benefit purposes, your pay rate is your hourly rate of pay in the Cedars-Sinai payroll system on April 1 each year, excluding shift differentials. For 12-hour shift employees, your rate is your eight-hour equivalent rate of pay. If you are full-time salaried, it's your annual salary divided by 2,080 (hours). Your hourly pay rate or eight-hour equivalent rate is shown on your Personalized Current Benefit Summary or Personalized Benefit Enrollment Checklist. Your pay rate in effect on April 1 each year (or hire date, if later) determines your monthly premium amount for the next benefit year starting July 1. Your monthly premium amount will not change during the year because of any increase or decrease in your pay rate.

EMPLOYEE HEALTHCARE OPTIONS: KNOW BEFORE YOU GO GUIDE

As an employee of Cedars-Sinai, you have many options to receive healthcare. Get familiar with these options to receive care in the right place.

Interpreter services available 24/7

All Cedars-Sinai services (primary care physician (PCP) appointments, Video Visit Now, urgent care) are available in different languages through Interpreter Services. Interpreter Services is available 24/7 via video call, phone or on-site visit. Requests can be made through CS-Link or by calling 310-423-5353 or by fax at 310-423-0498.

If you are experiencing COVID-19 or flu-like symptoms, please stay home and seek care via Video Visit Now or your nearest Cedars-Sinai urgent care location. Contact Employee Health Services for advice on testing and return to work.

Your Primary Care Physician (PCP)

Type of care Your partner in managing your health 24/7. Online, by phone or in person, they will provide the care you need or help you get it.

When to use

- Preventive care and wellness
- First line of support for illness or injury
- Disease management
- Access to specialized care

Copay
Vivity HMO and Blue Cross HMO

- PCP with Cedars-Sinai Medical Group™ (CSMG)
 - Will be waived
- PCP with Cedars-Sinai Health Associates™ (CSHA)
 - \$20/visit (may be waived)
- PCP with other medical group
 - Vivity HMO: \$20/visit
 - Blue Cross HMO: \$30/visit

Coinsurance
Blue Cross PPO

- PPO (you pay)
 - 25% after deductible in-network (waived at CSMG)
 - 60% after deductible out-of-network

Contact For assistance with selecting the right PCP for you, call 800-700-6424.

Your PCP or pediatrician's name and phone number are on your medical ID card. We recommend entering this vital information into your contacts for easy reference.

Employee Health Services (EHS)

Type of care For job-related illness or injury, or when you think you may be infectious to others.

When to use

- New hire/volunteer and annual screenings and vaccinations
- Medical evaluations of work-related injuries and subsequent follow-up visits
- Medical evaluations of any condition that may be infectious
- Fitness for duty evaluations

Copay None

Contact Employee Health Services
Steven Spielberg Building
8723 Alden Drive, SSB-200
Los Angeles, CA 90048
310-423-3322
Monday–Friday, 7 a.m.–5 p.m.

MyCS-Link: Securely connect to your Cedars-Sinai personal health information

You can access your Employee Health Services information: Complete your annual clearance questionnaire on MyCS-Link before visiting with the Employee Health Services nurse.

If you are a Cedars-Sinai patient, MyCS-Link allows you to:

- Communicate with your physician
- Request appointments
- Access test results
- Request prescription renewals
- View information on your care

To activate your MyCS-Link account go to:

- Cedars-Sinai.org/MyCSlink
- Select “New User Signup.”
- Enter your access code as it appears on your enrollment letter or email; if you don’t have one, you may request one online.
- Create your ID, password and password hint.

Get the MyCS-Link App!

After you have activated your MyCS-Link account from the website, download the app from your mobile provider’s store (search “Cedars-Sinai”).

Video visits now

Available through MyCS-Link via the CS app.

- Provides on-demand, virtual visits with a healthcare provider by video chat for non-urgent healthcare issues.
- Monday-Friday 7 a.m.–7 p.m. PT
Saturday and Sunday 9 a.m.–6 p.m. PT

Urgent Care

Type of care To get immediate medical care for a condition that is not life-threatening.

- When to use**
- Abdominal pain
 - Cold or flu
 - COVID-19 testing
 - Cuts/lacerations with contained bleeding
 - Dehydration
 - Diarrhea
 - Ear infections
 - Fever or chills
 - Muscle pain
 - Nausea and vomiting
 - Red eye
 - Respiratory infections
 - Sore throat or cough
 - Sprains
 - Uncomplicated OB-GYN complaints
 - Urinary tract infections

- Copay** Cedars-Sinai Urgent Care
- Copay waived
- Other in-network urgent care facilities
- Vivity HMO: \$20/visit
 - Blue Cross HMO: \$30/visit
 - Blue Cross PPO (you pay)
 - 25% after deductible in-network
 - 60% after deductible out-of-network

- Contact** Cedars-Sinai Urgent Care Locations
- Beverly Hills
8767 Wilshire Blvd., 2nd Floor
Beverly Hills, CA 90211
310-248-7000
- Culver City
10100 Culver Blvd., Suite E
Culver City, CA 90232
310-423-3333
- Los Feliz
1922 Hillhurst Avenue, Second Floor
Los Angeles, CA 90027
424-314-5200
- Playa Vista
2746 West Jefferson Blvd., 2nd Floor
Playa Vista, CA 90094
424-315-2240
- As hours may change from time to time, visit cedars-sinai.org/urgentcare for current information.

Anthem LiveHealth Online

- Type of care**
- To see an Anthem physician by video using your computer or mobile device; available 24/7
 - For benefits-eligible employees enrolled in a Cedars-Sinai medical plan.

- When to use**
- Any illness or injury (non-life-threatening)
 - Sick kids after hours
 - While traveling
 - If you would prefer to use remote technology
 - Behavioral health needs (copays apply)
- Spanish-speaking doctors are available by appointment using Cuidado Médico on LiveHealth Online from 7 a.m.–11 p.m. seven days a week

Copay None, except for behavioral health visits.

- Contact**
- Web: livehealthonline.com
- App: Search for “LiveHealth Online” in your mobile device store

Hospital Emergency Department

Type of care For emergency treatment if you have a severe or life-threatening condition.

- When to use**
- Bleeding that will not stop
 - Bone breaks
 - Chest pain or stroke
 - Fever in babies (under eight weeks)
 - Major cuts
 - Ongoing vaginal bleeding if pregnant
 - Seizure without existing condition
 - Serious burns
 - Serious injury to head, neck, spine or back
 - Snake bite
 - Sudden loss or change of vision
 - Suicidal thoughts
 - Vomiting or coughing up blood

- Copay**
- Cedars-Sinai and Cedars-Sinai Marina del Rey Hospital
 - Vivity HMO and Blue Cross HMO: \$150/visit
 - Blue Cross PPO: \$150/visit
 - Anywhere else:
 - Vivity HMO and Blue Cross HMO: \$250/visit
 - Blue Cross PPO: \$250/visit + 25% after deductible
- Copay waived only if admitted.

- Contact**
- Cedars-Sinai Emergency Department
North Tower, Street Level
8700 Beverly Blvd.
Los Angeles, CA 90048
310-423-3277 or call 911
- Cedars-Sinai Marina del Rey Hospital
Emergency Department
4650 Lincoln Blvd.
Marina del Rey, CA 90292
310-448-5200 or call 911

PHARMACY BENEFITS

Vivity HMO

Rx Copays	Vivity HMO CarelonRx	
You pay ...	In-Network Retail ¹	Carelon Rx* Home Delivery
Tier 1 Typically generic; includes diabetic supplies	\$10	\$10
Tier 2 Typically brand formulary	\$20	\$40
Tier 3 Typically brand nonformulary; includes compound drugs (retail only)	\$40	\$80
Tier 4 Typically specialty medications; includes self-injectable (except insulin)	20% of Rx maximum allowed amount (maximum \$300 copay per fill for a 90-day supply)	
Out-of-pocket max	Medical and Rx combined \$1,500/1 person, \$2,500/2 persons \$3,500/3 or more	

¹ At in-network retail pharmacies, 90-day supply for three x 30-day supply copays.

RX BENEFIT THROUGH CARELONRX*

The Vivity HMO pharmacy benefit is administered by CarelonRx.*
Use your Vivity HMO ID card at the pharmacy.

Vivity HMO Rx benefit questions?

Contact CarelonRx (Vivity)

Phone: 833-267-2130
Hours: 24/7
Web: [anthem.com/ca](https://www.anthem.com/ca)
Pharmacy: [anthem.com/ca](https://www.anthem.com/ca)
Finder: (Find a Doctor: Vivity > Pharmacy)

Under the Vivity HMO, prescription medications are covered only at in-network pharmacies. Specialty, compound and self-injectable medications are covered only through the CarelonRx specialty pharmacy and may not be available through home delivery. Call CarelonRx at 833-267-2130 for details.

*Name change from IngenioRx to CarelonRx on Jan. 1, 2023.

Blue Cross PPO and Blue Cross HMO

RX BENEFIT THROUGH MEDIMPACT

The Blue Cross PPO and Blue Cross HMO pharmacy benefit is administered by MedImpact. When you are filling prescriptions, you'll need to use your MedImpact ID card and member numbers.

Blue Cross PPO and HMO Rx benefit questions?

Contact MedImpact

Phone: 800-788-2949
Web: [medimpact.com](https://www.medimpact.com)

MedImpact Direct Specialty Program

Phone: 877-391-1103 (TTY dial 711)
Email: specialtyservicecenter@medimpactdirect.com

Under the Blue Cross PPO and Blue Cross HMO:

- Prescription medications are covered only at MedImpact network pharmacies, Birdi mail order pharmacy or Walgreens.
- Specialty medications are covered only through the Cedars-Sinai Pharmacotherapy Clinic (see the next page for details) and MedImpact Direct Specialty Program.

Rx Copays	MedImpact In-Network Pharmacy		Walgreens	
	Retail 30-day supply	Birdi Mail Order and Retail 90-day supply	Retail 30-day supply	Retail 90-day supply
Generic¹	\$10	\$25	\$30	\$75
Brand formulary²	25% \$25 min/ \$75 max	25% \$65 min/ \$195 max	25% \$45 min/ \$135 max	25% \$115 min/ \$345 max
Brand nonformulary²	40% \$40 min/ \$120 max	40% \$100 min/ \$300 max	40% \$60 min/ \$180 max	40% \$150 min/ \$450 max
Specialty Through MedImpact Direct Specialty Program	Same copay as above, based on tier	Not covered	Not covered	Not covered
Specialty³ Through Cedars-Sinai Pharmacotherapy Clinic	\$0	Not covered	Not covered	Not covered
Rx Out-of-pocket max⁴	Rx only			
Blue Cross HMO	\$6,100/1 person		\$11,700/2 or more	
Blue Cross PPO	\$3,600/1 person		\$4,450/2 or more	

¹ Certain high-cost generics will not be available.

² If you request a brand drug when a generic is available, you pay the brand formulary or brand nonformulary copay (whichever the case may be), plus the difference between the brand drug cost and generic drug cost. (In this situation, the cost could be more than the maximum listed above.)

³ Available for certain specialty medications for employees and dependents covered by the Blue Cross PPO or HMO who reside in California. To find out if you are eligible, send an email with the name of your medication to: GroupPharmacotherapyClinic@cshs.org

⁴ If you use a coupon on a medication, only the amount you actually pay out-of-pocket will be applied toward the out-of-pocket maximum.

Blue Cross PPO and Blue Cross HMO Rx Benefit (continued)

AUTOMATIC GENERIC SUBSTITUTION

- To help contain the high cost of prescription drugs, the pharmacy automatically substitutes a generic drug for the prescribed brand drug if a generic is available and can be safely and effectively substituted.
- If there is no generic equivalent, you'll receive the brand drug and pay the brand formulary or brand nonformulary copay.
- If you tell the pharmacist you want the brand drug rather than the generic, you'll pay the brand formulary or brand nonformulary copay plus the difference between the brand drug cost and the generic drug cost.
- If your doctor writes the prescription for the brand medication and specifies "Do Not Substitute" on the Rx, you'll pay the generic copay plus the difference between the brand formulary or brand nonformulary copay (whichever the case may be).

CEDARS-SINAI PHARMACOTHERAPY CLINIC FOR SPECIALTY MEDICATIONS

Specialty medications are used to treat complex and chronic conditions, in areas including, but not limited to, cancer, inflammatory, immunodeficiency virus, neurology, pulmonology and endocrinology conditions. Specialty medications typically require special monitoring, administration and handling.

At Cedars-Sinai, we have a list of specialty medications our Cedars-Sinai Specialty Pharmacy can provide and a Pharmacotherapy Clinic to ensure safe and optimal use of your specialty medication.

Cedars-Sinai employees and their dependents will **not have a copay** for their specialty medication and for seeing a pharmacist at the Pharmacotherapy Clinic if they:

- Reside in California
- Have MedImpact prescription benefit coverage, and
- Elect to fill their specialty medication at the CSMC Specialty Pharmacy

If you or your dependents are eligible for the Pharmacotherapy Clinic, you will be scheduled for an annual visit with the Pharmacotherapy Clinic Pharmacists, who will provide the following services:

- Perform a comprehensive review of all your prescription(s) and over-the-counter medication(s)
- Educate you about the specialty medication(s) your doctor prescribed
- Identify and resolve any medication-related issues (e.g., side effects) with you and follow-up with your doctor as needed
- Update your medication list
- Assist you with insurance authorizations for your specialty medication(s)
- Contact you monthly to coordinate your refills
- Upon request, deliver your medications to your home at no cost to you
- Provide 24 hours/7 days a week access to a specialty-trained pharmacist

To determine if you are eligible for this service, please send an email with the name of your medication to: GroupPharmacotherapyClinic@cshs.org

If you are eligible for this service, the pharmacist will contact your doctor who prescribed your specialty medication. Your doctor will be asked to submit a referral for you to be seen in the Pharmacotherapy Clinic.

