



2023 Trinity Health **Summary of Benefits**

Medical Residents at Mount Carmel Health System

Health & Well-being Benefits

Except where indicated, coverage is effective on the first day of the term of the Agreement if Resident timely enrolls¹



Benefit	Who Pays	Provisions
Medical	Mount Carmel Health System (MCHS)+ Resident, (pre-tax; after-tax for non-spouse eligible adult dependent and their children)	<p>Participation in one of the following plans is offered:</p> <ul style="list-style-type: none"> • Traditional Plan • Health Savings Plan • Essential Plan <p>Each year, Residents enrolled in a MCHS medical plan (“medically enrolled” Residents) and their spouses/eligible adult dependents have an opportunity to earn an incentive to retain the lower per pay cost for medical plan coverage by completing and tracking healthy-living and well-being activities. New Residents with a benefits effective date after Jan 1 pay the lowest per pay period cost for their medical plan coverage elected through the end of their first plan/calendar year without completing healthy-living and well-being activities.</p>
Health Savings Account (HSA)	MCHS + Resident (pre-tax)	<p>Pre-tax salary deductions to reimburse for qualified medical expenses up to 2023 IRS limits of \$3,850 for single coverage and \$7,750 for family coverage (limits include both Resident and employer contributions). Residents age 55 and over can contribute an additional catch-up contribution of \$1,000. Unused funds roll over year after year.</p> <p>MCHS will also make an annual contribution of \$650 for single coverage and \$1,300 for family coverage, prorated based on effective date of MCHS medical plan coverage. Eligibility for the HSA is dependent upon enrollment in the Health Savings Plan and establishing an HSA with Health Equity.</p>
Health Reimbursement Account (HRA)	MCHS	Essential Assist Plan and HRA component available based on household income and family size. For Residents eligible for and enrolled in the Essential Assist Plan, MCHS will furnish an HRA help pay for medical and/or prescription drug expenses in the following amounts: \$1,000 for single coverage and \$2,000 for family coverage. Eligibility for the HRA is dependent upon enrollment in the Essential Assist Plan.
Dental	MCHS + Resident (pre-tax; after-tax for non-spouse eligible adult dependent and their children)	<p>Participation in one of the following plans is offered:</p> <ul style="list-style-type: none"> • High Plan • Standard Plan
Vision	Resident (pre-tax; after-tax for non-spouse eligible adult dependent and their children)	<p>Participation in one of the following plans is offered:</p> <ul style="list-style-type: none"> • High Plan • Standard Plan
Health Care Flexible Spending Account (HC FSA)	Resident	Pre-tax salary deductions to reimburse for qualified medical expenses. Resident may elect to contribute pre-tax dollars each pay period up to a maximum of \$2,750 annually.
Dependent Care Flexible Spending Account (DC FSA)	Resident	Pre-tax salary deductions to reimburse for eligible dependent care expenses. Resident may elect to contribution pre-tax dollars each pay period up to maximum of \$5,000 annually (\$2,500 if the Resident is married but files a separate tax return).
Basic Group Term Life and Accidental Death and Dismemberment (AD&D)	MCHS	Basic group term life insurance coverage equal to 1x base annual salary, subject to plan maximums; AD&D insurance coverage equal to 1x base annual salary, subject to plan maximums; no enrollment is required, and coverage is effective on the first day of the Resident’s active employment.

¹ For first year Residents, the initial enrollment period is 30 days from the first day of the term of the Agreement. Residents other than first year Residents must enroll for an Agreement term prior to the beginning of that term and, if they do not timely enroll, their benefit elections from the prior term carryover to the new term except HSA, HC FSA, and DC FSA elections

Health & Well-being Benefits (continued)



Benefit	Who Pays	Provisions
Supplemental Life, Supplemental AD&D; Spouse and Dependent Life	Resident (after-tax)	<p>Resident may elect to purchase additional group term life insurance up to 8x base annual salary, subject to plan maximums and evidence of insurability requirements. Resident may also purchase additional AD&D insurance up to 8x base annual salary, subject to plan maximums and evidence of insurability requirements. Resident may also elect to purchase the following coverage for spouse and child(ren), subject to policy limits and requirements:</p> <ul style="list-style-type: none"> Spouse life: \$10,000, \$20,000, \$50,000, \$80,000 or \$100,000. Child(ren) life: \$5,000, \$10,000 or \$20,000 <p>Coverage is effective on the first day of the Resident's active employment if Resident timely enrolls¹ and satisfies any applicable requirements for the coverage elected (e.g., timely provides evidence of insurance where necessary).</p>
Travel and Accident Insurance	MCHS	Coverage provided for certain losses (e.g., loss of life, limb or sight) while traveling on Trinity Health/MCHS business up to policy limits; no enrollment is required and coverage is effective on the first day of the Resident's active employment.

