



2026
BENEFITS
GUIDE

EvergreenHealth

Benefits to Support Your Healthiest Best.



2026

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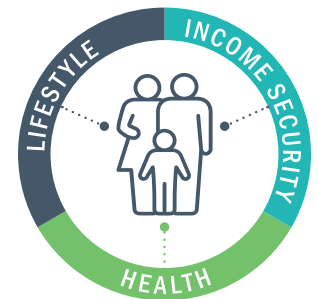
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Welcome to Your Benefits

At EvergreenHealth, we appreciate your commitment and contribution to our success. We are proud to offer a suite of quality benefits and resources that are comprehensive, flexible, and competitive to help you and your loved ones maintain and improve your health and financial wellbeing.



Who is Eligible

Eligible employees are active employees who are designated to work at least 20 hours a week. Coverage begins the first of the month following or coincident with your date of hire. See your Summary Plan Description (SPD) for more details on eligibility and enrollment.

Your Dependents May Include:

- Spouse or domestic partner (same or opposite sex). A spousal/domestic partner surcharge in the amount of \$175/month will be applied for any spouse/domestic partner who is enrolled in an EvergreenHealth medical plan instead of enrolling in the coverage provided through his/her own employer. Your spouse/domestic partner who either does not have coverage available through another employer or is covered under both their own employer's plan and an EvergreenHealth plan will not be subject to this surcharge.
- Your, your spouse's or your domestic partner's children up to age 26 (children may include biological, adopted, step-children, and children for whom you have legal guardianship).
- Your, your spouse's or your domestic partner's children over age 26 who are not able to support themselves due to a physical or mental disability. The child must have become incapacitated before age 26 and have been covered by this plan immediately before reaching the maximum age for dependent coverage.

Special Enrollment Periods

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) gives you special enrollment rights as described within this section.

Change in Status

If you decline group health coverage through EvergreenHealth and later acquire a new dependent by marriage, birth, adoption or placement, you may be eligible to enroll yourself and your dependents into the group health plan if you request enrollment within 31 days after the marriage or 60 days after the birth, adoption or placement for adoption of a child. If you become eligible to participate in a premium assistance program under Medicaid or the Children's Health Insurance Program (CHIP) Reauthorization Act of 2009, you have 60 days to enroll in the plan.

In addition, a special enrollment period is available if a change in status occurs. A change in status includes:

- Legal marital status change; domestic partnership status change; beginning or ending employment; reduction or increase in hours of employment; a dependent satisfying or no longer satisfying eligibility requirements
- Significant increases in health plan cost or coverage (doesn't apply to the Health Care Flexible Spending Account)
- Leave of absence under the Family and Medical Leave Act of 1993
- Judgment, decree or court order required health coverage for your child
- Entitlement to Medicare or Medicaid
- Significant change in health care attributable to your spouse's/ domestic partner's employment

Any changes made in elections must be consistent with the change in status.

If you enroll in group health coverage through EvergreenHealth and you (and/or a covered dependent) become eligible for coverage from another source as the result of a change in status, you may drop coverage within 31 days of the event. If you or your dependent is terminating coverage due to eligibility of Medicare or Medicaid, you are provided up to 60 days to drop coverage.

Involuntary Loss of Other Coverage

You may enroll for coverage under this Plan outside of Open Enrollment when some of the following requirements are met:

- You waived coverage under this Plan at the time this coverage was previously offered because you were already covered under another plan. (A waiver of group health plan benefits is required at Open Enrollment or when you become eligible for enrollment in the benefit plan; forms are available from the Plan Administrator).
- Your coverage under the other health plan was terminated as a result of:
 - Loss of eligibility for the coverage (including as a result of legal separation, divorce, death, termination of employment or the reduction in the number of hours of employment)
 - Termination of employer contributions toward such coverage
- You were covered under COBRA at the time coverage under this Plan was previously offered and your COBRA coverage has been exhausted.
- You, or your dependent(s), were covered under Medicaid or CHIP but have since lost eligibility for either program.

Choose Carefully

IRS rules place certain restrictions on when you can make changes outside the enrollment period. Once your elections go into effect, you may not make further changes for the calendar year unless you experience a qualifying event. Any change in coverage during the year must be in keeping with the type of change. If, for example, you are single and have medical coverage for yourself, then get married during the year, you can add your spouse to the medical plan. (You may not switch medical plans.) You'll need to fill out required enrollment forms and provide supporting documentation within the allowable time frame to add or drop dependents outside of Open Enrollment:

- Newborn or adopted child – within 60 days of the birth or adoption
- For most other qualifying events – within 31 days of the event date

When Health Benefits Are Taxable

If you cover an eligible family member who does not qualify under the IRS rules for tax-free benefits (such as a domestic partner), you may be required to pay their premiums after tax and the value of their coverage may be treated as taxable "imputed income" to you. (Imputed income is the value of a benefit or service that is considered income for the purposes of calculating your federal taxes). This situation typically applies to domestic partners.

Benefit Opt-Out (BOP) — Pay-in-Lieu of Benefits Premium Program

EvergreenHealth offers a pay-in-lieu of benefits premium option for hourly nonexempt employees who can provide proof of medical coverage through another group medical plan. This premium is in lieu of all benefits, including but not limited to: Health and Welfare benefits, Flexible Spending Account, PTO/EIB, Vacation and Sick Leave, non-worked holiday and employer retirement contributions.

If you elect BOP, you may be eligible for unpaid leave time based on the annual accrual rate for your position.

