

ADDITIONAL SERVICES, MEMBERSHIPS & DISCOUNTS

WELLNESS CENTER MEMBERSHIP

All MRHC employees membership fee is \$25 per month. The \$25 assessment fee is waived for MRHC employees.

Additional family members are \$28 per month. Babysitting for ages 12 months to 8 years is \$5 per visit or \$25 per month per family. No family membership will exceed \$95 per month including babysitting, or \$85 per month without babysitting.

Guests pay \$7 per visit and must be 18 years of age or older. A five visit punch card is available for \$25 and expires one month after the date of purchase.

We offer \$50 per quarter for employees that exercise at least 3 days per week at the Wellness Center.

To enroll and view your Medical, Dental, Vision and Symetra Life Insurance:

Enrollment period is during open enrollment or for 30 days after hire date or full-time status date.

Log in to Paycom or contact:

MRHC Human Resources, Lucy Muller
918.421.6958 or lmuller@mrhcok.com

EMPLOYEE ASSISTANCE PROGRAM

Just when you think you have it figured out, along comes a challenge. Whether those challenges are big or small, your Life Assistance and Work/Life Support Program is available to help you and your family find a solution and restore your peace of mind.

Visit us at: www.guidanceresources.com (web ID SYMETRA) or call 1.888.327.9573 for more information.

TICKETSATWORK CORPORATE DISCOUNT PLAN TICKETSATWORK.COM 800.331.6483

Through TicketsAtWork.com's Corporate Discount Plan, all employees can save on theme parks and many other attractions nationwide. Ordering is easy. Visit the website and enter Company Code: MCALESTER or order by phone at 800.331.6483. Monthly specials will be sent to you via email.



2021

BENEFITS SUMMARY

McAlester Regional Health Center

mrhcok.com

MRHC HUMAN RESOURCES

LUCY MULLER, MSHR, SSGB

918.421.6958 • LMULLER@MRHCOK.COM

 **McAlester Regional**
HEALTH CENTER
Southeast Oklahoma's Leading Healthcare Resource



HEALTH INSURANCE OPTIONS

1	PREMIUM				
	PREFERRED • 100%	VALUE • 85%	O.K. NETWORK • 65%	OUT OF NETWORK • 0%	
Self Deductible	\$750	\$750	\$1,000	No Coverage	
Out of Pocket Max	\$4,200	\$5,450	\$8,550	Unlimited	
Employee + Dep Deductible	\$1,500	\$1,500	\$2,000	No Coverage	
Out of Pocket Max	\$8,000	\$10,500	\$17,100	Unlimited	
Employee	\$102.00	Employee + 1 Child Employee + 2 or More Children	\$234.50 \$316.25	Employee + Spouse Employee + Family	\$251.00 \$333.25

2	COMPETITIVE				
	PREFERRED • 100%	VALUE • 85%	O.K. NETWORK • 65%	OUT OF NETWORK • 0%	
Self Deductible	\$1,250	\$1,250	\$1,800	No Coverage	
Out of Pocket Max	\$4,950	\$6,250	\$8,550	Unlimited	
Employee + Dep Deductible	\$2,500	\$2,500	\$3,600	No Coverage	
Out of Pocket Max	\$9,200	\$11,950	\$17,100	Unlimited	
Employee	\$50.25	Employee + 1 Child Employee + 2 or More Children	\$135.00 \$188.75	Employee + Spouse Employee + Family	\$151.75 \$205.50

3	HEALTH SAVINGS ACCOUNT (HSA) PLAN				
	PREFERRED • 100%	VALUE • 85%	O.K. NETWORK • 65%	OUT OF NETWORK • 0%	
Self Deductible	\$2,500	\$3,500	\$4,500	Unlimited	
Out of Pocket Max	\$6,500	\$7,050	\$8,550	Unlimited	
Employee + Dep Deductible	\$5,000	\$6,000	\$9,000	Unlimited	
Out of Pocket Max	\$12,600	\$13,650	\$17,100	Unlimited	
Employee	\$22.25	Employee + 1 Child Employee + 2 or More Children	\$100.50 \$169.00	Employee + Spouse Employee + Family	\$134.00 \$189.75

ALL MRHC HEALTH OPTION COPAYS

Copays are not applicable in the HSA plan. All costs in the HSA are total cost of visit until you meet your deductible. After meeting deductible, all MRHC Services will be paid 100%, except for the ER.

Emergency Services at MRHC and all other Emergency Service Providers will be covered by a \$750 deductible. After meeting the separate ER Deductible, MRHC ER Providers will be covered at 90/10 and all other Emergency Providers will be covered at 80/20.