Time Away From Work Benefits

Except where indicated, coverage is effective on the first day of the term of the Agreement; the Time Away from Work Benefits are paid for by the employer.

Benefit	Provisions
Short-Term Disability (STD)	Employer-paid STD provides up to 60% of pre-disability earnings for an approved leave of absence exceeding seven (7) consecutive calendar days, with a maximum benefit of 26 weeks from date of disability in accordance with the plan. Coverage is effective on the first day of the Resident's active employment.
Long-Term Disability (LTD)	Upon the greater of exhaustion of STD or 180 consecutive calendar days of disability, employer-paid group LTD insurance provides a benefit of 60% of pre-disability earnings up to a monthly maximum of \$10,000 in accordance with the policy for the first 30 months of disability. Benefit for disability exceeding 30 months is outlined in the certificate of coverage/summary plan description. Coverage is effective on the first day of the Resident's active employment.
Paid Time Off (PTO)	PGY 1 Residents receive 23 days of "drop-in" PTO (also referred to as "front-loaded" PTO hours) on the first pay of the contract year; the entire 23 days of PTO are available for use on approval from the Program Director. PGY 2 – 5 Residents receive 28 days of "drop-in" PTO (also referred to as "front-loaded" PTO hours) on the first pay of the contract year; the entire 28 days of PTO are available for use on approval from the Program Director. PTO is inclusive of sick time, vacation time and holidays (i.e., there are no separate paid holidays). No carry over of unused PTO days into the next contract year. PTO balances are not payable in advance or paid out upon termination of employment.
Jury Duty Pay	Base salary paid for time away from work to serve when summoned to jury duty.
Witness Duty Pay	Base salary paid to testify as a witness at the request of MCHS, Trinity Health another one of Trinity Health's ministries or subsidiaries unless paid as an expert witness.
Education Leave	Up to five (5) business days of leave for education purposes relevant to the training program; guidelines for providing leave and reimbursement for expense are in the discretion of each program and approval for leave is granted by the Program Director.
Military Services Duty Leave	Residents who serve as members of the armed services should refer to the Active Military Service Leave Policy for information regarding benefits and pay/stipend provided during the leave.

Time Away From Work Benefits (continued)

Except where indicated, coverage is effective on the first day of the term of the Agreement; the Time Away from Work Benefits are paid for by the employer.

Benefit	Provisions
Family Medical Leave (FMLA)	In accordance with FMLA rules and regulations, after 12 months of employment, a Resident absent from work for their own illness, illness of an immediate family member, maternity/paternity reasons or military family leave is eligible for up to twelve (12) weeks of unpaid leave. Please see the Family Medical Leave of Absence policies for additional information.
Elective and Other Leaves of Absence	A Resident may request an unpaid leave of absence for the following reasons in accordance with the Elective and Other Leave of Absence Policy: education, public service, non-FMLA medical leave for Resident (for the Resident's own "serious health condition" or "qualifying disabling condition"), non-FMLA care of a family member (to care for a family member with a "serious health condition") or personal reasons.
Medical, Parental or Caregiver Leave	Residents covered under ACGME are eligible for up to six weeks of paid leave for medical, parental or caregiver leave one time during the residency program, which will be administered by The Hartford.
Workers' Compensation	Workers' Compensation coverage is provided under such terms as required by Ohio law for protection against accidents or illnesses.
Effect of Leave for Satisfying Completion of Program	Each Resident will be allowed leaves of absence as described above and in MCHS's HR policies applicable to the Resident. If a leave of absence compromises a Resident's ability to satisfy specialty board training requirements, the Resident may be required to extend the training period. The Program Director will review the specific board requirements needed to complete the Program; supplemental time will be determined if necessary and added to the current academic year.