For more information, visit the Pharmacotherapy Clinic web page by scanning this QR code with your mobile device:



QUANTITY, AGE OR GENDER RESTRICTIONS AND STEP THERAPY

Under pharmacy best practices, some types of medications have:

- **Quantity limits:** To comply with FDA product label indications.
- **Age restrictions:** Some drugs are approved for adults only.
- **Gender restrictions:** Some drugs are approved for males or females only.

If your prescription is not consistent with FDA quantity, age or gender guidelines, MedImpact will not approve filling the prescription without their prior authorization.

Another best practice we use is step therapy, a pharmacy program that requires you to try a generic or preferred medication first, and then, if that medication is found to be ineffective, you can "step up" to the brand or higher-cost medication.

Step therapy will be required if your medication is covered under the step therapy program and there is no record of a generic drug previously being dispensed or if diabetic medication is prescribed when you have no symptoms of diabetes or cardiovascular disease.

For prior authorization, your physician submits a medication request form stating how your prescription complies with FDA quantity, age or gender clinical guidelines or why you must have the brand drug without trying the generic first. For a medication request form, your physician's office should call MedImpact at 800-788-2949 or fax 888-783-1773 (medical providers only).

90-DAY SUPPLY

You can obtain a 90-day supply of a maintenance medication through a MedImpact network pharmacy or the Birdi mail order pharmacy (with lower copays) or Walgreens (with higher copays).

BIRDI MAIL ORDER PHARMACY

You can obtain a 90-day supply of a maintenance medication using Birdi mail order pharmacy. For new prescriptions, three 30-day fills will be required to ensure effectiveness before 90-day maintenance fills can begin. After that, ask your doctor to write the prescription for a 90-day supply.

Birdi Mail Order Pharmacy (formerly MedImpact Direct Mail)

- Phone: 855-873-8739 (TTY dial 711)
- Email: customerservice@birdirx.com
- Web: medimpact.com

DENTAL BENEFITS

Your dental plan options are similar to your medical plan options: the DeltaCare USA plan, which is an HMO-type plan, or the Delta Dental PPO plan. The table below shows your out-of-pocket charges for covered dental care.

DeltaCare USA

- When you enroll, you select a primary dentist from the DeltaCare USA network.
- You must see your primary dentist for all basic dental care. If you need specialty dental care, you must get a referral from your primary dentist. Otherwise, the dental care is not covered by the plan.
- There is no annual deductible or annual plan limit (except for orthodontia). This plan pays 100% of preventive care and for most other services, you pay a copay.

Delta Dental PPO

- You can see any licensed dentist or dental specialist.
- You pay less out of pocket if you see a Delta Dental PPO dentist.
- You must pay the annual (calendar-year) deductible and a percentage of the charge for covered dental services. The plan has an annual maximum amount it will pay.

Dental Plan Options	DeltaCare USA	Delta Dental PPO
Type of plan	Dental Maintenance Organization	Preferred Provider Organization
Where available	Only if you live in California	Anywhere in the U.S.
Primary dentist required?	Yes	No
Calendar-year benefit limit	None	\$2,000/person
Calendar-year deductible	None	\$50/person \$150/family No deductible for preventive, diagnostic or orthodontia
Preventive and diagnostic <i>Check-ups, X-rays, cleanings, etc.</i>	No copay	Delta Dental PPO dentist: 0% Delta Dental dentist: 0% Other dentist: 0%*
Basic services <i>Fillings, extractions, etc.</i>	No copay for most services	Delta Dental PPO dentist: 10% Delta Dental dentist: 20% Other dentist: 20%*
Major services <i>Crowns, bridges, etc.</i>	Copay for most major services See benefit booklet for details	Delta Dental PPO dentist: 40% Delta Dental dentist: 50% Other dentist: 50%*
Orthodontia <i>For adults and children</i>	\$1,600 to \$1,800 copay, plus \$350 start-up fee	Delta Dental PPO dentist: 50% Delta Dental dentist: 50% Other dentist: 50%* to \$1,800 lifetime maximum

* Delta Dental PPO and Delta Dental dentists won't charge more than the percentage shown above for covered dental services. If you see a non-Delta Dental ("Other") dentist, you'll have to pay the difference between the amount Delta Dental pays and the amount the non-Delta Dental dentist charges.

Questions about what's covered?

Visit the website (both plans): deltadentalins.com

Call customer service phone number | group number:

- DeltaCare USA (HMO) 800-422-4234 | 75012
- Delta Dental PPO 888-335-8227 | 05356

DENTAL BENEFITS (continued)

DELTA DENTAL TOOLS AND SERVICES

These tools and services are available to employees and their family members enrolled in a Cedars-Sinai sponsored Delta Dental plan.

VIRTUAL CONSULT: ONLINE DENTIST VISITS

When you have an urgent dental care issue like pain or a cracked tooth, Virtual Consult allows you to have a video appointment with a Delta Dental network dentist. Dentists provide quick, real-time consultations, write prescriptions and provide after care instructions for pain or infection.

Visit deltadentalvirtualconsult.com for more information and to sign up.

TOOTHPIC: REMOTE DENTAL ASSESSMENTS

Toothpic offers an innovative way to get a virtual dental assessment from the comfort of home.

- After registering on the website, you will begin by answering a few short questions about your oral history and the reason for your visit.
- Toothpic then helps you take six photos of your teeth, gums and any area of concern using a mirror and smartphone in a brightly lit room.
- In under 24 hours, you'll receive a personalized dental report highlighting areas of concern with next steps and possible treatments.

This program is not recommended for individuals who prefer to visit their dentist regularly (every six months) for a routine check-up and cleaning. Using this remote action will count as one of your two routine annual check-ups. Any deductibles, coinsurance, calendar-year limits and frequency limits apply.

To get started:



1. Scan this QR code with your smartphone or visit: deltadental.toothpic.com
2. Click on Register Now to create an account.
3. Log in and get started.

BRUSHSMART: ORAL HEALTH WELLNESS PERKS

Brushing and flossing regularly is the best way to strengthen your teeth, fight cavities and plaque and prevent gum disease.

Delta Dental's new BrushSmart program is here to help you improve your dental care routine with perks like a 20% discount on Sonicare products, personalized solutions for special dental needs and more. You're eligible if enrolled in a Delta Dental plan.

Sign up at: brushsmart.org

Monthly Dental Benefit Premiums: July 1, 2023–June 30, 2024

	Employee Only		Employee and Spouse/ Domestic Partner		Employee and Child(ren)		Employee and Family	
	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays	You Pay	Cedars-Sinai Pays
DeltaCare USA (HMO)	\$5.00	\$10.41	\$10.00	\$16.45	\$7.00	\$19.64	\$12.00	\$26.39
Delta Dental PPO	\$21.00	\$33.88	\$33.00	\$63.84	\$28.00	\$80.90	\$60.00	\$94.29

VISION BENEFITS

You can purchase vision coverage for yourself and your eligible family members from Blue View Vision. You'll receive a higher benefit if you use Blue View Vision providers. Your Blue View Vision care copays and reimbursement amounts are listed below.

Questions about what's covered?

Visit the website: anthem.com/ca
 Call customer service: 866-723-0515
 Group number: Same as your medical plan group number

Service	Blue View Vision Network Provider	Out-of-Network Provider
Eye exams Covered once every 12 months	You pay \$10 copay	Plan reimburses up to \$50
Prescription Glasses or Contacts for Vision Correction		
GLASSES		
Lenses Covered once every 12 months	You pay: <ul style="list-style-type: none"> Standard lenses: \$10 copay Progressive lenses: Additional \$50 copay Anti-reflective lenses: Additional \$40 copay If you select lens options that exceed the allowance, you pay the difference 	Plan reimburses up to: <ul style="list-style-type: none"> Single vision: \$50 Lined bifocals: \$75 Lined trifocals: \$100 Lenticular: \$125
Frames Covered once every 24 months	Plan pays up to \$170, then 20% of remaining balance <ul style="list-style-type: none"> If you select frames that exceed the allowance, you pay the difference Nonprescription sunglasses are not covered 	Plan reimburses up to \$80
OR		
CONTACT LENSES		
Covered once every 12 months instead of glasses (lenses and frames)		
Professional fitting and evaluation <i>Standard: Conventional lenses (see below) and disposable single vision soft contact lenses</i> <i>Premium: Any other type of lens, including toric, multifocal, postsurgical, gas permeable and extended wear</i>	Charges based on type of lenses prescribed. You pay: <ul style="list-style-type: none"> Standard lenses: \$55 copay Premium lenses: 90% of provider's retail fee 	Not covered
Contact lenses <i>Conventional: Lenses that are taken out each night and reused the next day</i>	<ul style="list-style-type: none"> All types of lenses: Plan pays up to \$170 Conventional lenses: Plan pays an additional 15% of remaining balance 	Plan reimburses up to \$105

Using your Blue View Vision plan

- If enrolled in vision, you'll be sent an Anthem ID card. If you're also enrolled in an Anthem medical plan, you'll receive one card for both medical and vision.
- Find a network provider at anthem.com/ca
- When you make an appointment with a network provider, tell them you're covered by Blue View Vision and give them your Anthem ID number, then take your card with you to your appointment.
- Get your out-of-pocket charges reimbursed using the healthcare flexible spending account (see [page 28](#)).

Monthly Vision Premiums: July 1, 2023–June 30, 2024

	You Pay	Cedars-Sinai Pays
Employee Only	\$8.70	\$0.00
Employee and Spouse/ Domestic Partner	\$17.42	\$0.00
Employee and Children	\$18.63	\$0.00
Family	\$29.78	\$0.00

WELLNESS MATTERS AT CEDARS-SINAI

Wellness Matters is Cedars-Sinai's employee wellness program offering support for your emotional, physical, financial and nutritional health goals. Wellness Matters' aim is to provide a balance of supportive resources that ultimately lead to higher quality of life. Subscribe to Wellness Matters communications to receive a monthly calendar with clickable links to events, resources and programs.



WELLNESS MATTERS HELPS YOU CULTIVATE BROAD-BASED WELLBEING THROUGH VARIOUS RESOURCES ON OUR INTRANET PAGE:

MENTAL HEALTH RESOURCES

- Monthly virtual seminars on various mental health topics
- Virtual guided meditation seminars and sound baths
- 1:1 Stress coaching appointments
- Work & Life Matters resources (EAP)
- Anthem behavioral health resources (if enrolled in a Cedars-Sinai medical plan)

NUTRITION RESOURCES

- Virtual seminars on various nutrition topics
- 1:1 Nutrition coaching appointments with a registered dietitian
- Recipe books and recipes of the month
- Healthy eating options onsite
- Discounts on healthy food delivery services

FITNESS RESOURCES

- Virtual seminars on various fitness topics
- Weekly onsite fitness classes
- Discounts on gym memberships and local fitness studios

REWARDS & DISCOUNTS

- Discounted memberships through Entertainment Benefits (employee discounts)
- Wellness Matters incentive program (see more on next page)

ADDITIONAL RESOURCES

- Employee volunteerism
- Diversity and inclusion
- Virtual seminar recordings

Answers about the Wellness Matters Program

- Email: wellnessmatters@cshs.org
- Web: intranet.cshs.org/sites/Employee-Wellness
- Wellness Matters on the Cedars-Sinai Intranet: [Employee Resources > Health and Wellbeing > Wellness Matters](#)



WELLNESS MATTERS INCENTIVE PROGRAM

Earning a Wellness Matters Incentive

If you're a benefits-eligible employee enrolled in a Cedars-Sinai medical plan, you are eligible to earn one Wellness Matters incentive each benefit year (July 1–June 30).

JUST TAKE THESE STEPS:

1. Complete one healthy action from the list on page 26—and keep the receipt.
2. Submit two items to TRI-AD via the tri-ad.com participant portal, fax or mail:
 - A completed Proof of Healthy Action form, which you can complete online or download and print from: tri-ad.com
 - A receipt or other documentation with the date of participation or purchase and a description of the action or service/item purchased. You may take a picture and upload documentation on the TRI-AD website portal.

TRI-AD will review your submission to confirm your healthy action is eligible for a Wellness Matters incentive contribution. They will notify you if additional documentation is needed. or

If your healthy action is approved, TRI-AD will deposit your contribution in an HRA account for you to spend on eligible healthcare expenses.

Incentive Amount

The annual contribution is based on your hourly pay rate.

2023–2024 Cedars-Sinai Wellness Matters Incentive Contribution	
Pay Band/Per Hour	Annual Contribution
Under \$45	\$300
\$45 or more	\$150

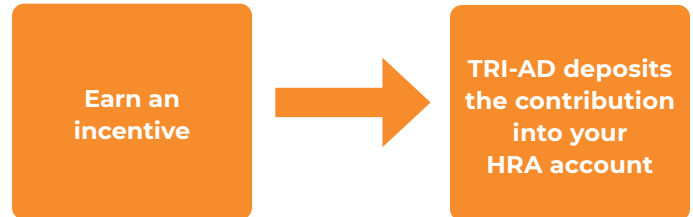
Every year, you can earn \$50 More !

Once you've earned a Wellness Matters incentive, you can earn an additional \$50 reward each benefit year (July 1–June 30) by doing another one of the healthy actions on the list.

Submit proof to TRI-AD using the same process as for the Wellness Matters incentive, and you'll receive \$50 via check or direct deposit to your bank account (whichever you prefer) to spend on anything you wish.

Your HRA Account

Once earned, your incentive contribution is credited to a health reimbursement arrangement (HRA) account for you with TRI-AD:



The money will generally become available around the middle of the month following the month you earned the incentive. For example, if TRI-AD approves your healthy action documentation on July 20, your funds would become available mid-August.

You can monitor your HRA account several ways:

- Web: tri-ad.com
- App: Search "TRI-AD Benefits on the Go" at your app store (use client ID TIDCEDARS to register)
- Call: 855-460-6971

You'll need to create a personal account on your first visit to the website or app.

YOURS UNTIL YOU LEAVE

Your HRA account balance will roll over from year to year, and there's no deadline for spending the funds, as long as you remain employed at Cedars-Sinai. For funds to rollover, you must be employed on the first day of the following benefit year (July 1).

If your HRA account reaches the \$1,000 balance limit, however, contributions will stop until you spend some of your funds.

