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| <b>SUBJECT:</b>        | Hospital/Medical Insurance            |
| <b>POLICY NO:</b>      | II:04                                 |
| <b>APPLICABLE TO:</b>  | Regular Full-Time/Part-Time Employees |
| <b>PAGE NO:</b>        | 1 of 2                                |
| <b>EFFECTIVE DATE:</b> | July 1, 1989                          |
| <b>REVISION DATE:</b>  | January 1, 2020                       |

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I. POLICY:

Medical insurance options are available to all regular full-time/part-time employees (75% FTE level and above) and their dependents through a group plan which is underwritten by Medica. HHRI pays for a portion of the coverage with the amount determined annually based on the premium.

II. PROCEDURE

A. Online Enrollment

1. Newly eligible employees must complete their online enrollment within thirty (30) days of hire or a qualifying event.
2. Coverage is effective on the date of hire or qualifying event.

B. Medical Insurance Options

1. HHRI offers two choices of medical insurance coverage to allow each employee to choose the best medical insurance plan for individual and family needs. Different premiums are charged for various options.
2. The options, which are all Medica plans, are:
  - Choice Passport 1500-20%
  - Elect 500-25-10%
3. Shortly after you are enrolled, you will receive a Certificate of Coverage from Medica. Please refer to that document for a complete description of the terms and conditions of your coverage.

C. Dependent Coverage

1. Eligible dependents include:
  - your spouse
  - your children and their children whom you claim as dependents for tax purposes, from birth to age 26. Adopted children and children placed with you for adoption are eligible from the date of placement.
2. Coverage is effective on the date of hire. If the employee does not enroll his/her dependents within 30 days after being eligible, satisfactory evidence of insurability is required for coverage of each dependent except when there is a change in family status.

D. Open Enrollment

1. Is a two week period in November of each year when employees can make changes to their benefit elections for the next year.
2. Changes take effect on January 1<sup>st</sup> of the following year.
2. You may change your medical insurance option.
3. You may add dependent coverage under each option without medical evidence.



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E. Claim Administration

1. All billing is done by the medical provider. The member need not complete any claim forms if a Medica provider is used.
2. A claim form can be obtained from the HHRI Payroll/Benefit Department if a non-Medica contracted provider is used.

F. Termination of Employee's Insurance

The employee's coverage will automatically terminate on the last day of the month for which premiums for coverage have been paid.

G. Continuation of Coverage

Medical benefits may be continued by you or your eligible dependents, for a specified length of time, should any of the following events occur while covered under the Plan. The continuation of coverage is the expense of the employee or eligible dependent.

1. Eligible employees may continue coverage:
  - a. For 18 months following termination of employment or a reduction in hours below benefit eligibility.
  - b. For length of disability following onset of total disability due to bodily injuries or illness.
2. Eligible dependents may continue coverage:
  - a. For 18 months following termination of covered employee.
  - b. For an unlimited period of time following the death of the covered employee.
  - c. For an unlimited period of time following marriage dissolution or legal separation from the covered employee.
  - d. For 36 months following covered employee's entitlement to receive Medicare benefits.
  - e. For 36 months following the loss of dependent status.

HHRI must be notified within 60 days from the date an employee or eligible dependent would lose coverage, because of one of the events described above, to continue coverage.