MRHC Southeast Clinics: \$0 copay
Primary Physicians and Urgent Care: \$20 copay
Specialists: \$40 copay
Emergency Department: \$100 copay

All copays go toward the Out of Pocket Max and do not apply to your deductible

McAlester Regional Health Center 2021 BENEFITS SUMMARY

PRESCRIPTION CARD WELLDYNERX.COM

Copays are not applicable in the HSA plan. All costs in the HSA are total cost of visit until you meet your deductible. You may use your Rx card at external pharmacies. Dependents covered under the MRHC Health Plan will pay a small copay.

Generic	\$10 or 20% (whichever is greater)
Preferred Brand	\$25 or 30% (whichever is greater)
Non-Preferred Brand	\$35 or 55% (whichever is greater)

If the cost is less than a copay, you pay the cost. The Rx Co. will provide a formulary that will explain which drugs are in the above categories.



To view providers & facilities covered under the OK Network, visit:

HCHLOGIX.COM

VISION COVERAGE • VSP

VSP.COM
800.877.7195

- Exam every 12 months (one copay of \$25 for exam, frame, and lenses).
- Prescription Glasses - lenses covered in full every 12 months.
- Frames every 24 months (up to \$120) or
- Contact lenses every 12 months (up to \$120)
- 15-20% Laser Eye Surgery discounts

Premiums Per Pay Period
Employee \$4.43
Employee + Spouse \$7.06
Employee + Children \$7.22
Employee + Family \$11.62

DENTAL

You are entitled to one cleaning every 6 months, and one set of x-rays every 36 months covered in full. Orthodontics is automatically included up to \$1,500 or \$3,000 depending on the plan in which you enroll. You may use the dentist of your choice. The Copay for both plans below is \$50.

Premiums Per Pay Period (**\$1,500 max**)
Employee \$8.00
Employee + Spouse \$10.00
Employee + Children \$10.00
Employee + Family \$18.50

Premiums Per Pay Period (**\$3,000 max**)
Employee \$20.00
Employee + Spouse \$30.00
Employee + Children \$30.00
Employee + Family \$40.50

PAID TIME OFF (PTO)

YEARS OF SERVICE	ACCRUAL RATE PER PAY PERIOD	ANNUAL PTO ACCRUAL	MAXIMUM ACCRUAL (balance will cap at 1.5x accrual)
0-4 years	7.08 hours	184 hours (23 days)	276 hours (34.5 days)
4-8 years	8.62 hours	224 hours (28 days)	336 hours (42 days)
9-15 years	10.15 hours	263 hours (33 days)	396 hours (49.5 days)
16+ years	11.68 hours	303 hours (38 days)	456 hours (57 days)
ESL	2 hours	52 hours (6.5 days)	360 hours (45 days)

Accrual rates include hours for vacation (10, 15, 20 or 25 days), 6 sick days, 7 holidays (New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Friday after Thanksgiving, and Christmas).

Two work/life balance days. These days are not available to use upon call in and must be scheduled in advance. They do not carry over year to year and are not eligible to be bought out or paid out at termination.

ESL hours are designed to assist employees who need an extended related illness. Leave requires must be 5 or more days in total length or FMLA as well as requires a doctor's note for the leave and separate doctor's note to return.

ADDITIONAL SERVICES AND RETIREMENT

SYMETRA LIFE INSURANCE

MRHC provides Group Life Insurance for full-time and part-time employees in the amount of 1x annual salary rounded to the next \$1,000. This is free for eligible employees. Optional coverage of up to 5x annual salary is available. If an employee chooses more than 2x annual salary they must complete an EOI to be approved by Symetra.

SYMETRA LONG TERM DISABILITY

MRHC provides Group LTD for full-time and part-time employees. If you qualify for LTD, this would pay you 60% of your annual salary.

457B/401A RETIREMENT PLAN

To be eligible, you must be full-time or part-time and be at least 21 years of age. Bi-weekly enrollment will be available through appointments only with our financial advisor. Please contact HR at 8061 to make an appointment.

- MRHC will match 50% of 5% of employee deferral, capped at 2.5%
- Discretionary 1% contribution based on MRHC Performance
- All matching contributions have a vesting schedule of 5 years or age 55
- Savings limits follow IRS guidelines

You may make voluntary contributions to a Roth 457B Retirement Account. Make your appointment today for more information.

AMERICAN FIDELITY

American Fidelity products that are offered to full-time and part-time employees:

- Flex Spending
- Short Term Disability
- Hospitalization
- Accidental
- Cancer Term Life
- Critical Illness (heart & stroke)

To make an appointment, call the HR Department at 8061.