Nemours Benefits 2021 ANNUAL ENROLLMENT

Nemours.

NEMOURS BENEFITS: KEY DATES AND LOG-IN INSTRUCTIONS

WHEN

The Annual Enrollment period will begin on THURSDAY, OCT. 22 and end on TUESDAY, NOV. 10, 2020 at 11:59 p.m. CT

WHERE

Go to www.nemoursbenefits.com from any computer (at home or at work) with internet access. From a smartphone or iPad, go to www.nemoursbenefits.bswift.com.

HOW

LOG-IN PROCESS – OUTSIDE THE NEMOURS NETWORK

Use these instructions if you are not using single sign-on (see page 3). Most of you will be RETURNING USERS. If you have never accessed the portal, you are a NEW USER and have been assigned a username and default password that you will be able to change once you are in the system.

RETURNING USERS:

- 1. Go to http://www.nemoursbenefits.com.
- 2. Enter your Username and Password. NOTE: Your Username is your Nemours network username (the username you use each day to log on to the Nemours network) and your Password is the password you previously established.
- 3. Click on the "Log In" button.
- 4. If you have forgotten your Password, click on the "Forgot Password" link and follow the instructions on the screen. If you experience any difficulties, call (855) 373-6012 for assistance.

NEW USERS:

- 1. Go to http://www.nemoursbenefits.com.
- 2. Enter your Username and Password. NOTE: Your Username is your Nemours network username (the username you use each day to log onto the Nemours network). Your initial Password is the last four digits of your Social Security Number.
- 3. Click on the "Log In" button.
- 4. You will be asked to change your Password and prompted to set up and answer security questions.

Questions?

Contact the Nemours bswift Benefits Center, Monday – Friday, 8.a.m. to 8 p.m. ET at (855) 373-6012 or email nemoursbenefits@bswift.com.

Important Information and Reminders

Single Sign-On

Accessing the Benefits portal is now easier than ever. If you are signed on to the Nemours network at work or if you are logged in through Connect2 at home, simply click on the Nemours Benefits Enrollment link and you are in, without having to enter another username or password. You can find the links to the Benefits portal on the HR pages of NemoursNet, in Workday (HR Self Service) or on Nemours.org. If you are not accessing the portal through the Nemours network, follow the log-in instructions on the inside cover of this newsletter.

Annual Enrollment Video and Reference Sheets

No time to attend an Information Session? Confused by "insurance speak" and overwhelmed by too much information? Then, be sure to check out the associate-friendly Annual Enrollment video, posted on the Benefits portal home page. In about 15 minutes, bswift's Emma will cover what you need to know for the 2021 benefits enrollment. You will also find handy reference sheets online to alert you to what's new and what you need to do to complete your 2021 benefits enrollment.

bswift Customer Service Center

Representatives from the Nemours bswift Customer Service Center are ready and eager to assist you with your enrollment questions. You can reach them at (855) 373-6012 or by email at nemoursbenefits@bswift.com. During Annual Enrollment, the Nemours bswift Benefits Center is open Monday through Friday, from 8 a.m. to 8 p.m. ET.

Dependent Verification Process

If you are adding a dependent to the Nemours benefits plans for the FIRST time, you will be asked to provide documentation such as a birth or marriage certificate to verify their eligibility. This requirement is not new. When you complete your enrollment, you will be able to upload a document verification form and your documents right to the bswift Benefits portal. You don't need to do it when you enroll, but keep in mind that your dependents will not be enrolled with the carriers until the required documentation is supplied and eligibility approved. The deadline to submit documentation to bswift is December 31, 2020.