Healthy Actions List

EARN A WELLNESS MATTERS INCENTIVE BY TAKING ONE OF THESE ELIGIBLE HEALTHY ACTIONS

You must provide proof to TRI-AD for any ONE of the following wellness-related activities or products. Specific items listed are examples; contact TRI-AD with questions about items not listed.

- Adult team sports registration fees such as baseball, softball, tennis or soccer (covers individual fees but not team fees)
- Athletic shoes
- Classes/programs (onsite or virtual) focused on cardiovascular health, muscle toning, stress reduction or other health topics offered by the Cedars-Sinai wellness program, an established gym, facility, club or locally-recognized program
- Community event entry fees for activities such as charity walks, road races or triathlons
- Exercise class/program fees (onsite or virtual): yoga, Pilates, meditation, kickboxing, aerobics, step, cycling/spin, dance, boot camp, etc.
- Exercise equipment (treadmill, elliptical machine, stationary bike, Bowflex, etc.)
- Health club, gym or community pool fees, whether for initial registration, monthly or annual membership
- Membership fees for wellness-related apps including but not limited to: Calm, Daily Burn, Headspace, Insight Timer, Intent, MyFitnessPal, Nike Training Club, Peloton, Sworkit, Tone It Up, YogaWorks
- Nighttime mouth guard
- Nutritional counseling or classes (see ineligible actions at right for exclusions)
- Personal interest/development classes intended to teach a new hobby or encourage forms of relaxation such as art, music or a foreign language
- Personal trainer fees
- Proof of attendance to one of the monthly wellness program sessions (grand round) held on campus
- Proof of your visit to your doctor, dentist, optometrist, chiropractor, physical therapist or other health specialist
- Sports equipment (athletic shoes, basketballs, baseballs and baseball bats, yoga mats, tennis rackets, skateboards, exercise DVDs, etc.)
- Therapy treatments such as hydrotherapy, reflexology or acupuncture
- Wearables such as pedometers, heart rate monitors and wireless/ electronic activity tracking devices (Apple Watch, Fitbit, Garmin, etc.)
- Weight lifting equipment (barbells or kettlebells)
- Weight loss program fees such as Weight Watchers or Jenny Craig (excludes food)

REASONABLE ALTERNATIVES

If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact myHR at 424-314-myHR (6947) or myHR@cshs.org and they will work with you (and, if you wish, with your doctor) to find a reasonable alternative that is right for you in light of your health status.

Where to submit proof that you've taken healthy actions

Submit your healthy action documentation to TRI-AD online or via fax or mail.

- Fax: 866-233-4741
- Mail: TRI-AD
221 West Crest St., Suite 300
Escondido, CA 92025

THE FOLLOWING ARE NOT ELIGIBLE FOR A WELLNESS MATTERS INCENTIVE:

- Activity tickets or passes
- Mobile phones or tablets, even if they can be used to track fitness activity
- Electronic game consoles that simulate activity (Wii, Xbox, PlayStation, etc.)
- Expenses and/or fees incurred before the first day of the current benefit year
- Health spa products, treatments, massages or saunas
- Hydrostatic testing
- Maintenance costs for sport or exercise equipment
- Services (such as nutritional counseling) or devices (such as glucose monitors) that are covered as an eligible expense under the healthcare flexible spending account (FSA) or health reimbursement arrangement (HRA), or as a covered benefit under your medical plan
- Sports attire/clothing (with the exception of athletic shoes)
- Standing desks
- Tax preparation fees
- Team registration fees associated with adult team sports
- Tournament fees
- Weight loss program foods, supplements, over-the-counter medications or surgical procedures

Spending your HRA Account Funds

A health reimbursement arrangement (HRA) is an IRS-approved, tax-advantaged health benefit plan that reimburses you for eligible out-of-pocket medical expenses. There are hundreds of eligible expenses that can be paid from your HRA account, including:

- Healthcare deductibles and copays/coinsurance
- Prescription drugs
- Dental care and orthodontia
- Vision (glasses, contact lenses, vision correction surgery)
- Acupuncture and chiropractic care
- Public transportation to and from a healthcare facility to receive healthcare services

For a complete list, log on to tri-ad.com and search for the healthcare FSA eligible expenses list.

USE YOUR TRI-AD BENEFITS CARD FOR CONVENIENCE

To help you spend the funds, TRI-AD will send you a debit card. If you are enrolled in the healthcare FSA, you may already have a card—since both accounts are administered by TRI-AD and use the same card. See [page 29](#) for details.



The main benefit of the debit card is convenience: it allows you to pay the provider directly from your HRA account instead of paying out of pocket, filing a claim and then waiting for reimbursement.

Whether you pay with your own money or use your debit card, **always keep the itemized receipt in case additional documentation is requested later.**

Questions about the Wellness Matters incentive contribution or HRA account?

Contact TRI-AD for help with questions about ...

- Earning a Wellness Matters contribution or reward
- Healthy actions list—what's eligible, what's not
- Issues with your HRA or reward status
- List of eligible expenses that you can spend your HRA funds on (posted on the tri-ad.com participant portal)

TRI-AD

- Phone: 855-460-6971
Monday–Friday 5 a.m.–6 p.m. PT
- Email: cedarssupport@tri-ad.com
- Web: tri-ad.com

HRA proof documentation due date: Sept. 28

You have 90 days after the end of the benefit year (June 30) to submit expenses for healthcare services received between July 1 and June 30 (or the last day of the month Cedars-Sinai employment ends).

PROVIDING PROOF FOR AN ELIGIBLE HEALTHCARE EXPENSE

Because income taxes are waived on contributions to your HRA account, **TRI-AD must verify that every expense is eligible.**

- Sometimes when you use your debit card, the expense can be automatically verified.
- Sometimes you will need to submit proof that the expense was eligible—even when using the debit card.

How do you know you need to submit proof?

- You'll receive an email notice or a letter from TRI-AD
- Or you can check your account at: tri-ad.com

ACCEPTABLE PROOF

You must submit documentation that has all of the items listed below, for instance an Explanation of Benefits (EOB) from the insurance company or an itemized receipt. Credit card receipts are not an accepted form of documentation.

EOB or itemized receipt must show:

- Merchant or provider name and address
- Name of person receiving the service
- Item purchased or service received
- Date of purchase or service
- Amount of purchase or service

For over-the-counter medications you must also provide a copy of the prescription from your doctor.

If documentation is requested by TRI-AD and you aren't able to provide it, you may have to repay your account and your account may be suspended

Flexible Spending Accounts

Two types of flexible spending accounts (FSAs) allow you to spend untaxed income on eligible healthcare and child/adult care expenses.

HEALTHCARE FSA

This FSA offers a way to **save up to 30% on eligible out-of-pocket healthcare expenses for you and your dependents**, such as medical, dental and vision coinsurance and copays, prescription drugs, glasses/contacts/LASIK and orthodontia. Many over-the-counter medications and supplies are reimbursable, but some OTC medications require a prescription from a doctor.

For more on eligible expenses, go to tri-ad.com. (TRI-AD is our FSA administrator.)

CHILD/ADULT CARE FSA

This FSA offers a way to **pay for eligible child care, adult daycare and elder care expenses on a tax free basis**. You can participate if you pay someone to care for these dependents so you can work:

- Child(ren) under age 13
- Elder parent or disabled dependent incapable of self-care

Use funds for daycare, in-home child care and after-school care, or for nonmedical nursing or nurse's aide services and/or home care.

Benefit Year	Annual Contributions	Claims Run-Out Period	
July 1, 2023–June 30, 2024	<p>Healthcare FSA</p> <p>Any benefits-eligible employee may contribute:</p> <ul style="list-style-type: none"> • Minimum: \$120/year • Maximum: \$3,050/year 	<p>Child/Adult care FSA</p> <p>Any benefits-eligible employee may contribute:</p> <ul style="list-style-type: none"> • Minimum: \$120/year • Maximum: \$5,000/year* (\$2,500 if married and filing separately) 	<p>You have 90 days following the end of the benefit year to submit claims for reimbursement to TRI-AD. The claims run-out period ends: Sept. 28, 2024</p>

* \$1,200 if you earn more than \$135,000 per year.

FSA Rules to Note

FSA PARTICIPATION ENDS EVERY JUNE 30

FSA participation does not carry over to the next benefit year. You must re-enroll each May during open enrollment to participate the next July 1–June 30 benefit year.

ANNUAL CONTRIBUTION LIMITS

The maximum amount you are allowed to contribute is set by law. Limits for the current year are shown in the table above.

The IRS requires an annual nondiscrimination test to make sure higher-paid participants do not disproportionately benefit from the FSAs. If the plan fails that test, Cedars Sinai must take corrective action. For this reason, annual child/adult care FSA contributions for employees earning \$135,000 or more a year will be limited to \$1,200.

CHILD/ADULT CARE FSA TAX CONSIDERATIONS AND ELIGIBILITY

Federal tax credit: Federal tax regulations also make available a tax credit for deductible dependent care expenses. Before you enroll in the FSA, you may wish to investigate the federal tax credit and see which provides the greater benefit. You may even be able to use both the child/adult care FSA and federal tax credit, but not for the same expenses. See IRS Publication 503 for more information or ask your tax advisor which is better for you.

Filing your income tax return: If you participate in the child/adult care FSA, you must complete an IRS Form 2441 (Child and Dependent Care Expenses) and attach it to your federal income tax return Form 1040. If you use a 1040A, attach a Schedule 2. On the form, you show expenses reimbursed through the account.

Eligibility: In addition to the dependent eligibility rules above, you must meet one of the following family status situations to have the expense reimbursed from your child/adult care FSA:

You must be:

- A single parent
- Married and both you and your spouse work
- Married; you work, and your spouse is a full-time student, looking for work or physically or mentally incapable of self-care
- The custodial parent (if you are divorced or unmarried and share custody of your children)

USE-IT-OR-LOSE-IT

Estimate FSA contributions conservatively; you must incur expenses during the benefit year and submit claims by the claims run-out deadline: 90 days after the end of the benefit year.

Child/adult care FSA: Any unspent money at the end of the benefit year is forfeited.

Healthcare FSA: You can carry over up to \$610 in healthcare FSA funds to the next year.

- If you have money left in your healthcare FSA at the end of the benefit year (June 30, 2024), that money is held for the next 90 days (until Sept. 28, 2024) to pay for any remaining claims for healthcare services you received during the July 1, 2023–June 30, 2024 benefits year.
- In early October 2024, up to \$610 in remaining funds will automatically be carried over and available to spend during the July 1, 2024–June 30, 2025 benefits year. Any remaining funds above the \$610 limit will be forfeited.

For a complete listing of reimbursable healthcare and dependent care expenses, call the IRS at 800-829-3676 and request [Publications #502](#) (healthcare) or [#503](#) (child/adult care) or access them at: irs.gov

How Our FSAs Work

Although each account is separate and money cannot be interchanged between the accounts, they generally work the same way:

- 1. Determine the amount you'd like to contribute** for the benefit year.
 - For help estimating your eligible expenses, use TRI-AD's online tax savings calculator: tri-ad.com
 - For minimum and maximum contribution amounts, see the table on the previous page.
 - If you need assistance, contact:
 - MBC HR Employee Benefits Help Desk at 888-302-3941
 - TRI-AD at 855-460-6971

- 2. Enroll in one or both of the accounts on:** Cedars-Sinai.MyBenefitChoice.com

- 3. Your annual contribution amount is divided by the number of pay periods with benefit deductions**, usually 24 if you start on July 1; otherwise, the remaining number of pay periods in the benefit year.

The contributions are transferred from your paycheck before taxes are calculated and deposited tax-free into your FSA(s) with TRI-AD. You never pay taxes on this money.

You can access your FSAs by going to tri-ad.com or by using the TRI-AD Benefits on the Go mobile app.

- 4. When you incur an eligible expense, do one of the following:**
 - **Healthcare FSA expenses:** Use your TRI-AD debit card to pay the merchant or provider.
 - **Both types of FSA expenses:** Pay your provider for the expense and then submit a claim form with itemized receipt(s) to TRI-AD for reimbursement. TRI-AD will take the money from your account and direct-deposit it into your checking account or send you a check for the expense.

You can send your claims to TRI-AD any of the following ways:

- Web: tri-ad.com
- App: TRI-AD Benefits on the Go (client ID TIDCEDARS)
- Fax: 844-791-8318
- Mail: TRI-AD Reimbursement Plans Department
221 West Crest Street, Suite 300
Escondido, CA 92025-1737

If you have questions, contact TRI-AD Customer Service:

- Phone: 855-460-6971
Monday–Friday 5 a.m.–6 p.m. PT
- Email: cedarssupport@tri-ad.com

TRI-AD Benefits Card for HRA Account and Healthcare FSA Expenses

If you receive a Wellness Matters incentive contribution to your HRA Account or enroll in the healthcare FSA, you'll be issued a prepaid TRI-AD debit card.

When you have qualified eligible expenses at a physician's office, healthcare provider or merchant that accepts HRA account/healthcare FSA debit cards, simply use your card. The amount of your qualified purchases will be deducted—automatically—from your account and electronically transferred to the provider/merchant for immediate payment.

Because both accounts use the same card, if you have both healthcare FSA and HRA accounts, the funds will be taken from the healthcare FSA first. Once your healthcare FSA balance is depleted, funds will be withdrawn from your HRA account.

The TRI-AD debit card eliminates having to pay out of pocket and waiting for reimbursement. Instead, you use the money in your account directly. If you don't have your TRI-AD debit card with you, you can still pay with your own money (or personal credit card) and submit the receipts to TRI-AD for reimbursement (called a "claim").

Always save itemized receipts. Even when you use your TRI-AD debit card. You may be asked to submit receipts to verify that your expenses comply with IRS guidelines. (If documentation is requested by TRI-AD and you aren't able to provide it, you may have to repay your account and your account may be suspended.)

Keep Your TRI-AD Debit Card

When you use it up, don't throw it away.
TRI-AD debit cards are reloaded each year.

Where Can You Use Your TRI-AD Benefits Card?

