

2023 Staff Benefits Highlights



BENEFITS AT OU HEALTH

This document includes a high-level summary of the benefits available to employees of OU Health, and is designed to give prospective employees some insight into what your OU Health Total Rewards package has to offer. Employees have many options to choose from to create a benefits package that best meets the needs of each person and their family members.

ELIGIBILITY

Eligible full-time or part-time employees are eligible to receive OU Health's benefits package on your date of hire. Part-time employment for benefits eligibility is defined as working 16 - 29 hours per week (0.4 - 0.725 FTE).

MEDICAL AND PRESCRIPTION PLANS

BlueCross BlueShield of Oklahoma & PRIME Therapeutics

2023 Plan Comparison	PPO	HSA 1	HSA 2
Annual Plan Deductible	\$800 individual \$1,600 family	\$1,500 individual \$3,000 family	\$2,500 individual \$5,000 family
Out-of-Pocket Maximum	\$6,150 individual \$12,300 family	\$6,150 individual \$12,300 family	\$6,750 individual \$13,500 family
OU Health-Affiliated Facilities	Copay; no deductible in most cases	Lower coinsurance after deductible	Lower coinsurance after deductible
Primary Care Physician Office Visit – Routine Services	OUH: \$20 In-Network: \$30 Out-of-Network: 75%	OUH: 10% In-Network: 20% Out-of-Network: 75% after deductible	OUH: 10% In-Network: 20% Out-of-Network: 75% after deductible
Preventive Care – Office-Based	OUH & In-Network: \$0; No deductible	OUH & In-Network: \$0; No deductible	OUH & In-Network: \$0; No deductible
Prescriptions – 30 day	Generic: \$5 Brand: 20%	Generic: \$5 Brand: 20%	Generic: \$5 Brand: 20%
Prescriptions – 90 day	Generic: \$12.50 Brand: 20%	Generic: \$12.50 Brand: 20%	Generic: \$12.50 Brand: 20%
Specialty Drugs – 30 day	20%	20%	20%

\$20,000 lifetime infertility benefit available for select services, including IVF.

VISION PLANS

VSP

Vision Plan Services	Base Plan	Enhanced Plan
Exam Copay <i>(comprehensive exam with dilation)</i>	\$0	\$0
Exam / Lenses / Frame Frequency	12 / 12 / 24 months	12/12/12 months
Glasses, Contacts or Both?	Glasses OR Contacts per plan year	Glasses AND Contacts per plan year
Frame Allowance	\$150 Allowance + 20% savings on remaining frame cost	\$200 Allowance + 20% savings on remaining frame cost
Contact Lens Allowance	\$150 Allowance	\$200 Allowance

DENTAL PLANS

Delta Dental

Dental Plan Options	PPO Choice Advantage	PPO Basic	PPO Premier
Preventive/Diagnostic	Flat dollar amount per service billed*+	100%	100%
Basic Restorative		20%*	20%*
Major Restorative		50%*	50%*
Orthodontic		50%*	50%*
Per Person per Calendar Year Deductible	\$50 per person	\$75 per person	\$50 per person
Per Calendar Year Annual Maximum	\$1,500 per person	\$1,200 per person	\$2,000 per person
Lifetime Orthodontic Maximum	\$1,500 per person	\$1,500 per person	\$2,500 per person

* Per person, per benefit year deductible applies (not to exceed family maximum).

+ Employees enrolled in PPO Choice Advantage will receive a fee schedule from Delta Dental.

RETIREMENT BENEFITS

Fidelity Investments

The OU Health 401(k) Plan combines the contributions from OU Health with your own contributions to help you save for the future. OU Health provides a 100% match for each pay period you contribute (from 3% to 9% of pay) based on your years of service.* You can begin deferring to the 401(k) upon date of hire, as soon as administratively possible.

Matching Contribution*

Years of Service	Employer Match
0-2	100% of 3% of pay
3-5	100% of 4% of pay
6-8	100% of 6% of pay
9-11	100% of 7% of pay
12-14	100% of 8% of pay
15+	100% of 9% of pay

Vesting**

Years of Service	Vested Contributions to 401(K) Plan Account
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5+	100%

*Effective Jan. 8, 2023, the 401(k) employer match is suspended through June 2023 and will be re-evaluated for fiscal year 2024.

**1 year of vesting service = anniversary date to anniversary date.

PAID TIME OFF

Eligible employees begin accruing PTO hours each pay period immediately upon employment. However, the hours may not be used until the pay period during which the first 90 days of employment is completed. PTO is used for holidays, vacations, illness, injuries and short-term disability waiting periods.

Table 1 – Staff <i>effective 1/8/2023</i>		
Completed Years of Service	Annual Full-Time Hours Accrual*	Maximum Hours
0 to < 3 Years	184	240
3 to < 5 Years	224	280
5 to < 9 Years	224	320
9 to < 10 Years	256	360
10 to < 15 Years	256	400
15+ Years	272	400

Table 2 – Directors & Above <i>effective 1/8/2023</i>		
Completed Years of Service	Annual Full-Time Hours Accrual*	Maximum Hours
0 to < 3 Years	232	320
3 to < 9 Years	256	360
9 to < 15 Years	272	400
15+ Years	288	400

*To calculate hourly rate, divide annual accrual by 2,080. Accruals shown reflect hours for an employee of 1.0 FTE, as 80 hours is the maximum amount of hours worked per bi-weekly pay period eligible for PTO accrual. Effective Jan. 8, 2023, annual PTO accruals have been reduced by 32 hours through the end of calendar year 2023. The reduced accruals are reflected in the tables above.