Reminders and Helpful Hints

- Annual Enrollment will end Tuesday, Nov. 10, 2020 at 11:59 p.m. CT.
- If you **don't** go through the enrollment process, your 2020 elections will carry over into 2021, EXCEPT for the following situations:
 - You will need to make a new Flexible Spending Account pledge to continue the benefit for 2021 (Health Care, Limited Purpose, Dependent Care, Parking or Transportation).
 - If you have a **Health Savings Account** in 2020, your enrollment will carry over but you will need to elect a new contribution amount for 2021.
 - If you have a **status change or life event** in the last quarter of 2020 (during or after Annual Enrollment), you will need to make benefits elections for both 2020 and 2021 for your benefits changes to carry over for 2021. You may make both of these elections either through the enrollment portal or by contacting the Nemours bswift Benefits Center for assistance.
- You may make changes to your benefits elections during the enrollment period but be sure to click on "I agree and I'm finished with my enrollment" to complete the enrollment process. If you fail to complete this final step, your changes will NOT be saved for 2021.
- Watch for a confirmation statement from bswift after the enrollment period ends. bswift will send it to you by mail and by email (if you have agreed to accept electronic communications) with instructions on how and when to make corrections if needed.
- Benefits elected during Annual Enrollment will be effective Jan. 1, 2021 (except those requiring insurance company approval).

What's New for 2021?



In planning for 2021, Nemours began to lay the groundwork for a multi-year strategy that will ensure our associate benefits plans and programs are sustainable and deliver the best mix of high-quality care and services while remaining cost effective for associates and the organization. Our strategic considerations include elements of value-based care and the evolving needs of our associates.

For 2021, there are numerous positive changes that will provide more features, deliver better care and drive deeper engagement in our benefits plans and wellness program. As the cost of health care continues to rise, we have worked very hard to manage those costs. There will be some cost structure changes the details of which can be found in this newsletter.

Plan Change Highlights for 2021 include:

- Aetna's new One Flex program to support acute and chronic care management;
- a new, lower premium cost Critical Illness benefit tier;
- pediatric telehealth services will be available exclusively from CareConnect on the Nemours App while adult telehealth services will be available through Amwell;
- wellness program enhancements and a new portal in partnership with our new vendor Allura Health.

We will update the deductible for the Red Medical plan to be \$500/\$1,000 (Associate Only / Associate Plus) and its out-of-pocket maximum to \$4,000/\$8,000. The Blue Medical plan's out-of-pocket maximum will be changed to \$4,000/\$8,000. These changes will help ensure those plans remain financially viable for both the associate and Nemours.

We will be transitioning YOURHealth wellness offerings to Allura Health in 2021. Be on the lookout for more news from the YOURHealth team regarding this change.

Finally, any out-of-network medical claims will be billed using the 140% Medicare Fee Schedule.

Health Plan Costs

Annual Enrollment offers an opportunity to share updated information about the cost of the Nemours health plan. The average annual cost per associate has increased from \$14,511 in April 2019 to \$15,258 in April 2020 (costs prior to suppression of care due to the COVID-19 pandemic). Some of the key drivers of this trend include an increase in the cost of emergency room visits and inpatient admissions, higher specialty pharmacy cost, increased medical pharmacy utilization and costs such as chemotherapy and treatments for auto-immune conditions, and an increase in the number of high-cost claimants. Even though our health plan performance is in line with the industry trend of 5 to 6 percent, our health plan costs continue to increase and represent a sizeable portion of the Nemours operating budget. We project that our total health plan expense will be \$101.2 million for the 2021 plan year.

Remember, taking an active role in your own health care can help keep costs down:

- ask about the price of services and talk with your doctor about treatment options;
- use generics and compare pharmacy pricing;
- use urgent care or telemedicine instead of the emergency room; and
- take advantage of wellness resources to stay healthy.

Medical and Prescription Drug Plans

There are some important highlights and changes to the Medical and Prescription Drug plans for 2021.

Payroll Contributions

For full-time associates, an increase in associate payroll contributions for the Adult Medical/Rx plans will depend on the enrolled plan: 0.5% for the Red plan, 3.5% for the Blue plan, and an 8.3% increase for the White and Green plans. These increases are reflective of the plan changes described earlier. The increase in "With Wellness" payroll contributions for full-time associates' medical coverage ranges from \$1.22 to \$14.54 per month, depending on your plan option and coverage level. Dental plan contributions will increase, on average, by 3.5% ranging from a \$0.62 to \$2.06 increase per month, depending on your coverage level.

The 2021 payroll contribution for the *Bridge to a Healthy Future* plan will increase by \$25 from \$70 per month to \$95 per month (or to \$47.50 semi-monthly); regardless of the number of children you have enrolled on the plan. Despite this increase, the Bridge plan remains a unique, competitive and valuable component of our benefits package compared to other organizations.