**Physicians' offices • Dental offices • Medical facilities
Hospitals • Opticians/optometrists**

If your provider accepts HRA account/healthcare FSA debit cards (not all providers do), you can use your TRI-AD debit card for their copays, coinsurance and invoices.

Merchants • Pharmacies • Stores

You can use your TRI-AD debit card at doctors' offices, vision care centers, pharmacies, merchandise stores and grocery stores that can identify eligible expenses at the checkout.

No TRI-AD Benefits Card?

No problem! If you don't have your card with you when you need it or it hasn't yet arrived, no problem. You can pay with a personal credit card or cash and submit a claim for reimbursement to TRI-AD via web, mobile app, fax or mail.

Managing your HRA account and FSAs

Manage your accounts online at tri-ad.com or on your mobile device. Search for "TRI-AD Benefits on the Go" at your mobile app store.

HRA Account and Healthcare FSA Comparison

You may have noticed that the HRA account is similar to the healthcare FSA — and you're right, they are. Both accounts allow you to use untaxed funds to pay for eligible healthcare expenses for you and your eligible dependents. But there are also some important differences. Here is a comparison:

Feature	HRA Account	Healthcare FSA
What it is	Health reimbursement arrangement (HRA)	Flexible spending account (FSA)
Who funds the account	Cedars-Sinai (Wellness Matters incentive contributions)	Employee
Purpose	Incentive for participating in the wellness program	Reduce the cost of out-of-pocket healthcare expenses (by paying with untaxed earnings from your healthcare FSA)
Eligible expenses	<p>Both plans cover nearly the same expenses:</p> <ul style="list-style-type: none"> • Healthcare deductibles and copays/coinsurance • Prescription drugs • Dental care and orthodontia • Vision (glasses, contact lenses, vision correction surgery) • Acupuncture and chiropractic care • Public transportation to and from a healthcare facility to receive healthcare services <p>For a complete list, visit: tri-ad.com</p>	
Use it or lose it?	No. Your balance (up to the \$1,000 account limit) will carry over each year as long as you remain employed with Cedars-Sinai.	Yes. You must spend most of the money in your account by June 30 each year. You can carry over up to \$610 to the next year, but unspent healthcare FSA funds over \$610 will be forfeited.
Claims due date	Sept. 28. You have 90 days after the end of the benefit year (June 30) to submit expenses for healthcare services you received between the previous July 1 and June 30.	Same as HRA
Cedars-Sinai medical plan enrollment	Yes. You must be enrolled in a Cedars-Sinai-sponsored medical plan (in addition to completing the healthy action) to receive the Wellness Matters incentive contribution to your HRA account.	No. You do not have to be enrolled in a Cedars-Sinai-sponsored medical plan to make healthcare FSA contributions.

Opt in for TRI-AD mobile alerts

Do you need to submit a receipt? Receive text messages immediately after any benefit card swipe that will require receipts to verify the expense is eligible.

Log in to [tri-ad.com](https://www.tri-ad.com) and update your mobile alert settings to opt in.

Financial Protection Benefits

Working for a healthcare organization, you see first-hand how people's lives can be devastated because they didn't plan for the unexpected—not only the loss or disability of a loved one, but also the loss of income. That's why Cedars-Sinai provides you with financial protection benefits: a basic level of life insurance and disability insurance, plus the opportunity to purchase additional coverage.

BASIC LIFE INSURANCE

Cedars-Sinai-paid life insurance provides a payment to your beneficiary if you die for any reason.

Employee coverage amount	1.5x annual base pay (\$50,000 minimum up to \$400,000 maximum)*
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Basic life insurance special features:

- Accelerated death benefit
- Emergency travel assistance
- Funeral planning

SUPPLEMENTAL LIFE INSURANCE

You can purchase additional life insurance for you and your family.

Employee coverage amount	Increments of your annual base pay 1x annual base pay to 7x annual base pay up to \$3 million maximum*
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Spouse/DP coverage amount	Increments of \$5,000 not to exceed 50% of employee's supplemental life insurance or \$200,000*
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Child(ren) coverage amount	Increments of \$2,500 up to \$10,000 One premium covers all eligible children
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Supplemental life insurance special features:

- Accelerated death benefit for you and your spouse/DP

Protect your loved ones— designate beneficiaries!

Your Cedars-Sinai life insurance and AD&D benefits provide valuable financial support to your loved ones if you die, giving them a temporary or partial source of income while adjusting to their loss.

But if your beneficiaries are not up to date, you risk having this money go to an unintended person or get tied up in legal or estate complications. Take just a few minutes to designate or update your beneficiaries online at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.com/MyBenefitChoice.com) or by calling 888-302-3941.

Basic (Cedars-Sinai-Paid) and Supplemental Life Insurance Q&As

What is an accelerated death benefit?

A one-time payment of up to 80% of your Cedars-Sinai-paid or supplemental life insurance coverage (to \$1 million) if you are diagnosed with a sickness or injury expected to result in death within 12 months; upon death the remainder would be paid to your beneficiary.

What is Emergency Travel Assistance (ETA)?

Included with your Cedars-Sinai-paid life insurance, ETA can be a lifesaver if you run into trouble while traveling—helping replace lost prescriptions or passports, providing referrals to English-speaking medical providers and more. (Call the MBC HR Employee Benefits Help Desk for details.)

Can my spouse/DP and children designate beneficiaries?

No. Spouse/DP and child life insurance benefits are paid to the employee.

Is life insurance coverage taxed?

Employer-paid coverage up to \$50,000 is tax-free. The value of your employer-paid life insurance over \$50,000 is added to your taxable wages as imputed income at an IRS-determined rate.

Are life insurance proceeds taxed?

No. The lump-sum payment your beneficiary would receive is not taxable income.

*Does coverage reduce when I get older?

Yes. Under basic and supplemental life and AD&D insurance, coverage amounts and premiums are reduced starting the July 1 after turning age 70: at age 70 to 65%; at age 75 to 45%; at age 80 to 30%. (The reduction is on the original amount of coverage.)

Life and AD&D insurance questions?

Contact Voya Life about accelerated death benefits, EOL, questions about portability and other benefit features: 800-955-7736.

Contact the MBC HR Employee Benefits Help Desk to confirm current coverage, update beneficiaries and report a death claim: 888-302-3941.

Applying for Supplemental Life Insurance

- You must purchase employee coverage to purchase spouse/DP coverage; if your employee coverage is denied, your spouse/DP cannot be covered.
- You don't have to purchase employee coverage to purchase child coverage.
- You (and your spouse/DP) are required to complete an evidence of insurability (EOI) form and receive insurer approval to purchase or to increase your coverage (see Q&As below for exceptions).
- Child coverage does not require an EOI form.
- Coverage starts the first day of the month after the insurance company approves your coverage.
- You must be actively at work (and dependents must not be disabled or hospitalized) for coverage to start.
- Suicide is not covered the first 24 months from the date your coverage starts or the date you increase your coverage.

Do I have to fill out an evidence of insurability (EOI) form for supplemental life insurance?

Usually, but not always.

If you apply the first time you're eligible for benefits, you can get up to the guaranteed issue amount of coverage (see below) without completing an EOI form (a health questionnaire) or receiving insurer approval.

During open enrollment, you may increase your coverage from 1x pay to 2x pay (not to exceed \$2 million) without completing an EOI form.

Guaranteed Issue	
Employee	2x annual base pay (including shift differential) up to \$2 million
Spouse/DP	\$25,000
Children	\$10,000

Must my spouse/DP complete an EOI form?

Again, it depends. When you're first eligible for benefits, you can purchase up to \$25,000 in coverage for your spouse/DP without completing an EOI form. In all other cases, you must complete the form.

Can the insurer ask for a health exam or lab results?

Yes. A health exam or tests may be required in some cases. The insurance company will cover all costs of any required tests.

How do I report a death?

To report the death of an employee, covered spouse or child, contact the MBC Employee Benefits Help Desk at 888-302-3941.

How much does more insurance cost?

Your premiums for different levels of coverage are calculated for you on [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com). Log on to see how much coverage will cost.

Does my premium change as I get older?

Yes. Your premium rate is based on your age (or your spouse's/DP's age) on July 1 each year.

Supplemental Life Insurance Premiums			
Age	Monthly Cost/\$1,000 Coverage	Age	Monthly Cost/\$1,000 Coverage
< 30	\$0.026	60-64	\$0.380
30-34	\$0.037	65-69	\$0.693
35-39	\$0.051	70-74	\$1.123
40-44	\$0.066	75-79	\$1.819
45-49	\$0.100	80-84	\$2.947
50-54	\$0.152	85 +	\$4.772
55-59	\$0.274	Children cost	\$0.124

When my pay changes, does my coverage change?

- Basic life insurance:** When your annual base pay increases or decreases, your coverage changes to mirror your new base pay automatically. Increases occur the first day of the month; decreases take effect immediately*.
- Supplemental life insurance** coverage and premiums are set each July 1 (based on your April 1 annual base pay and age on July 1) and remain the same through the next June 30*.

* Under basic and supplemental life insurance (and AD&D), coverage amounts and premiums are reduced starting the July 1 after turning age 70: at age 70 by 65%; at age 75 by 45%; at age 80 by 30%. (The reduction is on the original amount of coverage.)

If I leave Cedars-Sinai, can I keep my life insurance?

You will have the option to continue your basic and supplemental life insurance coverage on a self-pay basis. For details, see the What To Do When Leaving Cedars-Sinai brochure posted on [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) (Get Answers).

When does coverage end?

Your coverage (and any family coverage) ends on your last day of Cedars-Sinai employment (or the day you switch to a non-benefits-eligible job).

Child coverage will be canceled (and their premiums will stop) when your youngest child turns age 26. For coverage to be canceled at the right time, be sure to list all eligible dependent children on the enrollment site: [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com)

BASIC AD&D INSURANCE

Cedars-Sinai-paid accidental death & dismemberment (AD&D) insurance provides a payment to your beneficiary if you die as the result of an accident or partial payment to you if you lose a limb, sight, hearing, speech or become paralyzed due to an accident.

Employee coverage amount	1.5x annual base pay (\$50,000 minimum up to \$400,000 maximum)*
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SUPPLEMENTAL AD&D INSURANCE

You can purchase additional AD&D insurance for you only or for you and your family. Your family's coverage is a percentage of your coverage.

Employee only	Increments of your annual base pay 1 x annual base pay to 7 x annual base pay up to \$3 million maximum
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Employee and family	Family coverage amounts are a percentage of employee coverage:
	<ul style="list-style-type: none"> • Spouse/DP only = 60% • Spouse/DP = 50% and Child(ren) = 10% • Child(ren) only = 20%

Purchasing Supplemental AD&D

Supplemental AD&D Insurance Premiums	
Employee only	Employee and family
\$0.016/\$1,000 of coverage	\$0.029/\$1,000 of coverage

- You don't have to complete a health statement or get insurance company approval for supplemental AD&D insurance coverage.
- You will need to designate beneficiaries for your AD&D death benefits.
- If you enroll in family coverage, your family members are automatically covered. If your spouse/DP or a child dies, the insurance company will require proof of their relationship to you at that time. Your spouse/DP and children cannot name beneficiaries; their AD&D proceeds would be paid to you.
- You must be actively at work (and enrolled family members cannot be disabled or hospitalized) for coverage to start.

AD&D Insurance Q&As

What is dismemberment?

If an accident causes you to lose a limb, sight, hearing, speech or become paralyzed, the policy pays a percentage of the coverage amount to you; the amount depends on the type of injury.

AD&D does not cover self-inflicted injury or death, even if accidental. For details, see the insurer booklets posted on the Benefits Portal at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com) (About Our Benefits > Select Summary Plan Descriptions).

When my pay changes, does my coverage change?

Basic AD&D insurance: When your annual base pay increases or decreases, your coverage changes to mirror your new base pay automatically. Increases occur the first day of the month; decreases take effect immediately.*

Supplemental AD&D insurance coverage and premiums are set each July 1 (based on your May 1 annual base pay and age on July 1) and remain the same through the next June 30.

*Does coverage reduce when I get older?

Yes. Under basic and supplemental life and AD&D insurance, coverage amounts and premiums are reduced starting the July 1 after turning age 70: at age 70 to 65%; at age 75 to 45%; at age 80 to 30%. (The reduction is on the original amount of coverage.)

Are AD&D insurance benefits taxed?

Employer-paid AD&D coverage is tax-free.

Are AD&D insurance proceeds taxed?

No. The lump-sum payment your beneficiary would receive is not taxable income. If the AD&D proceeds are paid out over a period of time and include interest, the interest is taxable.

If I leave Cedars-Sinai, can I keep my AD&D insurance coverage?

No. AD&D insurance cannot be continued if you leave Cedars-Sinai.

When does coverage end?

- Your coverage (and any family coverage) ends on your last day of Cedars-Sinai employment (or the day you switch to a non-benefits-eligible job).
- Child coverage will be canceled (and their premiums will stop) when your youngest child turns age 26. For coverage to be canceled at the right time, be sure to list all dependent children on the enrollment site:

[Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.mybenefitchoice.com)

BASIC LTD INSURANCE

After 180 days of disability, long term disability (LTD) insurance can provide partial income replacement if you cannot work due to an illness or injury. Cedars-Sinai pays for this coverage; and you are automatically enrolled.

Employee coverage amount	50% of basic monthly pay, up to maximum of \$10,000/month Covers up to \$240,000 of basic annual pay
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How Long Term Disability Benefits Work

- If you become disabled, LTD income payments do not start automatically; you must apply for benefits. Only if the insurance company determines you meet the definition of disability, will benefits begin (after 180 days of disability).
- You must apply within 12 months of the date of disability.
- LTD benefits are reduced by other sources of disability income, for instance California State Disability Insurance. This means that combined, the LTD benefits plus any other disability income will equal 50% (or 60% if you have elected supplemental LTD) of your basic monthly pay.
- Pay means gross monthly earnings before benefit deductions. It includes shift differential but not overtime, bonuses or other additional compensation.
- You must be actively at work for basic (Cedars-Sinai-paid) and supplemental LTD coverage to start.
- During your first 12 months of coverage, the basic LTD plan (and supplemental LTD) does not cover conditions you've had for three months before your coverage started, but it will cover new conditions. For more information, see the LTD booklet posted on the Benefits Portal at [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.com/MyBenefitChoice.com) (About Our Benefits > Select Summary Plan Descriptions).