Seattle Children's Partnership Includes Exciting Changes for Our Benefits-Eligible Employees

We are excited to announce some insurance benefit changes that support our pediatric partnership with Seattle Children's. Effective July 1, 2025, any care/services performed by Seattle Children's staff or providers at our EvergreenHealth Kirkland campus will be covered at the Tier 1 benefits level.

This is similar to how Fred Hutch care/services are covered when you visit the Fred Hutch Cancer Center at the EvergreenHealth Kirkland campus.

This change is only for care/services performed at the EvergreenHealth Kirkland campus and all other care/services provided by Seattle Children's at other locations will continue to be covered at the Tier 2 benefits level.



Your 2026 Medical Plan Summary

Medical coverage is one of the most important benefits available to you. We have a plan to help you achieve all of your health and wellness needs. Review the details of each plan carefully before making your choice. For detailed information, please go to the HR/Employee Benefits page on EverLink and review the 2026 Detailed Benefit Summary for each plan. **These plans are administered by First Choice Health.**

	2026 PPO PLAN				2026 HEALTH SAVINGS MEDICAL PLAN			
	Tier 1	Tier 2	Tier 3	Tier 4	Tier 1	Tier 2	Tier 3	Tier 4
Annual Deductible (Individual/Family)	\$500/\$1,500	\$700/\$2,100	\$900/\$2,700	\$900/\$2,700	\$1,800/\$3,600	\$1,900/\$3,800	\$2,000/\$4,000	\$3,250/\$6,500
Out-of-Pocket Maximum (Individual/Family)	\$3,000/\$9,000	\$4,000/\$12,000	\$5,000/\$15,000	\$5,000/\$15,000	\$3,700/\$7,400	\$3,800/\$7,600	\$3,900/\$7,800	\$4,100/\$8,200
Coinsurance	100%	85%	60%	50%	100%	85%	60%	50%
Preventive Care	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Primary Care Physician/Specialist	\$35 copay	\$40 copay	\$50 copay	50% after ded.	100% after ded.	85% after ded.	60% after ded.	50% after ded.
Diagnostic Test (X-ray, Blood Work)	100% after ded.	85% after ded.	60% after ded.	50% after ded.	100% after ded.	85% after ded.	60% after ded.	50% after ded.
Imaging (CT, PET Scans, MRIs)	\$35 copay ded. waived	85% coinsurance after ded.	60% coinsurance after ded.	50% coinsurance after ded.	100% after ded.	85% coinsurance after ded.	60% coinsurance after ded.	50% coinsurance after ded.
Hospital Inpatient	\$150 copay then 100% after ded.	\$250 copay then 85% after ded.	\$350 copay then 60% after ded.	50% after ded.	100% after ded.	85% after ded.	60% after ded.	50% after ded.
Emergency Room	\$175 copay then 100% after ded.	\$175 copay then 100% after ded.	\$175 copay then 100% after ded.	\$175 copay then 100% after ded.	100% after ded.	100% after ded.	100% after ded.	100% after ded.

Under the health plans: You will likely experience the greatest savings when your care is received at an EvergreenHealth facility.

There are four tiers within the two medical plans:

Tier 1: EvergreenHealth and Tier 1 Partners

Tier 2: Seattle Children's and Tier 2 Partners

Tier 3: First Choice Health/First Health

Tier 4: Swedish Medical Center, Providence Medical Center and Out of Network

Call First Choice Health at **888-896-1115**, to find out your provider's network tier.

The **Health Savings Medical Plan** features a true family deductible. The true family deductible requires that the entire family deductible is met before covered members start receiving benefits from the plan. Please note that the out-of-pocket maximum works the same way.

NOTE: Your medical plan options must offer certain preventive care benefits to you in-network without cost sharing and these preventive care benefits generally are updated annually. Under the Affordable Care Act, the medical plans generally may use reasonable medical management techniques to determine frequency, method, treatment or setting for a recommended preventive care service. Review the Summary Plan Description (SPD) for a list of preventive care services



Prescription Plan

Evergreen Professional Center (EPC) Pharmacy is your on-site network provider for pharmacy services for prescription medications. Additionally, EPC Pharmacy is contracted with many prescription drug plans, which provides you with the convenience of filling prescriptions for family members not covered under your EvergreenHealth pharmacy benefit. This plan is administered by MedImpact.

NOTE: You'll receive a significant discount on generic prescriptions when they are filled at the EPC Pharmacy.

	2026 PPO PLAN	2026 HEALTH SAVINGS MEDICAL PLAN
Retail - 34-day limit		
Generic	\$20 (\$5 at EPC)	\$20 (\$5 at EPC) after deductible
Preferred Brand	\$55	\$55 after deductible
Non-preferred Brand	\$80	\$80 after deductible
Specialty	\$125	\$125 after deductible
Mail Order - 90-day limit		
Generic	\$10 at EPC	\$10 at EPC after deductible
Preferred Brand	\$110	\$110 after deductible
Non-preferred Brand	\$160	\$160 after deductible
Specialty	Limited to a 34-day supply	Limited to a 34-day supply

*The EPC Pharmacy invites you to visit their Weidner Vaccine Clinic to get your year-round and seasonal vaccines.



Use network providers. You will generally receive more favorable coverage.



Request generic rather than brand name prescription drugs. Generic medications, while just as effective, are considerably less expensive.



Consider seeing your family physician rather than a specialist. Family physicians can often provide the same level of care for a variety of illnesses and conditions.



Exercise and maintain a proper diet. The healthier you are the less vulnerable you are to disease, reducing doctor's visits and prescription medicines.

If we become more aware consumers, we can each do our part to lower the cost of health care!