ADDITIONAL BENEFITS

Benefits Paid by OU Health	
401(k) Company Matching Contributions* <i>Fidelity</i>	<ul style="list-style-type: none"> Up to 9% of employee deferral Percentage match based on years of service
Short-Term Disability <i>Sedgwick</i>	<ul style="list-style-type: none"> 100% salary continuation for weeks 2-6 of leave (benefit decreases incrementally weeks 7-26) 180 day maximum benefit duration, including 7 calendar day waiting period
Basic Life Insurance <i>The Hartford</i>	<ul style="list-style-type: none"> 1.5x annual base salary (staff) or 2x annual base salary (directors and above)
Basic Accidental Death and Dismemberment (AD&D) Insurance <i>The Hartford</i>	<ul style="list-style-type: none"> 1.5x annual base salary (staff) or 2x annual base salary (directors and above)
Employee Assistance Program (EAP) <i>SupportLinc through CuraLinc Healthcare</i>	<ul style="list-style-type: none"> Available 24/7 to assist you and your family in times of need Expert legal and financial consultation and concierge services available Up to seven (7) confidential counseling sessions per employee and household members per event
Paid Time Off (PTO)	<ul style="list-style-type: none"> Accrues throughout the year based on hours worked Ability to roll over hours year to year up to a maximum accrual based on years of service
Adoption Assistance	<ul style="list-style-type: none"> \$3,500 to \$4,500 reimbursement per child (\$7,000 annual maximum) One year employment eligibility for full-time; two years and 20 hours worked per week for part-time
Tuition Reimbursement	<ul style="list-style-type: none"> \$5,250 reimbursement per calendar year upon completion of 90 days employment
Leave of Absence Management <i>Sedgwick</i>	<ul style="list-style-type: none"> FMLA (continuous or intermittent), non-FMLA, military and educational leave options 12 weeks per year of paid parental leave for care of biological newborn, adoption or foster child care. Must have at least one year of service and either full-time or part-time status to be eligible.
Relocation Assistance <i>UrbanBound</i>	<ul style="list-style-type: none"> Relocation benefit that can be billed directly to OU Health's supplier network for a variety of moving-related expenses
Benefits Paid by OU Health and You	
Medical and Prescription Drug <i>Blue Cross/Blue Shield of Oklahoma and Prime Therapeutics</i>	<ul style="list-style-type: none"> Choice of three medical plan options with prescription drug coverage
Health Savings Account (HSA) <i>Optum Financial</i>	<ul style="list-style-type: none"> Triple tax-advantaged account (pre-tax deduction, non-taxed withdrawals, and non-taxed account investments) to use toward qualified healthcare expenses OU Health contributes up to \$500 (individual) or \$1,000 (family) on a prorated, quarterly basis
Benefits Paid by You	
Vision <i>VSP</i>	<ul style="list-style-type: none"> Two vision plan options
Dental <i>Delta Dental</i>	<ul style="list-style-type: none"> Choice of three dental PPO plan options
Flexible Spending Accounts (FSAs) <i>Optum Financial</i>	<ul style="list-style-type: none"> Pre-tax payroll deductions to use toward medical, dental, vision, prescription, and/or dependent care expenses Limited Purpose FSA: pre-tax payroll deductions to use toward dental and vision expenses only. Must be enrolled in High Deductible Health Plan (HDHP) with HSA.
Voluntary Life Insurance <i>The Hartford</i>	<ul style="list-style-type: none"> In addition to basic life insurance, up to 5x annual base salary for full-time employees (\$15,000 flat amount (part-time)) Portability option
Dependent Life Insurance <i>The Hartford</i>	<ul style="list-style-type: none"> Spouse coverage up to \$75,000 for full-time/\$7,500 for part-time Child coverage up to \$10,000 for full-time/\$5,000 for part-time
Voluntary AD&D Insurance <i>The Hartford</i>	<ul style="list-style-type: none"> In addition to basic AD&D insurance, up to 5x annual base salary for full-time employees (\$15,000 flat amount (part-time)) Portability option
Long-term Disability <i>The Hartford</i>	<ul style="list-style-type: none"> Choice of three options: 50%, 60% or 66 2/3% of base salary (excludes part-time employees)
Voluntary Benefit Options <i>Corestream</i>	<ul style="list-style-type: none"> Home, auto and pet insurance, identity theft protection, critical illness, hospital indemnity and accident insurance, legal assistance, additional life insurance, and shopping discounts
Childcare & Family Plan Services <i>Bright Horizons</i>	<ul style="list-style-type: none"> Emergency back-up childcare for in-home, center-based or care within your personal network. Special co-pays apply per care option.