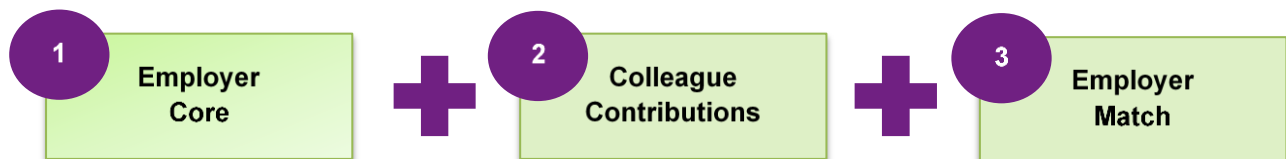
403(b) Retirement Savings Plan

The investment of all contributions to the 403(b) Plan is participant-directed among the investment options offered under the 403(b) Plan.



Benefit	Who Pays	Provisions
Employer Core Contribution	MCHS	<p>MCHS will make a “core” contribution to an eligible Resident’s 403(b) Plan account for a plan/calendar year equal to the greater of 3% of the Resident’s eligible pay or a minimum core contribution amount. The minimum core contribution is \$1,400 if the Resident is credited with at least 1,800 hours during a plan/calendar year and is prorated if a Resident is credited with fewer than 1,800 hours during a plan/calendar year.</p> <p>An eligible Resident will receive a core contribution for a particular plan/calendar year only if the Resident is credited with at least 1,000 hours of service during the year and is employed by MCHS, Trinity Health or another one of Trinity Health’s related employers on the last day of the year. Participants become vested in employer core contributions after three (3) plan/calendar years in which they are credited with at least 1,000 hours of service.</p>
Resident Contributions	Resident	<p>Resident may elect to make salary deferral contributions up to 75% of eligible pay (as defined in the 403(b) Plan and subject to the annual limit on compensation taken into account for purposes of the 403(b) Plan set by the IRS, which is \$330,000 for calendar year 2023); deferral contributions cannot exceed the annual dollar limit set by the IRS (\$22,500 for 2023) plus, if the Resident is at least age 50, an additional “catch-up” contribution up to the limit set by the IRS (\$7,500 for 2023). If a new Resident does not make a deferral election within 35 days of the later of the date of employment and the date the Resident is provided the automatic enrollment notice, the Resident will be automatically enrolled to make deferral contributions of 2% of eligible pay. Participants are 100% vested in salary deferral contributions that they make.</p>
Employer Match Contribution	MCHS	<p>MCHS will make an employer matching contribution of 25%, 50% or 75% of an eligible Resident’s salary deferral contributions up to 6% of eligible pay. The applicable match percentage is based on the Resident’s years of benefit service.</p> <p>An eligible Resident will receive an employer matching contribution for a particular plan/calendar year if the Resident either has budgeted hours of at least 1,560 for the plan/calendar year or is credited with 1,000 hours of service during the plan/calendar year. Participants become vested in employer matching contributions after three (3) plan/calendar years in which they are credited with at least 1,000 hours of service.</p>

Maximize Your Retirement Savings



Live Your Whole Life: Well-being Resources



All Residents and their family members are eligible for the Self-Care Platform (except that only medically enrolled are eligible for coaching and other medical benefits), Life Enrichment Program, Student Loan Relief Services and Colleague Discounts effective as of the first day of the term of the Agreement. Residents may participate in Education Allowance, Customary Hospital Lodging (Call Rooms), Food Allowance, Vaccinations, Weight Management, and Commuter Benefits effective as of the first day of the term of the Agreement. Residents are eligible to enroll in Voluntary Benefits as of the first day of the term of the Agreement and coverage is effective first of the month following date of application, or first of the month following 45 days if application date is after the 15th of the month.