2026 Contributions

Medical Rates (bi-weekly)

TIER 1 36-40 HOURS COVERAGE ELECTION	HSA MEDICAL PLAN	PPO PLAN
	EMPLOYEE DEDUCTION	EMPLOYEE DEDUCTION
Employee (EE) only	\$0.00	\$47.00
EE + Spouse or DP	\$125.00	\$214.00
EE + Child(ren)	\$65.00	\$118.00
EE + Family	\$187.00	\$292.00
EE + DP & NQ Child(ren)	\$187.00	\$292.00

TIER 2 24-35 HOURS COVERAGE ELECTION	HSA MEDICAL PLAN	PPO PLAN
	EMPLOYEE DEDUCTION	EMPLOYEE DEDUCTION
Employee (EE) only	\$0.00	\$61.00
EE + Spouse or DP	\$165.00	\$301.00
EE + Child(ren)	\$79.00	\$178.00
EE + Family	\$242.00	\$399.00
EE + DP & NQ Child(ren)	\$242.00	\$399.00

TIER 3 20-23 HOURS COVERAGE ELECTION	HSA MEDICAL PLAN	PPO PLAN
	EMPLOYEE DEDUCTION	EMPLOYEE DEDUCTION
Employee (EE) only	\$0.00	\$85.00
EE + Spouse or DP	\$224.00	\$523.00
EE + Child(ren)	\$235.00	\$552.00
EE + Family	\$434.00	\$962.00
EE + DP & NQ Child(ren)	\$434.00	\$962.00

Dental Rates (bi-weekly)

COVERAGE ELECTION	CORE PLAN	BUY-UP PLAN
	EMPLOYEE DEDUCTION	EMPLOYEE DEDUCTION
Employee (EE) only	\$0.00	\$6.13
EE + 1 Dependent	\$21.36	\$33.43
EE + 2 or More Dependents	\$58.83	\$80.05

Vision Rates (bi-weekly)

COVERAGE ELECTION	CORE PLAN	BUY-UP PLAN
	EMPLOYEE DEDUCTION	EMPLOYEE DEDUCTION
Employee (EE) only	\$0.00	\$4.98
EE + Spouse or DP	\$1.84	\$9.12
EE + Child(ren)	\$1.95	\$9.38
EE + Family	\$5.07	\$16.36

EvergreenHealth Locations

Advanced Imaging: CT Scans, MRIs, PET Scans and Mammograms

To schedule an appointment, call **1-425-899-2831**.

EvergreenHealth Imaging Center—Redmond

Redmond Medical Center
8980 161st Avenue NE, Suite 300
Redmond, WA 98052

EvergreenHealth Diagnostic Imaging

12040 NE 128th Street, Suite Blue 1-122
Kirkland, WA 98034

EvergreenHealth Monroe

14701 179th Avenue SE
Monroe, WA 98272

EvergreenHealth Radia Diagnostic Imaging

Totem Lake Medical Plaza
11521 NE 128th Street, Suite 200
Kirkland, WA 98034

EvergreenHealth Breast Health Center

12303 NE 130th Lane, Suite Coral 100
Kirkland, WA 98034

EvergreenHealth Kenmore

18151 68th Ave NE, Suite 100
Kenmore, WA 98028

EvergreenHealth Primary and Urgent Care Locations

To find an EvergreenHealth Physician visit www.fchn.com or visit the Human Resources/Employee Benefits page on EverLink.

PRIMARY CARE

Canyon Park

1909 214th Street SE, Suite 110
Bothell, WA 98021
1-425-488-4988

Duvall

14720 Main Street NE, Suite 109
Duvall, WA 98019
1-425-788-4889

Kenmore

18151 68th Avenue NE, Suite 100
Kenmore, WA 98028
1-425-485-6561

Kirkland

12333 NE 130th Lane, Suite 310
Kirkland, WA 98034
1-425-899-6700

Lakeshore, Bothell

10025 NE 186th Street
Bothell, WA 98011
1-425-486-9131

Lakeshore, Totem Lake

12710 Totem Lake Boulevard NE
Kirkland, WA 98034
1-425-821-4040

Monroe

14841 179th Avenue SE, Suite 210
Monroe, WA 98272
1-360-217-1155

Redmond, Bella Bottega

8980 161st Avenue NE
Redmond, WA 98052
1-425-899-2273

Redmond, Town Center

7345 164th Ave NE, Suite I-105
Redmond, WA 98052
1-425-522-8312

Sultan

615 W Stevens Avenue
Sultan, WA 98294
1-360-793-0201

Woodinville

16916 140th Avenue NE
Woodinville, WA 98072
1-425-481-6363

Signature Care

2303 NE 130th Lane, Suite 250
Kirkland, WA 98034
1-425-544-1000

URGENT CARE

Canyon Park

1909 214th Street SE, Suite 120
Bothell, WA 98021

Kenmore

18151 68th Avenue NE, Suite 100
Kenmore, WA 98028
1-425-686-6710

Mill Creek

4220 132nd Street SE, Suite 103
Mill Creek, WA 98012
1-425-225-1234

Redmond

8980 161st Avenue
NE, Suite 320
Redmond, WA 98052
1-425-883-3333

Monroe

14841 179th Avenue SE, Suite 230
Monroe, WA 98272
1-360-282-4190

Woodinville

16916 140th Avenue NE
Woodinville, WA 98072
1-425-488-2273

Lakeshore, Totem Lake

12710 Totem Lake Boulevard NE
Kirkland, WA 98034
1-425-821-4040



More Medical Plan Details

Hip/Knee/Spine and Bariatric Surgeries

Under either of the health plans, hip, knee, spine, and bariatric surgeries are required to be conducted at EvergreenHealth for it to be covered by the plan.

Is Signature Care Right for You?