SUPPLEMENTAL LTD INSURANCE

You can purchase an additional 10% of basic monthly pay supplemental LTD coverage.

Employee coverage amount	Additional 10% of basic monthly pay (total of 60% of basic monthly pay) up to maximum of \$12,000/month Covers up to \$240,000 of basic annual pay
---------------------------------	---

Purchasing Supplemental LTD Insurance

- You can purchase (or drop) supplemental LTD coverage during open enrollment only.
- You do not have to fill out a health questionnaire or receive insurer approval for coverage.

How much does more LTD cost?

Your premiums for supplemental LTD are calculated for you on [Cedars-Sinai.MyBenefitChoice.com](https://cedars-sinai.com/MyBenefitChoice.com). Log on to see how much coverage will cost. The table below shows example amounts to give you a general idea of the cost.

If your basic monthly pay changes, your premiums will change to reflect your new pay.

Supplemental LTD Insurance Premiums				
\$0.198/\$100 of Coverage Estimated Cost Examples				
Annual Pay	Monthly Pay (Annual pay divided by 12)	x Rate (0.198/\$100 of coverage)	Est. Cost/ Month	Est. Cost/ Year
\$25,000	\$2,083.33	0.00198	\$4.13	\$49.56
\$30,000	\$2,500.00	0.00198	\$4.95	\$59.40
\$40,000	\$3,333.33	0.00198	\$6.60	\$79.20
\$50,000	\$4,166.67	0.00198	\$8.25	\$99.00
\$60,000	\$5,000.00	0.00198	\$9.90	\$118.80
\$75,000	\$6,250.00	0.00198	\$12.38	\$148.56
\$100,000	\$8,333.33	0.00198	\$16.50	\$198.00

Basic (Cedars-Sinai Paid) and Supplemental LTD Insurance Q&As

How is disability defined?

You are considered disabled and eligible for LTD benefits when the insurance company determines that, because of injury or sickness:

- During the six-month (180 days) period before benefits start and the next 24 months, you are unable to perform the material duties of your own occupation.
- After that, you are disabled only if you are unable to perform the material duties of any occupation. In other words, you cannot work with reasonable continuity in any occupation that you could reasonably be expected to perform satisfactorily given your age, education, training, experience, station in life and physical and mental capacity.
- Disabilities due to mental illness have a lifetime limited payment period of 24 months; benefits for mental and nervous conditions continue beyond 24 months only if you are institutionalized or hospitalized as a result of the disability.

The loss of a professional or occupational license or certification does not, in itself, constitute disability.

See the LTD booklet for how the insurance company defines these terms and for more details; some disabilities may not be covered or have limited coverage under this plan. The LTD booklet is posted on the Benefits Portal at Cedars-Sinai.MyBenefitChoice.com (About Our Benefits).

What do I do for income before 180 days?

You may use time from your VHT or ALP banks or income from state disability insurance. For more information, see leaves of absence policies posted on the [Cedars-Sinai service center portal](#).

How long are LTD income benefits paid?

LTD benefits are paid as long as you meet the definition of disability, up to your normal Social Security retirement age.

Are LTD income payments taxed?

- LTD income from the Cedars-Sinai-paid 50% coverage is taxed.
- LTD income from the supplemental LTD 10% coverage is not usually taxed.

This is because when the employer pays the premiums, LTD income is taxed. When employees pay the premium (with after-tax pay), the premiums are not taxed.

What is the return to work incentive?

Usually monthly LTD payments plus other sources of income equal 50% (or 60%) of your pre-disability basic monthly pay. If you are working on a partial basis during your first 12 months of receiving LTD payments, the LTD payment will equal the difference between your pre-disability basic monthly pay and the pay you are earning, so that you have 100% (or close to 100%) of your pre-disability basic monthly pay. If you are working after 12 months of LTD, benefits will be offset by 50% of the partial wages.

If I leave Cedars-Sinai, can I keep my LTD coverage?

LTD coverage ends on your last day of Cedars-Sinai employment. You may not continue or convert LTD insurance.

If you leave Cedars-Sinai because of your disability, but before the six-month (180-day) LTD waiting period is over, you are still eligible to apply for LTD benefits. It takes several months for the insurance company to decide if you qualify for benefits—consequently you should apply for LTD right away. (Do not wait six months.)

For more information about LTD insurance, contact Reliance Standard:

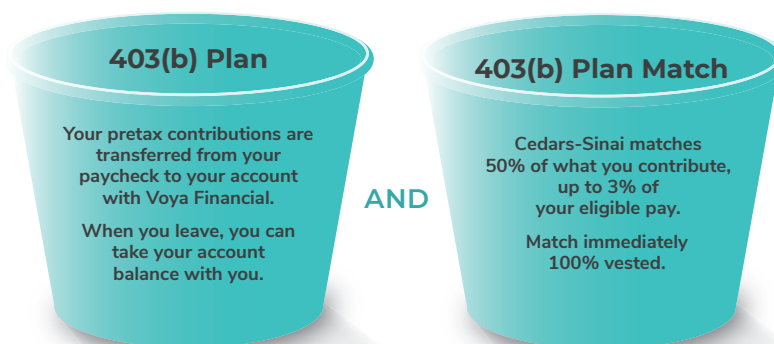
- reliancestandard.com
- 800-351-7500 (Group Number: LSC 100,002 (unit LTD 128787))

Retirement Benefits

As a Cedars-Sinai employee, you have the opportunity to participate in an innovative retirement benefit program to help you accumulate savings to live on during retirement.

403(b) Plan

Funded by your pretax contributions
+ Cedars-Sinai matching contributions (if eligible)
+ investment returns (from investments you choose through Voya Financial).



PLUS

Choice Retirement Program¹

Funded 100% by Cedars-Sinai; you choose either the DB Plan (monthly annuity at retirement) or the DC Plan (lump-sum payment).

Social Security and Medicare

These government programs are funded by FICA taxes you and your employer pay (which fund current retirees' benefits in general, not a personal retirement account for you). You'll also pay premiums for Medicare.



Protect your loved ones

You must designate beneficiaries for each plan you participate in. For assistance, contact the retirement plan; see Benefit Resources on [page 54](#).

1. The quarter after one year of service (minimum 1,000 paid hours) with Cedars-Sinai, you're eligible to choose between the DB Plan and DC Plan, and you'll start receiving matching contributions to your 403(b) Plan account from Cedars-Sinai (if you contribute to the 403(b) Plan).

2. Benefits are subject to vesting, as described over the next few pages.

403(b) PLAN

The Cedars-Sinai 403(b) Plan offers you the opportunity to save and invest for retirement on a pretax basis and Cedars-Sinai will match a portion of your contributions (after you meet eligibility requirements). Income taxes are deferred on this money until you take a distribution.

Voya Financial: the plan record keeper

Voya advisors can answer your questions and help you make informed investment decisions.

Contact Voya Financial:

- 310-423-0974
- CSMC Campus Office
CSMC Ray Charles Cafeteria,
Suite 1631A
- Open weekdays, during regular
office hours

403(b) Plan

How the plan works

- You can elect to have a portion of your pretax earnings deposited into your 403(b) Plan account and if eligible, Cedars-Sinai will match a portion of your contributions. All contributions and investment earnings in your account are not subject to income taxes until you take the money from the plan.

Your contributions

- Each year, you can contribute up to the IRS maximum: \$22,500/year in 2023. Starting the year you turn 50, you can make additional catch-up contributions: up to \$7,500 in 2023.

Cedars-Sinai matching contributions

- Cedars-Sinai matches 50% of what you contribute to the 403(b) Plan, up to a maximum match of 3% of your annual pay*.
- You should contribute at least 6% of your annual pay* if you want to maximize your matching contributions.
- Match starts the quarter after one year of service (minimum 1,000 paid hours).

**Up to the IRS annual compensation limit for tax-deferred benefits (\$330,000 in 2023).*

Vesting

When benefits are yours to keep

- Your contributions are always 100% vested.
- Cedars-Sinai matching contributions are immediately 100% vested.

Investments

- You invest your 403(b) Plan account in a core set of mutual funds, a fixed-rate account or other mutual funds through a brokerage window.
- Your account balance will increase or decrease based on investment results.

Changing your contributions or investments

- You can change how much is taken from your paycheck (contribution changes) or change your investments online at Cedars-Sinai.BeReady2Retire.com or by calling 800-584-6001.
- Contribution changes take effect within one to two paychecks after you elect to change your contribution.
- Investment changes usually take effect the next business day, after the close of the New York Stock Exchange; exceptions are described in the investment prospectus.

(continued)

Enroll today!

You can enroll in the 403(b) Plan anytime; there is no waiting period. Why wait?

- Enroll online: Cedars-Sinai.BeReady2Retire.com
- Enroll by phone: 800-584-6001
- Plan number: VFZ032 Verification number: 246598 Location code: 0001

403(b) Plan (continued)

403(b) Plan

Loans and withdrawals

- You can take a loan from your 403(b) Plan account and pay yourself back through after-tax payroll deductions, subject to loan fees and interest; if you're considering a loan, keep in mind the purpose of the 403(b) Plan is to help you save for retirement and provide a source of income when you are no longer working.
- Under limited situations a hardship withdrawal may be available.
- Contact Voya Financial at 800-584-6001 for more information.

If you leave Cedars-Sinai before retirement

If your account balance is greater than \$1,000, you may leave it in the 403(b) Plan:

- And apply to have it distributed later (you will be penalized if you don't take a minimum required distribution by age 73).
- You'll continue receiving investment earnings (or losses) and quarterly statements until your account has been fully paid out.

You may take your account balance with you and either:

- Roll it over to an IRA or your new employer's eligible retirement plan, if available; this allows you to continue saving for retirement and deferring income taxes on this money.
- Have it paid to you in a lump sum or in periodic payments (less 20% federal tax withholding).

When benefits can be paid

If you are 59-1/2 or older, you can have your 403(b) Plan account balance paid to you while still working at Cedars-Sinai.

After you leave Cedars-Sinai:**

- You may roll over your account to an IRA or your new employer's retirement savings plan (if permitted by the other employer's plan) and continue to defer taxes on the money.
- You may have your account balance paid directly to you (it's taxable; if you are under 59-1/2, you may owe an additional 10% penalty tax).

***If you are eligible to receive matching contributions, be aware that you might be eligible to receive matching contributions that will not be deposited into your Voya account for up to six months after you leave Cedars-Sinai.*

How benefits are paid

- You may have your account paid in a lump sum (paid directly to you or rolled over to an IRA or new employer's plan).
- You may withdraw all (or a portion) of your account under a number of periodic payment options.

Manage your 403(b) Plan and DC Plan online and on the go at:

[Cedars-Sinai.BeReady2Retire.com](https://cedars-sinai.be-ready2retire.com)

or

Download the app: Search "Voya Retire" at your mobile device store.

DB PLAN OR DC PLAN

Cedars-Sinai is one of the few employers that allow employees to choose between two different types of retirement plans: a traditional pension plan (DB Plan) or an account-based plan (DC Plan). Eligible employees have the opportunity to elect to participate in one of the plans the quarter after completing a year of service (with a minimum of 1,000 paid hours) at Cedars-Sinai.

Choice Retirement Program: DB Plan or DC Plan

	Defined Benefit (DB Plan)	Defined Contribution (DC Plan)																								
Benefit	Monthly annuity at retirement	Lump-sum payment																								
How the plans work	You receive a monthly benefit for life when you retire; the amount is based on your pay while you participate in the DB Plan, your age when you start receiving payments and the type of annuity payment you choose.	<ul style="list-style-type: none"> Each quarter you participate in the DC Plan, Cedars-Sinai deposits a contribution in your DC Plan account; the contribution is based on your pay and years of eligible service. You choose how your account is invested. When you leave Cedars-Sinai, you receive a lump-sum payment of your vested DC Plan account. 																								
Plan formula	<p>Your monthly retirement benefit starting at age 65 will equal:</p> <p>The sum of your pay* while you participate in the DB Plan (after 7/1/2003)</p> <p>Multiplied by 1.7%</p> <p>Divided by 12</p> <p>(plus any DB Plan benefit earned before 12/31/1990)</p>	<p>DC Plan Contribution Schedule</p> <table border="1"> <thead> <tr> <th>Years of Eligible Service</th> <th>Contribution Rate</th> </tr> </thead> <tbody> <tr> <td>1–4</td> <td>3.0% of pay*</td> </tr> <tr> <td>5–9</td> <td>4.0% of pay*</td> </tr> <tr> <td>10–14</td> <td>5.5% of pay*</td> </tr> <tr> <td>15–19</td> <td>8.0% of pay*</td> </tr> <tr> <td>20 or more</td> <td>11.0% of pay*</td> </tr> </tbody> </table>	Years of Eligible Service	Contribution Rate	1–4	3.0% of pay*	5–9	4.0% of pay*	10–14	5.5% of pay*	15–19	8.0% of pay*	20 or more	11.0% of pay*												
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	<small>*IRS rules limit compensation used to calculate qualified plan benefits (\$330,000 in 2023); this limit is updated based on inflation rates.</small>																									
Vesting <i>When benefits are yours to keep</i>	<table border="1"> <thead> <tr> <th>Years of Eligible Service</th> <th>Percent Vested</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>0%</td> </tr> <tr> <td>2</td> <td>0%</td> </tr> <tr> <td>3</td> <td>0%</td> </tr> <tr> <td>4</td> <td>0%</td> </tr> <tr> <td>5</td> <td>100%</td> </tr> </tbody> </table>	Years of Eligible Service	Percent Vested	1	0%	2	0%	3	0%	4	0%	5	100%	<table border="1"> <thead> <tr> <th>Years of Eligible Service</th> <th>Percent Vested</th> </tr> </thead> <tbody> <tr> <td>Less than 2</td> <td>0%</td> </tr> <tr> <td>2</td> <td>25%</td> </tr> <tr> <td>3</td> <td>50%</td> </tr> <tr> <td>4</td> <td>75%</td> </tr> <tr> <td>5</td> <td>100%</td> </tr> </tbody> </table>	Years of Eligible Service	Percent Vested	Less than 2	0%	2	25%	3	50%	4	75%	5	100%
Years of Eligible Service	Percent Vested																									
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Less than 2	0%																									
2	25%																									
3	50%																									
4	75%																									
5	100%																									
Investments	Your DB Plan benefit is based on the plan formula (above), regardless of the plan trust fund's investment results.	<ul style="list-style-type: none"> Your account is invested in funds that you select through Voya Financial. Your account balance will increase or decrease based on investment results. 																								
When benefits can be paid	<ul style="list-style-type: none"> Age 65 (even if still with Cedars-Sinai) Age 55 with 10 years of eligible service, upon leaving Cedars-Sinai employment (five years of eligible service if a participant before 1991) Monthly benefit reduced if starting payments before age 65 	<ul style="list-style-type: none"> Age 65 (even if still with Cedars-Sinai) After your Cedars-Sinai employment ends** Benefits not reduced because of early retirement Tax penalties if lump sum received before age 59-1/2 <p><small>**Be aware that you might be eligible to receive DC Plan contributions that will not be deposited into your Voya account for up to six months after you leave Cedars-Sinai.</small></p>																								
Early retirement	If you start payments before age 65, they're reduced (because paid over a longer period) by 6-2/3% per year from ages 60–65 and 3-1/3% per year from ages 55–60.	No matter what your age, when you leave Cedars-Sinai you can take your vested account balance with you.																								
If you leave Cedars-Sinai before retirement	Your vested benefit stays in the plan until you retire and start monthly payments; see When benefits can be paid and Early retirement above.	<p>When you leave, you may choose to:</p> <ul style="list-style-type: none"> Have your account balance paid to you Leave your money in the plan and continue deferring taxes on this money until you retire Roll this account into an IRA or a new employer's retirement plan 																								
Loans	Not permitted	Not permitted																								