Benefit	Provisions
<p>At Trinity Health and MCHS, we believe our spiritual, mental, emotional, physical, financial, social, and vocational well-being can positively affect quality of life, not only for ourselves, but also for our families and those we serve. Life Your Whole Life is the integrated well-being program for colleagues and their families; and is comprised of activities, tools and benefits that support us in achieving our unique well-being goals.</p>	
Self-Care Platform <i>powered by Live Your Whole Life connect portal</i>	Confidential, secure access to telephonic health coaching, self-guided video courses, digital coaching modules, healthcare tracker tools, self-assessments and more.
Life Enrichment Program <i>powered by Carebridge®</i>	Get free, confidential support to assist you with a wide variety of services – from finding solutions to personal and family issues to supporting you in completing daily life responsibilities. Participate in virtual support groups, individual counseling sessions or personal life coaching.
Student Loan Relief Services <i>powered by Fiducius</i>	Residents and family members may enroll in the voluntary student loan relief services program for options to handle student loans. Options may include loan forgiveness, refinancing, consolidation and lower payments.
Education Allowance	Up to \$2,500 each contract year. The educational allowance may not be carried over from one contract year to the next. In addition, unused funds will not be paid out at the end of a contract year. Reimbursement for educational activities will be pursuant to the MCHS Travel and Other Business Expenses Travel Procedure.
Customary Hospital Lodging (Call Rooms)	Customary hospital lodging while on call at MCHS at no cost to the Resident.
Food Allowance	\$167 per month each contract year. The food allowance is only for MCHS rotations and may only be used at MCHS facilities. The food allowance may not be carried over from one month to the next or one contract year to the next. In addition, any unused food allowance will not be paid out at the end of a contract year.
Colleague Discounts <i>powered by PerkSpot</i>	Access to exclusive discounts at many national and local merchants. There are hundreds of deals available, including discounts on electronics, health & wellness, entertainment, travel and more.
Voluntary Benefits	Benefit options available include: <ul style="list-style-type: none"> • Life Insurance • Critical Illness Insurance • Cancer Insurance • Auto/Homeowners Insurance (must be employed for one year to enroll) • Pet Insurance • AD&D Insurance • Identity Theft Insurance • Group Legal
Vaccinations	Vaccinations will be provided on a voluntary basis or according to the Infection Control Committee's established policy.
Weight Management Reimbursement Benefit	Reimbursement of up to \$500 per year for behavioral and nutritional counseling services for the purposes of non-surgical weight loss or weight management. Medically enrolled Residents and family members are eligible.
Commuter Benefits	Commuter benefits allow you to use tax-free money to pay for eligible transit and parking expenses up to \$300/month.



Introducing SmartSelect

Need help deciding which medical plan best meets the needs of you and your family? SmartSelect provides personalized support to educate and assist you to make better health plan decisions, recommend a plan based on expected future health care usages, and increases your understanding of benefit offerings. Access the SmartSelect tool [here](#).

The information provided in this document is designed to assist you with understanding your benefits. It is only an overview and is not intended to be a complete description of your benefits or an employment contract. For a complete description of your benefits, refer to the applicable plan documents, summary plan descriptions, plan highlights and certificates of coverage (for fully insured benefits), as amended from time to time. The formal plan documents will govern if there are any inconsistencies or inaccuracies between the terms of the plan documents and this document. The formal plan documents are the only sources upon which you may properly rely to determine your benefits and rights under the plans and this document is not meant to interpret, extend or change any plan provisions in any way. Some coverages may not be available in all states. The summary plan descriptions, plan highlights and certificates of coverage (for fully insured benefits) are available by accessing the HR4U colleague portal at <https://hr4u.trinity-health.org> or by contacting the HR Service Center by phone at 1-877-750-HR4U (4748).

Any change in the law or regulatory guidance issued thereunder that affects these benefits may necessitate revisions in the plans. Additionally, benefits are determined, provided and calculated pursuant to applicable policies, procedures and plan documents in effect from time to time and are, at all times, subject to alteration, revision, or discontinuation. Nothing in this summary shall prevent the employer, plan sponsor or other person(s) eligible to amend or terminate a benefit plan or program in accordance with the terms of the governing documents from amending or terminating the plan or program at any time, and, therefore, the employee benefit plans and programs offered to you may be amended or terminated at any time and for any reason without prior notification to you. Each year a revised benefit summary will be made available to you, where necessary, to reflect benefits that have been added, deleted or changed. Such revised summary will supersede the descriptions in this document. You are encouraged to refer specific tax questions regarding your benefits to your personal tax advisor.