EvergreenHealth Signature Care is an innovative model of primary care that partners you with your physician in a unique and personalized relationship. Together, you'll develop a plan to help you live your healthiest. Signature Care allows you to make appointments at your convenience, have 24/7 communication with your physician, or send a quick email or text with a question. The Signature Care team works with patients individually — establishing a relationship that goes beyond treating illness and extends to wellness planning, disease prevention, healthy lifestyle coaching and regular diagnostic testing. It means you can connect with your physician any time, any place. To learn more about Signature Care, its fee structure, and whether it's right for you and your family, please call **1-425-544-1000** or visit the website at www.evergreenhealthsignaturecare.com.

WORKING SPOUSE/DOMESTIC PARTNER SURCHARGE

EvergreenHealth is committed to providing our employees with medical plan coverage that respects the needs of our employees and their families. We also wish to keep the cost to employees as low as possible. If you choose to enroll your spouse/domestic partner in your medical plan coverage with EvergreenHealth and he/she is eligible for another employer's group medical plan and does not enroll, the cost to you will be \$175 per month for the "Working Spouse/Domestic Partner Surcharge" in addition to any monthly premiums.

TOBACCO USER SURCHARGE

In an effort to help our employees be their healthiest best and offset the cost of the medical plan for smoking-related illnesses, EvergreenHealth has implemented a \$75 per month Tobacco Surcharge. It will apply to any employee enrolled in a medical plan who is also a tobacco user.

If you make the decision to eliminate tobacco use, EvergreenHealth offers tobacco cessation programs to support this effort.



Hospital Indemnity Insurance

Administered by Aflac

Receive lump sum payments to help cover the cost of a hospital stay.

If you are admitted into a hospital, it doesn't take long for the out-of-pocket costs to add up. Hospital Indemnity Insurance pays lump sum benefits directly to you if you are admitted into a hospital for care due to an illness, injury or pregnancy. Benefits are paid even if you have other coverage.







You receive a benefit as soon as you are admitted and then an additional benefit based on the number of days you are confined to the hospital. The benefit increases if you are admitted and confined to an intensive care unit.

Please note: This plan is not a replacement for medical insurance.

You also receive a benefit for the following:

- Inpatient Rehabilitation
- Emergency Room (if you are admitted)
- Health Screenings (\$50/calendar year/insured)

Plan Features

-  **Additional Benefit Payouts:** Additional benefit payouts when hospitalized at an EvergreenHealth facility.
-  **Guaranteed Acceptance:** There are no health questions or physical exams required.
-  **Family Coverage:** You can elect to cover your spouse and children.*
-  **Payroll Deduction:** Premiums are paid through convenient payroll deductions.
-  **Portable Coverage:** You can take your policy with you if you change jobs or retire.
-  **Health Screening Benefit:** The plan provides a \$50 benefit per covered person per calendar year if you or your covered dependents complete a covered health screening test such as a physical exam, total cholesterol blood test, mammogram, lipid panel, and more.

*The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. *If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child.*

If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.

How Hospital Indemnity Insurance Works

Cindy is injured in a car accident and is in the hospital for four days. Cindy's medical insurance carries a \$1,800 annual deductible and a \$3,700 out-of-pocket maximum.

Even with her medical plan, Cindy's deductible and coinsurance add up to more than \$2,000 just for hospital services.

Cindy has Hospital Indemnity Insurance. She receives a benefit for being admitted into the hospital and a benefit for each day of her inpatient stay.

How Cindy's Hospital Indemnity Benefit Was Calculated:

Medical Service	Benefit	Total
Hospital Admission	\$1,500 per admission at EvergreenHealth facility	\$ 1,500
Four-day Hospital Stay	\$250 per day at EvergreenHealth facility	\$ 1,000

CINDY'S TOTAL BENEFIT **\$2,500**
at EvergreenHealth facility

The plan offered to you may provide different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you. This plan is not a replacement for medical insurance.



Health Savings Account (HSA)

Save for future medical costs and reduce your tax bill with this special savings account.


As you get older, your out-of-pocket medical expenses rise. By the time you retire, health care likely will be your largest household expense, even with Medicare. A Health Savings Account allows you to build up protection for future health care expenses. You can contribute money to your HSA and use it any time for qualified health care expenses.

Whatever you don't use rolls over for future years and in some circumstances may be invested. Better yet, HSAs provide tax advantages.



HealthEquity, [1-866-346-5800](tel:1-866-346-5800), www.healthequity.com

Important Note: The IRS sets strict rules with regards to who is eligible to open and contribute to an HSA. Please ensure you are eligible before enacting an HSA in your name. Amounts change yearly per IRS guidelines.



HSAs Deliver Triple Tax Savings

1. You don't pay federal income tax on the money you contribute
2. You don't pay taxes on the interest you earn in your account
3. You don't pay taxes when you use the money to pay for qualified medical services

Keys to Growing Your HSA:

- Try not to use your HSA for routine expenses. If you can pay out-of-pocket, leave your HSA funds alone because they may grow for when you need them in the future.
- Consider electing supplemental medical plans to cover big ticket expenses from unexpected serious injuries or accidents and ensure they don't wipe away the money in your HSA.
- Monitor your fund's growth. Your HSA funds may in some circumstances be invested. Make sure your money is growing at an acceptable and safe pace.

HOW MUCH CAN YOU CONTRIBUTE?	ANNUAL IRS CONTRIBUTION LIMIT	ANNUAL EVERGREENHEALTH CONTRIBUTION	YOUR MAXIMUM CONTRIBUTION AMOUNT
Individual Coverage	\$4,400**	\$500*	\$3,900
Family Coverage	\$8,750**	\$1,000*	\$7,750

* EvergreenHealth Employer Contributions are funded per paycheck and prorated based on your eligibility date.
 **Total IRS contribution limits for 2026 are cumulative of EvergreenHealth funding. Individuals age 55 or older can make an additional \$1,000 in "catch-up" contributions.