Choice Retirement Program: DB Plan or DC Plan (continued)

Defined Benefit (DB Plan)

Survivor benefits Before retirement

Your spouse/domestic partner or beneficiary is eligible if your death occurs either:

- While you are still employed at Cedars-Sinai (even if not yet vested)
- After you are vested (even if no longer with Cedars-Sinai)

Spouse: May start receiving lifetime monthly payments (an annuity) at your earliest retirement age. Monthly payments equal the amount you would have received if you retired on your date of death and elected a joint and 100% survivor annuity.

Beneficiary/Domestic Partner: Receives lump sum equal to the value of the benefit that would have been payable to your spouse if you were married.

Defined Contribution (DC Plan)

- Account balance is paid to your beneficiary.
- If married, your spouse is your beneficiary unless your spouse waives that right in writing.

How benefits are paid

Variety of monthly payment options (annuities), which start when you retire and last for your lifetime; you can select an option that continues payments to the person you designate:

- **Single life annuity:** Monthly payments for your lifetime only.
- **Single life annuity with 60 or 120 months guaranteed:** Monthly payments for your life; if you die before 60 or 120 payments are made, the remainder goes to the person you designate.
- **Joint and 50%, 75% or 100% survivor annuity.** Monthly payments for life; if you die before the person you designate, the elected percentage of your monthly payment continues to that person for their life.

Lump-sum payment of your vested account balance, which you can:

- Have paid to you (subject to income taxes and possible penalties)
- Have rolled over to a new employer's plan, an IRA or the Cedars-Sinai 403(b) Plan*, allowing you to continue saving for retirement and deferring taxes until later
* Only after leaving Cedars-Sinai employment or if age 65 and still working at Cedars-Sinai.
- Leave in the DC Plan; although you won't get new contributions, you can continue to direct your account's investments.

Working past age 65

If you are 65 or older and still working at Cedars-Sinai, you will continue to earn DB Plan or DC Plan benefits (even if you are collecting Social Security); you are not required to take your money from the plan until you leave Cedars-Sinai.

DB PLAN ANNUITY EXAMPLES

Age 65 Example

If you retire at age 65 with a \$1,000/month benefit (using the DB Plan formula), the monthly payment would be:

Early Retirement Example

If you retire at age 55 with a \$1,000/month benefit, reduced for early retirement to \$500/month (using the DB Plan formula), the monthly payment would be:

Type of Annuity	Monthly Payment to You	Monthly Payment to Your Survivor	Monthly Payment to You	Monthly Payment to Your Survivor
Single life annuity	\$1,000.00	\$0.00	\$500.00	\$0.00
Single life annuity with 60-month guarantee	\$987.60	\$987.60 Remaining payments until 60 total payments are made	\$498.50	\$498.50 Remaining payments until 60 total payments are made
Single life annuity with 120-month guarantee	\$955.70	\$955.70 Remaining payments until 120 total payments are made	\$493.95	\$493.95 Remaining payments until 120 total payments are made
Joint and 50% survivor annuity	\$929.30	\$464.65	\$478.35	\$239.18
Joint and 75% survivor annuity	\$897.50	\$673.13	\$468.20	\$351.15
Joint and 100% survivor annuity	\$867.90	\$867.90	\$458.45	\$458.45

Time-Off Benefits

Time away from work is one of our most valued benefits. We all need a break for rest and relaxation, family time or illness.

The Cedars-Sinai time-off program gives you maximum flexibility, while making sure the organization has the staffing to meet patient-care responsibilities. You get time off for vacation, holidays, personal time and sickness to attend to your personal medical needs or those of a family member—provided in different accounts: Vacation and Holiday Time (VHT), Sick Pay (SICA) and Approved Leave Pay (ALP).

This booklet provides an overview of Cedars-Sinai’s paid time-off programs for benefits-eligible Cedars-Sinai staff. These programs may be subject to change during the benefit year. Please refer to the HR Policies found in Service Center on the Cedars-Sinai intranet for detailed and current plan information, and if you are rehired within 12 months of leaving or if you transfer to a per diem or management job.

You start accumulating VHT and are provided SICA and ALP banks when your employment begins.

VACATION AND HOLIDAY TIME (VHT)

The VHT account gives you a pool of paid days off to use for personal reasons, such as:

- Vacation
- Religious observances
- Personal business
- School visitation
- Illness and family care when SICA and/or ALP are exhausted

Vacation and holiday time are accrued in your VHT account. VHT does not accrue during certain leaves of absence.

VHT Accrual (Full Time)*			
Vacation			
Year	Earned annually		Hours added to VHT account each pay period (1/26th of annual amount)
	Days	Hours	
1-3	16	128	4.9231
4-9	21	168	6.4616
10 +	26	208	8.000
Holidays			
	Earned annually		Hours added to VHT account each quarter
	Days	Hours	
Floating	4	32	8 hours each quarter
National Holidays	6	48	8 hours each national holiday, if scheduled to work on the national holiday

Each quarter, one floating holiday (eight hours)* is added to your VHT account, no matter when you take the floating holiday.

What the Acronyms Mean

Cedars-Sinai

ALP	Approved Leave Pay
EML	Employee Medical Leave
FCML	Family Care and Medical Leave
LDM	Leave and Disability Management
PDL	Pregnancy Disability Leave
PPM	Policy and Procedure Manager
SICA	Sick Pay
VHT	Vacation and Holiday Time

State of California

EDD	Employment Development Department
PFL	Paid Family Leave
SDI	State Disability Insurance
WC	Workers' Compensation

National Holidays Cedars-Sinai Observes

New Year's Day	Labor Day
Memorial Day	Thanksgiving Day
Independence Day	Christmas Day

If you are scheduled to work on a national holiday listed above, eight hours* is added to your VHT account; otherwise you get the day as a paid day off.

Maximum VHT Account Balance

You may accumulate a maximum of two times your annual VHT; after that, no further hours are added to your account until you take time off and your account balance goes below the maximum.

Maximum VHT Balance — Hours				
Year	Vacation	+	Holiday	x 2 Maximum
1-3	128		80	416
4-9	168		80	496
10 +	208		80	576

* If you are regularly scheduled to work fewer than 70 hours per pay period (less than 87% FTE), your VHT, SICA and ALP accrual rates are prorated; for details, see the time-off policies posted on the Cedars-Sinai intranet > Helpful Links > Service Center > Frequently Asked Questions > Vacation and Time Off.

Requesting Time Off

Requests for time off must be made in writing to your supervisor according to your department's procedures. All requests will receive serious consideration, with decisions based on staffing needs and other relevant work concerns.

VHT Account Payouts*

You can have your VHT account paid out in the following situations.

Annual VHT Payout:*

- You may elect to have from 10% up to 80% of your annual VHT accrual paid out—in 10% increments. Your annual VHT accrual equals the VHT you'll earn during the calendar year, including national and floating holidays; it's half the VHT maximum hours shown on your pay statement.
- You may elect to receive one or two payments, either:
 - One-half in June and one-half in December, or
 - Full payout in December.
- You must have at least 80 hours left in your VHT account after the payout. If you elect an amount that doesn't leave 80 VHT hours in your account after the payout, the number of hours paid will be reduced.

The IRS requires you to make a VHT payout election the year before the VHT is earned. Payroll will distribute election forms in November for payouts made the following year.

VHT Hardship Payout: You may receive a hardship payout once every five years for unforeseen situations, such as loss of income, prevent eviction, medical expenses. You must have at least 80 hours left in your VHT account after the payout.

VHT Donation: You may donate VHT to a co-worker with an extreme need if you and the recipient are both in good standing and have approval from each department director.

VHT Payout Upon Leaving: When you leave Cedars-Sinai or move to a position that isn't eligible for the VHT benefit, your unused VHT account balance will be paid to you.

Questions about VHT, SICA or ALP balances?

See your pay statement or call Payroll at 323-866-8500.

*Faculty and Chairs are not eligible to cash out future vacation time through the Annual Vacation Payout Program. If you have questions about eligibility, check with your manager or the HR Benefits Department.

SICK PAY (SICA)

SICA is paid time off for one of the following reasons:

- Illness
- Diagnosis, care or treatment of a health condition (including injury)
- Medical appointments (including preventive care)
- Reasons associated with being the victim of violence

You may take SICA for yourself or to care for your:

- Spouse/domestic partner
- Grandparent
- Child
- Grandchild
- Parent
- Sibling
- Any individual related by blood or affinity whose close association with you is the equivalent of a family relationship

Annual SICA Allotment

You receive your entire SICA allotment during the first pay period of each year, or if newly hired, during your first complete pay period worked. Your allotment is based on your work status and FTE (see below).

Annual SICA Hours Allotment			
Work Status	Hours Worked/ Pay Period	FTE	Annual SICA Allotment
Full time	70+	0.875+	40
Part time	40 up to 70	0.5–0.875	36
Part time	Fewer than 40	<0.5	24, 30 or 36 based on daily schedule

If you are rehired within 12 months of leaving or transfer to a per diem or management job, SICA allotments and rules may differ. See the Sick Pay Policy found in the Policy and Procedure Manager on the Cedars-Sinai intranet for details.

If you have leftover SICA at the end of the calendar year and you are an eligible employee on the last pay period of the year, that year's unused SICA time will be transferred to your Approved Leave Pay (ALP) bank, described on the next page.

SICA is not paid out upon leaving Cedars-Sinai employment.

Using SICA

SICA may be taken incrementally as follows:

- Nonexempt employees (eligible for overtime) in 30-minute increments
- Exempt employees (not eligible for overtime) in full-day increments

You are entitled to 48 hours per calendar year of job-protected absence for reasons covered by the sick leave policy. You may take a combination of paid and unpaid time without being subject to Cedars-Sinai's attendance standards.

APPROVED LEAVE PAY (ALP)

The ALP account provides paid time off during approved or pending:

- Family Care and Medical Leave
 - Serious health condition (your own or to care for your spouse/domestic partner, child or parent)
 - Newborn care
 - Qualifying military and service member leave
- Pregnancy Disability Leave
- Employee Medical Leave

How Your ALP Bank Grows

ALP is loaded into your bank at the beginning of each new year, along with any unused SICA balance from the previous year.

Annual ALP Hours Allotment		
Hours Worked/ Pay Period	FTE Status	Total ALP Annual Allotment
70+	Full time 0.875+	8
60 up to 70	Part time 0.75+	5
Under 60	Part time < 0.75	0

New employees' first-year annual ALP is based on hire date:

- Jan. 1–June 30 = 8 hours*
- July 1–Dec. 31 = 4 hours*

**Prorated for employees working less than 0.875% FTE.*

ALP Bank Payouts

- Each March, if you have more than the maximum 650 ALP hours, you will automatically be paid for the ALP hours over 650.
- Generally, ALP is not paid out upon leaving Cedars-Sinai, except in the following situations:
 - You leave at age 55 or older.
 - Your employment ends because of layoff and you have 20 or more years of service.
 - Your employment ends because of layoff and you are a past President's Award recipient.
 - You die as an active employee (paid to your estate).

Pay During Leaves of Absence (LOA)

You are required to use your ALP for FCML, PDL and EML (see the Acronyms table on [page 41](#)). Depending on the length and reason for your LOA, you may receive a portion of replacement pay from the state and a portion from your Cedars-Sinai ALP, SICA or VHT.

You and Cedars-Sinai pay taxes for the following state-sponsored (or mandated) programs that provide disability income: SDI, WC and PFL. Because these programs do not typically replace 100% of your regular pay, Cedars-Sinai automatically pays you the difference between the income benefits and your normal pay using your ALP (or SICA or VHT). This is called integration of pay and it works like this:

- Integration with PFL payment starts on day one of absence
- Integration with SDI payment starts on day eight of continuous absence.

You don't automatically receive pay. Your Kronos editor will enter ALP during your leave. You must apply for SDI or PFL.