2023 Benefits Contribution Schedule: Mount Carmel Health System

Coverage Election	Employment Status	Colleague Contribution (These premiums are deducted bi-weekly for 26 weeks)			
Medical Coverage <i>Annual base salary below the 2022 SSTWB of \$147,000</i>		EE Only	EE + Spouse/ Eligible Adult	EE + Child(ren)	Family
Traditional Plan – Aetna	Full-Time	\$ 82.30	\$ 226.33	\$ 159.46	\$ 282.91
	Part-Time	\$ 156.37	\$ 389.29	\$ 274.27	\$ 486.61
Health Savings Plan - Aetna	Full-Time	\$ 56.75	\$ 166.47	\$117.29	\$ 208.09
	Part-Time	\$ 124.86	\$ 316.30	\$ 222.85	\$ 395.38
Essential Plan – Aetna	Full-Time	\$ 34.63	\$ 114.28	\$80.52	\$142.86
	Part-Time	\$ 96.97	\$ 251.43	\$ 177.14	\$ 314.28
Medical Coverage <i>Annual base salary above the 2022 SSTWB of \$147,000</i>		EE Only	EE + Spouse/ Eligible Adult	EE + Child(ren)	Family
Traditional Plan – Aetna	Full-Time	\$ 102.88	\$ 271.60	\$ 191.35	\$339.50
	Part-Time	\$ 176.95	\$ 434.56	\$ 306.16	\$543.19
Health Savings Plan - Aetna	Full-Time	\$ 75.67	\$ 208.09	\$ 146.61	\$ 260.12
	Part-Time	\$ 143.77	\$ 357.92	\$ 252.17	\$ 447.40
Essential Plan – Aetna	Full-Time	\$ 51.95	\$152.38	\$107.36	\$ 190.47
	Part-Time	\$ 114.28	\$ 289.52	\$ 203.98	\$ 361.90
Dental Coverage		EE Only	EE + Spouse/ Eligible Adult	EE + Child(ren)	Family
High Plan – Delta Dental	Full-Time	\$ 7.43	\$ 16.71	\$ 18.80	\$ 27.15
	Part-Time	\$ 10.77	\$ 23.39	\$ 26.31	\$ 38.01
Standard Plan – Delta Dental	Full-Time	\$ 4.59	\$ 10.49	\$ 11.80	\$ 17.04
	Part-Time	\$ 6.95	\$ 15.20	\$ 17.10	\$ 24.71
Vision Coverage		EE Only	EE + Spouse/ Eligible Adult	EE + Child(ren)	Family
High Plan – United Healthcare	Full/Part-Time	\$ 6.24	\$12.95	\$ 13.59	\$ 19.14
Standard Plan – United Healthcare	Full/Part-Time	\$ 3.17	\$ 5.81	\$ 6.11	\$ 8.43

*NOTE: Premium contributions may vary from the amount shown on your pay advice due to rounding.

Supplemental Life Insurance Rates

Age	Colleague Life Cost Per \$1,000	Spouse Life* Cost Per \$1,000
Under 25	\$ 0.022	\$ 0.050
25 – 29	\$ 0.025	\$ 0.059
30 – 34	\$ 0.033	\$ 0.082
35 – 39	\$ 0.037	\$ 0.093
40 – 44	\$ 0.042	\$ 0.108
45 – 49	\$ 0.064	\$ 0.164
50 – 54	\$ 0.101	\$ 0.273
55 – 59	\$ 0.186	\$ 0.471
60 – 64	\$ 0.291	\$ 0.758
65 – 69	\$ 0.538	\$ 1.412
70 – 74	\$ 0.893	\$ 2.717
75+	\$ 1.200	\$ 2.157

Child Life: The monthly cost per \$1,000 increment for all eligible children is a flat \$0.100.

*Costs for spouse life are based on the **colleague's** age as of Jan. 1, 2023.

Premium Calculation Example:

- Assume an employee is 35 years of age, earns \$22,300 per year, and elects supplemental life insurance at 2 x their annual salary:
 Step 1: $\$22,300 \times 2 = \$44,600$
 (round to the next higher \$1,000 = \$45,000)
 Step 2: $\$45,000/1,000 = 45$
 Step 3: $45 \times .037$ (from table) = \$1.67 monthly
- Assume the same employee selects \$50,000 coverage for his/her spouse:
 Step 1: $\$50,000/1,000 = 50$
 Step 2: $50 \times .037$ (based on colleague's age) = \$1.85 monthly

Supplemental AD&D Rates

Colleague Supplemental AD&D: The monthly cost per \$1,000 increment for all ages is a flat \$0.011.