Dental Benefits

The dental plan through Delta Dental of Washington provides access to the national Delta Dental Preferred (PPO) network. This plan allows you to receive care from a provider of your choice. However, you will have lower out-of-pocket expenses if you see a PPO dentist. EvergreenHealth pays 100% for employee-only coverage for the core plan; you would be responsible for covering your dependents. For more information about your dental benefits or to find a provider, please visit www.deltadentalwa.com.

	CORE PLAN		BUY-UP PLAN	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Maximum	\$2,000		\$3,000	
Annual Deductible (Individual/Family)	\$50 Individual/\$150 Family		\$0	
Preventive Services Exams, Cleanings, X-rays	100%	80%	100%	80%
Basic Services Fillings, Extractions, Oral Surgery	80%	70%	80%	70%
Major Restorative Services Crowns, Bridgework, Dentures	50%	50%	50%	50%
Orthodontia (Dependent children and adults)	Not covered		50% (limited to \$3,000/lifetime maximum)	

What Does Preventive Dental Care Typically Cover?

Every dollar spent on preventive care can save you money later on procedures that are more urgent, complex, and costly.



Routine dental checkups and cleanings should be scheduled every six months. Your dentist may recommend more frequent or fewer visits, depending on your dental health history.



Professional fluoride treatments can be a key defense against cavities if you're at high risk for decay. Professional fluoride treatments have significantly more fluoride than tap water or toothpaste, and take only a few minutes to apply.



Dental sealants go a step beyond fluoride by providing a thin, plastic coating to the chewing surface of your teeth. Most dental plans cover sealants as preventive care for children under 18 on their first and second molars.



X-ray images of your mouth may be taken by your dentist or dental hygienist to better evaluate your oral health. These images go beneath the surface to provide a more detailed look inside your teeth and gums.

Vision Benefits

Vision Service Plan (VSP) provides coverage for your eye care needs and with the recent additions of UV Coating and LightCare to both the core and buy up plans, you are equipped with even more elevated choices. EvergreenHealth pays 100% for employee-only coverage for the core plan; you would be responsible for covering your dependents. For more information about your benefits or to find a VSP provider, please visit www.vsp.com.

	CORE PLAN	BUY-UP PLAN	OUT-OF-NETWORK
Eye Examination Copay (every 12 months)	\$10 copay (limit—1 every 12 months)	\$10 copay (limit—1 every 12 months)	Up to \$45
Prescription Glasses	\$25 copay	\$25 copay	
Lenses (includes single vision, bifocal, trifocal and polycarbonate lenses for children)	(limit—1 pair every 24 months)	(limit—1 pair every 12 months)	Single Vision Lenses—Up to \$45 Bifocal Lenses—Up to \$65 Trifocal Lenses—Up to \$85
UV Coating & LightCare			
Frames (includes 20% off amount over allowance)	\$150 allowance (limit—1 frame every 24 months)	\$200 allowance (limit—1 frame every 12 months)	Up to \$47
Contact Lenses* (includes contact lens exam, fitting/evaluation)	\$150 allowance (limit—every 24 months)	\$200 allowance (limit—every 12 months)	Up to \$105
*Plan allows contact lenses in lieu of glasses and frames. Extra discounts include 20% off any out-of-pocket costs on your choice of frames, discounts on laser vision correction surgery, and additional savings on lens options such as scratch resistant and anti-reflective coatings and progressives.			



5 Tips for a Lifetime of Healthy Vision

- 1. Schedule yearly eye exams.** Visiting your ophthalmologist regularly helps you see your best, protect your sight and even detect serious health conditions such as diabetes.
- 2. Protect your eyes against UV rays.** No matter what the season, it is important to wear sunglasses. When selecting and purchasing sunglasses, be sure to confirm they offer 100% UVA/UVB protection.
- 3. Give your eyes a break from digital devices.** Digital screens emit a specific type of blue and violet light which can negatively impact eye health and cause digital eye strain.
- 4. Live a smoke-free lifestyle.** Smoking increases your risk of developing macular degeneration, optic nerve damage, and cataracts.
- 5. Practice safe wear and care of contact lenses.** Keep them clean and follow your optometrist's recommendations for use and wear.

Health & Wellness Plans

Whatever your role at EvergreenHealth, you spend much of your time caring for others. And it's important to take care of yourself, too!

Be Your Healthiest Best Employee: Wellness

EvergreenHealth provides you support and access to health and wellness resources around the three pillars of health: nutrition, physical activity, and stress management. Take advantage of:

- Classes and resources to share knowledge and ideas on a range of wellness topics.
- Relaxation recordings and other opportunities to help you manage stress.
- Continued access to experts who will help you understand your health numbers (cholesterol, blood sugar and blood pressure) while partnering with you to find a model of wellness that works for you. Visit <https://ehmc.sharepoint.com/sites/healthiest-best>.

Employee Assistance Support

EvergreenHealth is partnering with Spring Health to ensure that all EvergreenHealth employees, medical staff, and their dependents can easily get mental health support whenever and wherever it's needed. With Spring Health, you have personalized, convenient care and resources to support you through any of life's challenges. This benefit will be available at no cost to EvergreenHealth employees, medical staff, and their dependents. Call **1-855-629-0554** or visit <https://evergreenhealth.springhealth.com/>.