It's your responsibility to apply for SDI:

You and your physician must complete and file the claim forms online at edd.ca.gov. This process is secure, reliable and fast—plus, you'll be able to track your claim status. For details, contact EDD:

California Employment Development Department (EDD)

Web: edd.ca.gov

Phone: 800-480-3287 (English) 866-658-8846 (español)

-
- Integration with WC starts on day four of continuous absence.
 - No partial integration of pay with SDI, PFL or WC benefits is permitted. For example, if SDI provides approximately 55% of your regular pay, ALP would replace the other 45%; you cannot opt not to use your ALP or to use less than required to equal 100% of your pay.
 - If you use up your ALP before you can return to work, you may supplement SDI, PFL or WC with payment from your SICA or VHT. This isn't automatic; you will need to contact your supervisor to use your vacation or holiday banks.
 - If SDI, PFL or WC benefits are denied, you may use ALP (or SICA or VHT) to cover up to 100% of your normal pay. No partial integration is permitted.

For details about leaves of absence

Leave of absence policies and procedures describe eligibility for leaves and time off, and how these leaves work and coordinate with various state and federal leave laws.

LOA policies are posted on the Cedars-Sinai intranet service center portal: csmc.service-now.com

Questions about LOAs:

Contact the Cedars-Sinai Leave and Disability Management Team.

- Email: myHR@cshs.org
- Fax: 310-473-0018

This is a high-level summary of your time-off benefits. The actual time-off and LOA policies are described in the HR Service Center HR Library, on the Cedars-Sinai intranet. Cedars-Sinai policies may change from time to time, with or without notice. For a copy of the policy or for the latest information, access the HR Service Center through the intranet and search for policies under the HR Library.

Home Life Benefits

As an employer of choice, Cedars-Sinai provides access to voluntary insurance programs so you can build a benefits package that meets your needs: critical illness insurance, accident insurance, hospital indemnity insurance, auto and home insurance, pet insurance and the legal plan. These are voluntary programs; if you enroll, your premiums will be deducted from your paycheck on an after-tax basis.

NEW! SUPPLEMENTAL INSURANCE PLANS: HOSPITAL INDEMNITY | ACCIDENT | CRITICAL ILLNESS

Some major illnesses and accidents can be a financial strain, even with medical insurance. Cedars-Sinai offers three types of supplemental insurance plans to help pay for expenses not covered by your medical plan, like deductibles or copays, lost wages, child care, housecleaning or any of your regular household expenses.

Benefits of supplemental insurance include:

- The payments go directly to you to use however you'd like
- No medical questions or tests required for coverage
- Simplified claims process with limited paperwork
- You receive the full benefit, even though you have other insurance

Questions about supplemental insurance? Contact Voya:

- Phone: 877-236-7564
- Web: presents.voya.com/EBRC/CSHS
- Group number: 700801

Supplemental insurance is not a substitute for medical insurance

The hospital indemnity, accident and critical illness insurance plans are intended to supplement your medical insurance, not replace it. These policies are not medical insurance and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Enrolling in Supplemental Insurance

- Enroll at Cedars-Sinai.MyBenefitChoice.com during open enrollment, new hire enrollment or within 30 days of a qualified life event.
- You must purchase employee coverage to purchase spouse/DP and/or child(ren) coverage.
- One premium covers all children under 26 who are enrolled.
- Coverage starts the first day of the month after you enroll or on July 1 if you enroll during open enrollment.
- You must be actively at work (and dependents must not be disabled or hospitalized) for coverage to start.
- Limits and exclusions apply. These plans have pre-existing condition limitations and do not cover illnesses, conditions, accidents, injuries or hospital expenses you've had before your coverage started, but will cover new conditions. Each plan has specific limits and exclusions. See the summaries posted on Cedars-Sinai.MyBenefitChoice.com for more information.

HOSPITAL INDEMNITY INSURANCE

Hospital Indemnity Insurance

Hospital indemnity insurance pays benefits if you (or a covered family member) have a covered stay in a hospital, critical care unit or rehabilitation facility. If admitted for childbirth, you're eligible for a one-time \$100 payment. For other covered hospitalizations, you're eligible for the admission benefit on day 1 and the daily benefit starting on day 2 of confinement.

Admission Benefit	<ul style="list-style-type: none">• Hospital admission: \$1,000/confinement• Critical care unit admission: \$1,000/confinement Up to 8 confinements/year
Daily Benefit	<ul style="list-style-type: none">• Hospital: \$100/day• Rehabilitation facility: \$100/day• ICU: \$200/day Up to 60 days confinement/year

How much does hospital indemnity insurance cost?

Hospital Indemnity Premiums	
	You Pay/Month
Employee Only	\$14.98
Employee and Spouse/DP	\$33.16
Employee and Children	\$31.68
Family	\$49.86

ACCIDENT INSURANCE

Accident Insurance

Accident insurance pays you benefits if you (or a covered family member) receive treatment for a covered injury. The payment is based on the type of injury, its severity and what medical services are required for treatment and recovery. It is paid even when the injury is covered by your medical plan.

What types of accident-related expenses are covered?*

Accident insurance provides a benefit payment after a covered accident that results in specific injuries and treatments. Some of the most common treatments and conditions (and their benefit amount) include:

- Emergency room visit: \$250
- Follow-up doctor visit: \$100
- Physical/Occupational therapy visit (up to 6 visits/accident): \$60
- Hospital admission: \$2,000
- Hospital confinement daily benefit (up to 365 days): \$325

For example, Sonia was in a car accident and was taken by ambulance to the emergency department, where she was treated for a fractured arm. She received a \$3,050 payment (\$400 for the ambulance, \$250 for the ED visit and \$2,400 for the fracture).

EXTRA BENEFITS INCLUDED WITH ACCIDENT INSURANCE

- **Cedars-Sinai treatment:*** Benefits will be increased by 25% for certain treatments if your covered accident is treated at a Cedars-Sinai facility.**
- **Sports accident:*** Benefits will be increased by 25% for certain treatments if your accident is due to participation in a covered organized sport.**
- **Travel assistance:** Get travel information, emergency personal services, medical assistance services, security services and emergency transportation services if traveling more than 100 miles from home for business or leisure.
- **Wellness benefit:** Complete an eligible health screening (for example, an annual physical) and get \$50 to use however you'd like. (Limited to one \$50 payment for each covered family member per year.)

**Up to \$1,000 maximum.

How much does accident insurance cost?

Accident Premiums	
	You Pay/Month
Employee Only	\$10.41
Employee and Spouse/DP	\$20.82
Employee and Children	\$22.39
Family	\$32.80

*See what else is covered

The list of covered critical illnesses and accidents and their benefits is too long to include in this booklet. To find out what else is covered, see the summaries posted at: [Cedars-Sinai.MyBenefitChoice.com](https://www.cedars-sinai.com/MyBenefitChoice.com)

CRITICAL ILLNESS INSURANCE

Critical Illness Insurance

Critical illness insurance pays a lump-sum benefit if you (or a covered family member) are diagnosed with a covered disease or condition. It's paid even if treatment for the condition is covered by your medical plan.

Employee coverage options	\$10,000, \$20,000 or \$30,000
Spouse/DP coverage options	Increments of \$5,000 from \$10,000 to \$30,000 (up to 100% of employee coverage)
Child(ren) coverage options	50% of the employee's coverage

What types of diseases or conditions are covered?*

Here's a list of common conditions and the percent of the benefit payable:

- | | | | |
|--------------------------|------|---|------|
| • Cancer (invasive) | 100% | • Kidney failure (major organ transplant) | 100% |
| • Cancer (non-invasive) | 50% | • Multiple sclerosis | 100% |
| • Cancer (skin) | 10% | • Stroke | 100% |
| • Coronary artery bypass | 50% | • Type 1 diabetes | 100% |
| • Heart attack | 100% | | |

For example, Anita elected \$30,000 family coverage. When their partner had a coronary artery bypass, they received a \$15,000 lump-sum payment.

EXTRA BENEFIT INCLUDED WITH CRITICAL ILLNESS

Wellness benefit: Complete an eligible health screening (for example, an annual physical) and get \$50 to use however you'd like. (Limited to one \$50 payment for each covered family member per year.)

How much does critical illness insurance cost?

The premium is based on your age (or your spouse/DP's age) on July 1.

Critical Illness Premiums			
Age	Monthly Cost/ \$10,000 Coverage	Age	Monthly Cost/ \$10,000 Coverage
Under 25	\$2.60	50 - 54	\$17.50
25 - 29	\$3.30	55 - 59	\$23.10
30 - 34	\$4.90	60 - 64	\$31.10
35 - 39	\$6.10	65 - 69	\$39.90
40 - 44	\$8.70	70+	\$42.80
45 - 49	\$13.40		

- Different levels of coverage are calculated for you on [Cedars-Sinai.MyBenefitChoice.com](https://www.cedars-sinai.com/MyBenefitChoice.com).
- Child(ren) coverage is included in the employee premium, as long as the child(ren) are enrolled.

AUTO AND HOME INSURANCE

Auto and Home Insurance

Farmers GroupSelect™ Auto & Home provides you with access to coverage for your personal insurance needs.

- How to apply**
- Apply anytime (no set application period) directly with Farmers GroupSelect™ at myautohome.farmers.com or 800-438-6381.
 - Have your current policies with you when you call.

- Types of insurance offered**
- A variety of policies are available to you through the program, including:
- Auto
 - Home (house/condo/mobile home)
 - Renter's
 - Landlord's rental dwelling
 - Boat
 - Recreational vehicle
 - Personal excess liability or umbrella

- Premiums**
- These are personal insurance policies; Farmers GroupSelect™ determines the rates; issuance of auto and home coverage is not guaranteed*; you can choose to pay through payroll deduction or another payment method.

** If you live in certain areas (high brush fire risk areas, for instance) or have a poor driving record or due to some other legal or underwriting issue, Farmers GroupSelect™ may decline to insure you.*

PET INSURANCE

Pet Insurance

My Pet Protection® plans through Nationwide® give your pet superior protection at an unbeatable price when you enroll through Cedars-Sinai (they're not available to the general public). The price is the same for pets of all ages, with a discount for multiple pets. You'll have peace of mind knowing you can care for your pets no matter the cost.

- How to apply**
- Apply anytime (no set application period) directly with Nationwide Pet Insurance at 877-738-7874 or: petinsurance.com/cedarssinai
 - No age or breed restrictions for dogs and cats.
 - Exotic pet and bird plans also available.

- Types of covered services***
- When you use a licensed veterinarian, the plan covers a percentage of the cost for:
- Accidents/emergencies
 - Illness
 - Diagnostic tests, x-rays and lab fees
 - Medications
 - Hospitalizations and surgeries
 - Wellness option that includes spay/neuter, vaccinations and more

- Premiums**
- These are personal insurance policies; Nationwide determines the rates; you can choose to pay through payroll deduction or another payment method.

** Pre-existing conditions are not covered.*

LEGAL PLAN

Legal Plan

The MetLife Legal Plan offers convenience by giving you direct, low-cost access to an attorney network for a wide variety of covered legal services. There are more than 10,000 network attorneys nationwide. If you use a non-network attorney, you will be responsible for fees above the amount the plan covers.

- How to Enroll**
- Enroll during:
 - New employee or upon becoming benefits-eligible (due to a job transfer) enrollment period
 - Open enrollment
 - Enroll at: Cedars-Sinai.MyBenefitChoice.com
 - Review coverage and attorney network at: members.legalplans.com
 - If you have questions call MetLife Legal at 800-821-6400.

- Types of covered services***
- Telephone and personal consultation with an attorney.
 - Document preparation and review: mortgages, small claims, immigration.
 - Debt collection defense: identity theft, negotiation with creditors, tax audits.
 - Wills, powers of attorney, trusts.
 - Family matters: premarital agreements, adoptions, domestic violence protection.
 - Real estate matters: sale of primary residence, eviction (if you're the tenant).
 - Court appearances: civil litigation, administrative hearings.

- Premiums**
- \$8.25/pay period (or \$16.50/month), paid through after-tax payroll deductions.

** This plan doesn't cover legal issues that are already in progress or for which you've already hired an attorney and some other matters. Please read the MetLife Legal brochure or call MetLife Legal before enrolling.*

Additional Benefits

EMPLOYEE ASSISTANCE PROGRAM

Strictly confidential | Voluntary | No cost (to you)

Work & Life Matters® and LifeMatters® by Empathia

To help you be your best at work and at home, the employee assistance program (EAP) is an employee benefit that reflects our commitment to the health and wellbeing of our people. We have expanded access to EAP services by Work and Life Matters partnering with Life Matters/Empathia. This benefit is provided to employees and their immediate household members.

Work and Life Matters in partnership with LifeMatters/Empathia provide employees:

- A safe, private, confidential setting
- Counseling for:
 - Emotional distress
 - Stress, depression
 - Balancing work and personal needs
 - Relationship concerns
 - Child and elder care worries
 - Legal and financial concerns
 - Alcohol or drug dependency
- Support to develop a plan of action including training, etc.
- An opportunity to get connected with appropriate resources and referrals.

Contact Work & Life Matters®/LifeMatters® by Empathia

- Phone: 866-713-1979 (to speak to someone live 24/7)
- Email: workandlifematters@cshs.org (weekdays 8 a.m.-4:30 p.m.)
- Cedars-Sinai web: cedars-sinai.org (search Work and Life Matters Program)
- Empathia web: mylifematters.com (Empathia Life Matters password: Cedars1)

When you or your household members face challenges, many times Work and Life Matters and/or Empathia Life Matters can help. Our team of dedicated and compassionate professionals are just a phone call or email away.

988 Suicide and Crisis Lifeline

The 988 Suicide and Crisis Lifeline is a national network of local crisis centers in the U.S. that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

- Call or text 988
- Web: 988lifeline.org

CELLULAR ACCOUNT DISCOUNTS

AT&T | T-Mobile | Verizon

Cellular Account Discounts

AT&T, T-Mobile and Verizon services and purchases:

- Cedars-Sinai employee badge and Cedars-Sinai email address (ending in cshs.org, csmns.org or csmc.edu) may be required
- Details are posted on the Cedars-Sinai intranet (Search “EIS cellular phone employee discounts”)

ENTERTAINMENT BENEFITS

Employee Discounts

Cedars-Sinai Entertainment Benefits, a savings marketplace, offers a wide variety of discounts to you and your family, such as:

- Appliances
- Automotive
- Cruises
- Dining
- Electronics
- Fitness memberships
- Gift cards
- Hotel
- Movie tickets
- Rental cars
- Retail
- Theme parks
- Travel

Take advantage of Cedars-Sinai specials and savings events throughout the year!