Smoking Cessation Support

Quitting tobacco has many rewards, including improved health and saving money. EvergreenHealth supports your journey with two options:

EvergreenHealth's Smoking Cessation Program

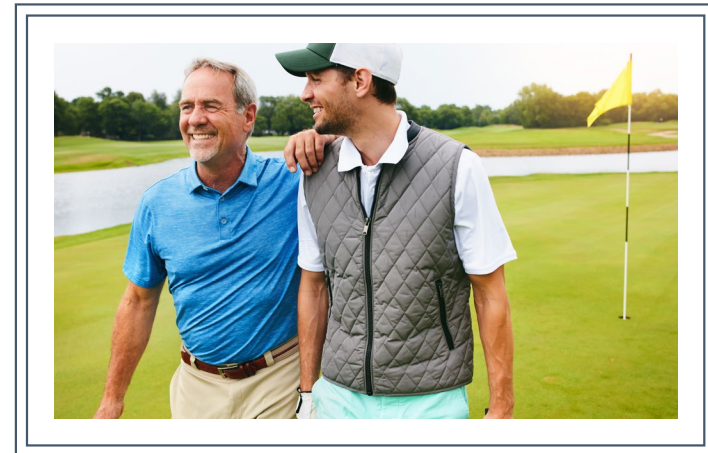
A focused, intensive, one-on-one approach to assist you with your efforts to stop smoking. The program's providers are pharmacists who focus on wellness programs and have specialized training in smoking cessation therapies. Find out more by calling **1-425-899-3796**.

Alere Wellbeing Program

Includes counseling, support and replacement therapy. We cover the full cost of the program once per year with a lifetime maximum of three times. Find out more at www.quitnow.net or call **1-866-784-8454**.

Physical Activity

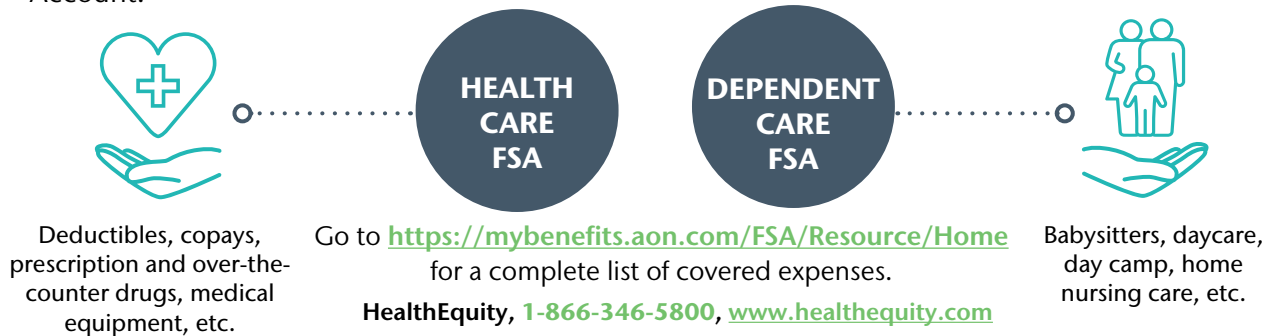
To support your physical activity goals, we've partnered with these fitness centers to offer discounts to EvergreenHealth employees: 24 Hour Fitness, Columbia Athletic Club, LA Fitness and the YMCA. Visit EverLink > Human Resources > Employee Discounts for details and enrollment information.



Flexible Spending Accounts (FSAs)

Reduce your federal tax bill while putting aside money for health and dependent care needs.

Flexible Spending Accounts (FSAs) allow you to put aside money for important expenses and help you reduce your income taxes at the same time. EvergreenHealth offers two types of Flexible Spending Accounts — a Health Care Flexible Spending Account and a Dependent Care Flexible Spending Account.



How Flexible Spending Accounts Work

1. Each year during the Open Enrollment period, you decide how much money to set aside pre-tax from your paycheck for eligible Health Care and/or Dependent Care expenses. For your Health Care FSA, your full contribution amount will be available to use on your benefit effective date. For your Dependent Care FSA, funds will be available as they accrue in your account throughout the year.
2. Your contributions are deducted from your paycheck on a pre-tax basis in equal installments throughout the calendar year.
3. As you incur health care or dependent care expenses throughout the year, use your FSA card to pay for eligible expenses at the point of sale, or submit a claim form for reimbursement if necessary.

ANNUAL MAXIMUM CONTRIBUTION	
Health Care Flexible Spending Account	\$3,400*
Dependent Care Flexible Spending Account	\$5,000 (\$2,500 if married and filing separate tax returns)



Health Care Items You Might Not Realize are FSA Eligible:

- Sunscreen
- Heating and cooling pads
- First aid kits
- Shoe inserts and other foot grooming treatments
- Travel pillows
- Motion sickness bands

Use It or Lose It: Be sure to calculate your FSA contributions carefully. The funds won't roll over from year-to-year, and to participate in a Flexible Spending Account Plan, you must enroll or re-enroll on a yearly basis. You are not automatically re-enrolled.

Please note that these accounts are separate. You may participate in one, both, or neither. You cannot use money from the Health Care FSA to cover expenses eligible under the Dependent Care FSA or vice versa.

Life Insurance

Administered by Reliance Standard

Always be there financially for your loved ones.

Your family depends on your income for a comfortable lifestyle and for the resources necessary to maintain their lifestyle and make their dreams a reality. You likely don't think of a scenario where you're no longer there for your family, but you need to ensure their future is financially secure.

EvergreenHealth knows how difficult it can be to provide this peace of mind on your own, which is why we have made it a priority to give you the ability to assemble a complete Life Insurance portfolio.

How Much Life Insurance Do You Need?

Many financial experts recommend you have at least five to eight times your household income in Life Insurance. To calculate the level sufficient to cover your needs, you should consider your current income and how much it costs to maintain your family's standard of living. You should also consider your current expenses and your family's future financial needs such as the following:

Current Expenses

- Home Mortgage
- Car Payments
- Credit Card Debt
- Other Debt

Future Needs

- Child Care
- College Tuition
- Spouse's Retirement
- Routine Household Expenses

After you add your financial responsibilities, how does the sum compare with your current coverage?

Basic Term Life and Accidental Death & Dismemberment Insurance

You are automatically insured for an amount equivalent to your annual base pay under the Basic Life Plan. The benefit is payable to your beneficiary(ies) upon your death while insured. AD&D coverage pays a lump sum to you or your designated beneficiary if you die or suffer certain injuries as the result of an accident. In the event of your death, your beneficiary(ies) receive an amount equivalent to your base pay in AD&D coverage. The amount paid for injuries varies by the type of injury.

Supplemental Life Insurance

Supplemental Life Insurance is underwritten by Reliance Standard. Supplemental Life Insurance is made available to eligible employees, their spouse/DP, and their dependent children. You choose the protection that is right for you and your family.

EMPLOYEE	Increments of \$10,000 to a maximum benefit of \$350,000.
SPOUSE/DP	Increments of \$5,000 to a maximum of \$100,000, not to exceed 50% of your supplemental life benefit.
CHILDREN	Flat \$2,000 benefit.

Rates are determined by your age and the amount of supplemental insurance requested. All enrollments or increases outside of your initial new hire period are subject to a medical questionnaire.

Supplemental Accidental Death & Dismemberment

Supplemental AD&D is made available to eligible employees, their spouse/DP and dependents. You choose the protection that is right for you and your family.

- You: Increments of \$10,000 to a maximum benefit of \$350,000.
- Your spouse/DP and child(ren): A % of your Supplemental AD&D: Spouse/DP with NO child(ren): 50%; Spouse/DP with child(ren): 40%; Child(ren) with spouse/DP: 10%; Child(ren) with NO spouse/DP: 15%



Disability Insurance

Administered by Reliance Standard

Your ability to bring home a paycheck is your most valuable asset. We help you protect it.

A disabling injury or illness that keeps you out of work could have a devastating impact on your income, jeopardizing your ability to cover normal household expenses. Disability Insurance protects a portion of your income, relieving you of the anxiety of depleting your savings to pay your bills.

Voluntary Short-Term Disability Insurance

EvergreenHealth provides benefit-eligible employees the option of enrolling for short-term disability (STD) coverage through Reliance Standard. This plan will replace a portion of your income if you become disabled due to an illness or accidental injury and cannot work.

If enrolled, you are eligible to receive STD benefits after 30 days for a qualified accident or illness. The plan pays 60% of your eligible monthly earnings up to a maximum benefit of \$2,500 per week. Payments may continue as long as you remain disabled or until you reach long-term disability (LTD).

Rates are determined by your age and your weekly short-term disability benefit. Please note that your voluntary STD benefit from Reliance Standard will be reduced by any benefits you are eligible for under Washington State Paid Family Leave.

Long-Term Disability Insurance

A base long-term disability (LTD) benefit is provided to benefit-eligible employees. Long-term disability benefits will begin for any qualified disability after 90 days. For those that also elect short-term disability (STD), LTD benefits will begin as soon as STD ends with no break in disability benefits. LTD payments may continue as long as you remain disabled or until you reach social security normal retirement age.

EvergreenHealth covered benefits will be provided at the following levels:

Supervisors and above working a minimum of 20 hours a week:

- 60% of your eligible monthly earnings up to a maximum benefit of \$15,000 per month.

All other salaried and hourly employees working a minimum of 20 hours a week:

- 40% of your eligible monthly earnings up to a maximum benefit of \$3,000 per month.

Enrollment in this base LTD coverage is automatic; no action is needed.

Voluntary Buy-Up Option

For any employee who will have a base benefit level of 40%, you have the opportunity to buy-up to a total of 60% of your monthly earnings up to a maximum benefit of \$10,000 per month. The rate for this benefit is 0.51% of covered payroll.

Retirement Plans

Administered by Fidelity Investments

Prepare for your future.

Deferred Compensation Plan: 457(b)

EvergreenHealth offers a 457(b) Deferred Compensation Plan that is available to all full-time, part-time and per diem employees. Employees may defer up to 50% of their pre-tax compensation up to an amount pre-determined by the IRS (\$23,500 for 2025). Employees over age 50 have the opportunity to defer an additional amount up to an IRS limit (\$7,500 in 2026).*

Roth 457(b)

You may designate a percentage of your paycheck to be contributed as a Roth contribution. Roth contributions are made on an after-tax basis and fall under the same IRS limits as pretax contributions to your plan, so each dollar of a Roth contribution reduces the amount that can be contributed pretax (and vice versa).

Deferred Compensation Match: 401(a)

This plan is available to all full-time and part-time employees designated to work at least 20 hours a week in a benefit-eligible status, upon completion of one year of continuous employment. Enrollment is the first of the quarter upon meeting the eligibility requirements. EvergreenHealth matches 50% of the first 8% of compensation that you defer (into the 457(b) plan), up to a total match of 4%.

*The IRS Retirement Plan limits for 2026 are not yet released. In the event they are higher than current limits, the higher limits will be recognized.