Entertainment benefits on the Cedars-Sinai intranet:

Employee Resources > Featured Resources > Entertainment Benefits (Discounts)

Getting started is easy!

- Web: cshs.savings.workingadvantage.com
Log in using your Cedars-Sinai work email address (your.email@cshs.org).
First time users will need to create a password.

Customer service (Tickets at Work)

- Phone: 800-331-6483 (weekdays 8 a.m.–10 p.m., weekends 9 a.m.–10 p.m. PT)

FAMILY SUPPORT SERVICES

A family support benefit available to all Cedars-Sinai employees and their eligible family members.

Bright Horizons

- Emergency back-up child and dependent adult care: pre-screened, credentialed and affordable child care centers and caregivers
- Preferred enrollment and tuition discounts at Bright Horizons child care centers
- Online elder care needs assessments to help determine the right type of care and find providers
- Online resources to find child sitters, nannies, housekeeping, pet sitters and walkers, test prep and tutoring
- Your cost varies depending on the services provided; please contact Bright Horizons for specific costs
- Learn more online at clients.brighthorizons.com/cedarssinai

Register now to ensure quick access when you need it:

1. Visit: clients.brighthorizons.com/cedarssinai
User name: CedarsSinai
Password: Benefits4You
2. Complete your Care Profile: Provide contact information, care recipient, authorized contacts and care location
3. When it's time to reserve care: Make reservations by phone or mobile app (search "back-up care" in the App Store or Google Play)

Contact Bright Horizons

- Phone: 877-BH-CARES (877-242-2737)
- Web: clients.brighthorizons.com/cedarssinai

EMPLOYEE REFERRALS

Help us find talented, dedicated professionals

Employee Referral Program

Do you know people who can make a difference at Cedars-Sinai? If we hire them, you'll reap the rewards.

Help us fill hard to fill positions and you could earn up to \$5,000 depending on the position—mostly nursing, information technology, healthcare IT, healthcare management and allied health jobs.

- Jobs eligible for a bonus are based on hiring needs; refer to the website below for details
- The bonus is paid by separate paycheck and treated as taxable income.
- Additional limits and rules apply

Contact Human Resources

- Phone: 833-CS4-MYHR (4-6947)
- Web: jobs.cedars-sinai.edu/employee-referrals

RIDESHARE

Cut back on your commuting expenses and "go green"

- **Carpooling:** Drive to work and back home with two to six others and receive monthly parking fee refund.
- **Ride-matching:** Cedars-Sinai matches you with others who seek ride-matching, live in the same area and work the same hours.
- **Vanpooling:** Travel to and from the same work site with five to 11 people.
- **Metro Transit Pass and MTA EZ Pass:** Purchase discounted monthly passes.
- **Ride\$ to Riche\$:** Bicycle, carpool or walk to work and earn 75 daily award points (enrollment required); redeem gift certificates of your choice.

Contact Rideshare Office

- 310-423-5789
- Room 1603 South Tower
- Weekdays 7 a.m.–3:30 p.m.

Contact Parking Office

- 310-423-5535
- Employee Parking Lot 8 Room 100
- Weekdays 6:30 a.m.–4 p.m.

TUITION ASSISTANCE PROGRAM

Helps pay for job-related seminars, workshops and college classes

Tuition Assistance Program	
Eligibility	<ul style="list-style-type: none">• A meets expectations rating on your latest performance appraisal (may not apply to new employees)• Work 20 hours/week (or more)
Educational reimbursement	<ul style="list-style-type: none">• Up to \$600 each calendar year• Reimburses job-related seminar, workshop, conference, or other training program and certification exam fees
Tuition loan	<ul style="list-style-type: none">• Up to \$2,000 each calendar year (may be combined with reimbursement for total of up to \$2,600)• For formal certificate or degree programs and prerequisites for approved degree programs
Critical pipeline loan	<ul style="list-style-type: none">• Up to \$5,250 each calendar year• Tuition loan for specific degree programs in high-demand careers at approved schools
Verify before applying	<ul style="list-style-type: none">• Confirm the certificate or degree program and institution is eligible for tuition assistance• Speak with your manager about your education goals. Managers are responsible for assessing if the organizational need matches the skill the employee wants to develop
Apply	<ul style="list-style-type: none">• Tuition assistance website: tuition.csmc.edu
Deadlines for reimbursement	<ul style="list-style-type: none">• Educational reimbursement applications must be submitted and approved within 60 days after course completion• Loan applications must be received before (or no later than 30 days after) the course start date
Contact	<p>About applications and reimbursement policy</p> <ul style="list-style-type: none">• Contact Edcor Tuition/Education Assistance Program• Phone: 855-395-8740 Weekdays 5 a.m.– 5 p.m. <p>General questions</p> <ul style="list-style-type: none">• Contact myHR• Phone: 424-314-myHR (6947) Weekdays 7 a.m.–7 p.m.• Service Center: csmc.service-now.com <p>Assistance for new employees</p> <p>If hired in the last 12 months and need assistance applying for Tuition Assistance, email the HR Benefits department:</p> <ul style="list-style-type: none">• Email: grouphrbenefits@cshs.org

CREDIT UNION

Easy ways to save | Low-interest loans | And more!

Credit Union of Southern California	
	<p>A credit union is similar to a bank, but instead of earning profits for shareholders, any profits are used to pay higher dividends, lower fees and loan rates, etc. Cedars-Sinai Federal Credit Union recently merged with Credit Union of Southern California.</p>
Services	<ul style="list-style-type: none">• Savings accounts: Save for a home, car holidays, vacations or any goal through payroll deductions• Certificates of deposit: Higher interest rates than savings accounts• Mortgages and low-interest loans: New and used cars, motorcycles, RVs, home equity• Checking Accounts• Credit Cards
Insured	<ul style="list-style-type: none">• Deposits up to \$250,000 insured by the National Credit Union Administration
eServices	<ul style="list-style-type: none">• Mobile banking• Online and mobile bill pay• Mobile check deposits
Contact	<p>Credit Union of Southern California (CU of SoCal)</p> <ul style="list-style-type: none">• Phone: 866-287-6225• Web: CUSoCal.org/Cedars• Email: info@cusocal.org• Location: Branches throughout Southern California• Hours: Monday–Friday 9 a.m.–5 p.m. Saturday 9 a.m.–1 p.m.

Payroll Calendars

Normally each year there are 26 pay periods of 14 days each. Each pay period begins Sunday at 12:01 a.m. and ends Saturday at midnight, two weeks later. Employees receive a paycheck on the Friday following each pay period during which they have worked. Check distribution may begin at 3:00 p.m. on Thursday as a convenience to night-shift employees. When three pay periods end in the same month, no monthly benefit premiums or parking expenses are deducted from the paychecks shown in aqua type below. Floating holiday time is credited to your account in the payroll period noted in the payroll calendar. You can take a floating holiday anytime you want; you do not have to take a floating holiday during the pay period when it's added to your time-off account.

2023 Payroll Calendar				
Pay Period	Holidays: National and Floating	Pay Period		Payday Friday
		Begins Sunday	Ends Saturday	
1	Christmas Day	12/18/22	12/31/22	1/6/23
2	New Year's Day	1/1/23	1/14/23	1/20/23
3		1/15/23	1/28/23	2/3/23
4	Floating	1/29/23	2/11/23	2/17/23
5		2/12/23	2/25/23	3/3/23
6		2/26/23	3/11/23	3/17/23
7		3/12/23	3/25/23	3/31/23
8		3/26/23	4/8/23	4/14/23
9		4/9/23	4/22/23	4/28/23
10	Floating	4/23/23	5/6/23	5/12/23
11		5/7/23	5/20/23	5/26/23
12	Memorial Day	5/21/23	6/3/23	6/9/23
13		6/4/23	6/17/23	6/23/23
14		6/18/23	7/1/23	7/7/23
15	Independence Day	7/2/23	7/15/23	7/21/23
16		7/16/23	7/29/23	8/4/23
17	Floating	7/30/23	8/12/23	8/18/23
18		8/13/23	8/26/23	9/1/23
19	Labor Day	8/27/23	9/9/23	9/15/23
20		9/10/23	9/23/23	9/29/23
21		9/24/23	10/7/23	10/13/23
22		10/8/23	10/21/23	10/27/23
23	Floating	10/22/23	11/4/23	11/10/23
24		11/5/23	11/18/23	11/24/23
25	Thanksgiving Day	11/19/23	12/2/23	12/8/23
26		12/3/23	12/16/23	12/22/23

2024 Payroll Calendar				
Pay Period	Holidays: National and Floating	Pay Period		Payday Friday
		Begins Sunday	Ends Saturday	
1	Christmas Day	12/17/23	12/30/23	1/5/24
2	New Year's Day	12/31/23	1/13/24	1/19/24
3		1/14/24	1/27/24	2/2/24
4	Floating	1/28/24	2/10/24	2/16/24
5		2/11/24	2/24/24	3/1/24
6		2/25/24	3/9/24	3/15/24
7		3/10/24	3/23/24	3/29/24
8		3/24/24	4/6/24	4/12/24
9		4/7/24	4/20/24	4/26/24
10	Floating	4/21/24	5/4/24	5/10/24
11		5/5/24	5/18/24	5/24/24
12	Memorial Day	5/19/24	6/1/24	6/7/24
13		6/2/24	6/15/24	6/21/24
14		6/16/24	6/29/24	7/5/24
15	Independence Day	6/30/24	7/13/24	7/19/24
16		7/14/24	7/27/24	8/2/24
17	Floating	7/28/24	8/10/24	8/16/24
18		8/11/24	8/24/24	8/30/24
19	Labor Day	8/25/24	9/7/24	9/13/24
20		9/8/24	9/21/24	9/27/24
21		9/22/24	10/5/24	10/11/24
22		10/6/24	10/19/24	10/25/24
23	Floating	10/20/24	11/2/24	11/8/24
24		11/3/24	11/16/24	11/22/24
25	Thanksgiving Day	11/17/24	11/30/24	12/6/24
26		12/1/24	12/14/24	12/20/24

2025 Payroll Calendar				
1	Christmas Day	12/15/24	12/28/24	1/3/25
2	New Year's Day	12/29/24	1/11/25	1/17/25

Benefit Resources

Benefit Questions

MBC HR EMPLOYEE BENEFITS HELP DESK

Start here for answers:

Phone: 888-302-3941
Monday–Friday 5 a.m.–5 p.m. (PT)
(Closed major holidays)

Email: MBC.cshs@milliman.com

Fax: 206-299-3158

Web: Cedars-Sinai.MyBenefitChoice.com

Mailing: CS HR Benefits Department
Address: c/o MBC Service Center
P.O. Box 600610
Dallas, TX 75360-0610

Retirement Plans

403(b) PLAN AND DC PLAN

Voya Financial National Customer Service

Phone: 800-584-6001

Web: Cedars-Sinai.BeReady2Retire.com

App: Search "Voya Retire"

Voya Financial CSMC Campus Office

Phone: 310-423-0974
Monday–Friday 8:30 a.m.–5 p.m. (PT)

Location: Cedars-Sinai Medical Center
Ray Charles Cafeteria, Suite 1631 A

DB PLAN

DB Plan Pension Center

Phone: 866-296-5034

Web: Cedars-Sinai-MyRetirement.com

DB/DC Plan Choice and Retirement Planning Tools

Web: Cedars-Sinai-MyRetirement.com

Benefits Portal

At Cedars-Sinai.MyBenefitCHOICE.com

- Access benefits information easily.
- Link to retirement plans from the home page.
- View your online total compensation and benefits statement.
- Enroll in benefits. (Registration required on your first visit.)

Has your address or phone number changed?

Be sure to let us know!

The quickest way is on the Cedars-Sinai intranet:

- > Click **Service Center** (under Helpful Links)
- > Click **Changing Your Address and/or Phone Number** (under Frequently Asked Questions)
- > Click **Change My Address or Phone Number eForm** in the article or under Additional Resources near the bottom of the page
- > Complete the online eForm and click the **Submit** button (on the right)

If you do not have access to the Cedars-Sinai intranet or need help, contact the HR Service Center:

- Call: 424-314-myHR (6947)
- Email: myHR@cshs.org

Benefit Questions?

Find answers on the Benefits Portal at Cedars-Sinai.MyBenefitCHOICE.com

Your go-to place for everything benefits in one convenient stop:

- Access benefits information (no login required)
- Link to retirement plans and other benefit vendors
- Log in to enroll and see your benefit elections

Get personal assistance from the **MBC HR Employee Benefits Help Desk**

- For help using the enrollment website
- If you don't have access to a computer
- To get answers to general benefit questions

Phone: 888-302-3941
Fax: 206-299-3158
Email: MBC.cshs@milliman.com
Web: Cedars-Sinai.MyBenefitChoice.com
Open: Monday–Friday, 5 a.m.–5 p.m. PT (Closed major holidays)

Get answers on the go with two Cedars-Sinai apps

CS Employee App:

- Stay informed with news and information.
- Watch and learn through videos.
- Snap and save photos of common cards.
- Get answers to common questions quickly with contact information and one-touch dialing.
- Download it today from: csemployeeapp.com



Cedars-Sinai App for employees, patients and visitors:

- Log in to MyCS-Link to view doctor messages, lab results, appointments and more.
- Get directions within the medical center.
- Available in the Apple app store or Google Play store; just search for "Cedars-Sinai."

Human Resources Questions?

Contact myHR

- For help with HR questions
- General wellness program questions

Phone: 424-314-myHR (6947)
Email: myHR@cshs.org
Service Center: csmc.service-now.com



This booklet summarizes your benefits through June 30, 2024. **Please keep it handy** to refer to it when you have benefit questions throughout the year.