Retirement Plan: 401(a)

EvergreenHealth contributes a percentage of compensation for all full-time and part-time employees designated to work at least 20 hours a week in a benefit-eligible status, upon completion of one year of continuous employment. Enrollment is the first of the quarter upon meeting the eligibility requirements. The contribution is based on years of service:

CONTRIBUTION SCHEDULE (DEPOSITED QUARTERLY)	
Years of Service	Contributions
1-3	1% of earnings
4+	2% of earnings
5+	3% of earnings
6+	4% of earnings

VESTING SCHEDULE	
Years of Service	Vesting %
0-1	0%
1-2	20%
2-3	40%
3-4	60%
4-5	80%
5+	100%

Additional Benefits

Identity Theft Insurance

Identity Theft Protection, through NortonLifeLock, delivers peace of mind. This proactive identity monitoring service sends alerts at the first signs of fraud and restores the misuse of personal information that puts your identity at risk and is conveniently offered through payroll deductions. For more information, visit [LifeLock Official Site | Identity Theft Protection](#) or call **1-800-607-9174**.

Legal Insurance

LegalGUARD by LegalEASE: The LegalGUARD Plan is a unique and flexible insurance product, protecting employees against the high cost of legal fees. Members have access to a national network of attorneys with exceptional experience who are matched to meet specific legal needs. Members also get paid-in-full coverage on most legal matters, as well as personal guidance and coaching.

Participating attorneys assist with a wide range of legal matters, such as:

- Court Appearances
- Document Review and Preparation
- Debt Collection Defense
- Will Preparation
- Family Law
- Real Estate Matters

For more information visit www.legaleaseplan.com or call **1-800-562-2929**.

Commuter Benefits

Transit Pass for Commuters: All benefit-eligible employees may purchase an ORCA card for a discounted annual fee (paid via payroll deduction; sign up in Human Resources office). With the ORCA card, you can ride various public transportation systems, including buses and the Sounder train.

Other Commuter Benefits: Carpoolers, bikers, walkers, vanpoolers and motorcyclists may sign up for special transportation incentives in Human Resources.

Telemedicine

98point6 is an on-demand health care feature that connects you with a physician via your smartphone — which means you can get diagnosis and treatment or simply consult on a health issue or question from anywhere. So whether you're on the go, at home sick in bed or multi-tasking throughout your day, immediate care is available on your schedule.

Benefit-enrolled employees and their enrolled dependents ages 18 and older have unlimited access to 98point6 at low or no cost. Effective Jan. 1, 2026, visits are free for covered members under both the PPO and HSA medical plans.

98point6 Physicians can:

- Answer any medical questions you have (no question is too small).
 - Diagnose and treat acute and chronic illnesses.
 - Help you better understand any health conditions, including, but not limited to diabetes, asthma, back problems and high blood pressure.
- Outline care options.

Download the **98point6** by Transcarent app from the [App Store](#) or [Google Play](#) to order any necessary prescriptions or lab tests you may need.

Employee Discounts

Every employee receives a discount in the EvergreenHealth cafeteria and gift shop. Many other discounts are available for you to take advantage of. Please visit Everlink – Human Resources – Employee Discounts for a current listing of discounts available to EvergreenHealth employees.

Contact Information

BENEFIT	CONTACT	PHONE NUMBER	WEBSITE
Medical	First Choice Health Network	1-888-896-1115	www.myfirstchoice.fchn.com
Prescription Drug	MedImpact	1-844-513-6002	www.medimpact.com
Dental	Delta Dental of Washington	1-800-554-1907	www.deltadentalwa.com
Vision	Vision Services Plan	1-800-877-7195	www.vsp.com
Pharmacy	EvergreenHealth Professional Center Pharmacy	1-425-899-2790	—
Health Savings Account	HealthEquity	1-866-346-5800	www.healthequity.com
Flexible Spending Accounts	HealthEquity	1-866-346-5800	www.healthequity.com
Life Insurance	Reliance Standard	1-800-351-7500	www.rсли.com
Voluntary STD/LTD (or to report a leave)	Matrix / Reliance Standard	1-888-445-4462	www.matrixabsence.com/login
Hospital Indemnity Insurance	Aflac	1-800-433-3036	www.aflacgroupinsurance.com
Identity Theft Insurance	NortonLifeLock	1-800-607-9174	LifeLock Official Site Identity Theft Protection
Legal Insurance	LegalEASE	1-800-562-2929	www.legaleaseplan.com
Employee Assistance Program	Spring Health	1-855-629-0554	http://evergreenhealth.springhealth.com/
Retirement Plans	Fidelity Investments	1-800-343-0860	www.fidelity.com/atwork
Smoking Cessation Program	Alere Wellbeing or EvergreenHealth Smoking Cessation Program	1-866-784-8454	www.quitnow.net
		1-425-899-3796	www.evergreenhealth.com/ smoking-cessation
On-Demand Health Care	98point6	—	www.98point6.com
Long Term Care	Trustmark	1-800-918-8877	CustomerCare@trustmarkbenefits.com

For any other inquiries, contact Human Resources at **1-425-899-2511**.





NOTE: Actual plan provisions for EvergreenHealth (“the Company”) benefits are contained in the appropriate plan documents, including the Summary Plan Description (SPD) and incorporated benefit/carrier booklets. The Benefit Enrollment Guide is a summary only and does not describe each benefit option. This Benefit Enrollment Guide provides updates to your existing SPD as of the first day of the plan year, which describes your health and welfare benefits in greater detail. Until the Company provides you with an updated SPD, this guide is intended to be a Summary of Material Modification (SMM) and should be retained with your records along with your SPD. As always, the official plan documents determine what benefits are available to you. If any discrepancy exists between this guide and the official documents, the official documents will prevail. The Company reserves the right to amend or terminate any of its plans or policies, make changes to the benefits, costs, and other provisions relative to benefits at any time with or without notice, subject to applicable law.