Premium costs for all Supplemental Life plans (employee, spouse and child) and Voluntary AD&D will remain unchanged. Payroll contributions for other benefits such as Vision, Long Term Disability and other voluntary group benefits are also remaining at their 2020 levels.

Read on to learn more about 2021 benefits coverages.



2021 YOURHealth Wellness Program



Comprised of three areas – Employee Health, Wellness and Fitness – the Nemours YOURHealth Wellness program is a holistic approach to supporting a variety of needs associates may have on their journey to achieving optimal health including physical, emotional and social well-being.

For 2021, programming and support for YOURHealth will include a new user-friendly and robust wellness portal with mobile app access, new wellness challenges, health coaching, free biometric screenings and a plethora of wellness resources on a variety of topics.

A few notes about the current YOURHealth Wellness program:

- Associates who complete the two required activities (an Annual Physical or a Preventive Visit and either a MeQuilibrium Skill or a Wellness Challenge) by Nov. 30, 2020 will earn discounted Medical plan premiums for the 2021 plan year.
- Associates hired on or after September 1, 2020 will receive the "With Wellness" rate through the remainder of 2020 and throughout 2021.
- When you access your benefits record during Annual Enrollment, you will see the "With Wellness" medical contribution rates. This will change to the "Without Wellness" medical rate in January if you fail to complete your required activities by the deadline of November 30, 2020.

Don't miss out on this chance to save hundreds of dollars on your medical insurance premiums.

Other Important Benefits Plan Reminders



As you go through Annual Enrollment, keep the following in mind:

- Flexible Spending Accounts:
 - You must re-enroll to participate in Flexible Spending Accounts each year, even if you want the same amount withheld. This also applies to Transportation Accounts.
 - The Dependent Care Account is for daycare expenses, not for your family's health care expenses.
 - If you are highly compensated, as defined by the IRS, contributions to the Dependent Care Account may be limited or amended mid-year as a result of federally required non-discrimination testing.
- If you enroll in the Legal plan, you are required to stay in the plan for the entire calendar year unless you terminate or have a status change to a non-benefits eligible position.
- You may enroll (subject to insurance company approval) in Long Term Care any time during the year by contacting the insurance company directly (you cannot enroll through the online benefits system).
- Transamerica Retirement plan benefits are NOT part of the Annual Enrollment. You may enroll or make changes to your 403(b), 457(b) or 401(k) contributions at any time during the year.

Review Your Benefits Choices

Annual Enrollment gives you the opportunity to review your benefits to ensure your elections are continuing to meet your needs and the needs of your family. This newsletter focuses on what is changing for 2021. If you need detailed information about each of the plans, refer to the 2021 Benefits Guide and benefits booklets on NemoursBenefits.com (see the Home Page and the Library tab) or on NemoursNet. We also encourage you to review the Summaries of Benefits and Coverage (SBCs) intended to help you compare and understand the health plan options available to you.

Enrollment is Your Responsibility

Benefits are very important. Each associate is responsible for reviewing the information provided by Nemours so that you may make an informed decision about your benefits.

About a week after the Annual Enrollment period ends, you will receive a confirmation statement from bswift that shows your benefits elections for 2021. The purpose of this confirmation statement is to give you one last chance to review your benefits to make sure you have elected the benefits you want for 2021.



Please check your confirmation statement carefully. If you need to make changes, there will be a five-day correction period for you to make any final changes to your benefits for 2021. Instructions and the dates of the correction

period will be included on your confirmation statement. The correction period will be your ONLY opportunity to make changes for next year unless you have a qualified life event during the year.

Status Changes and Qualified Life Event Reminder

Don't forget that if you have a status change or qualified life event (QLE) after your 2021 benefits go into effect, you may be able to make changes to your elections mid-year within 60 days of the QLE. Examples of qualified life events include marriage, divorce, birth or adoption, and loss of coverage.

If you have a QLE, you can now change your benefits online from the Life Event link on your Home Page of NemoursBenefits.com. For more information, refer to the Life Event Enrollment Guide posted on NemoursNet.

2020 Compliance Information

Women's Health and Cancer Rights

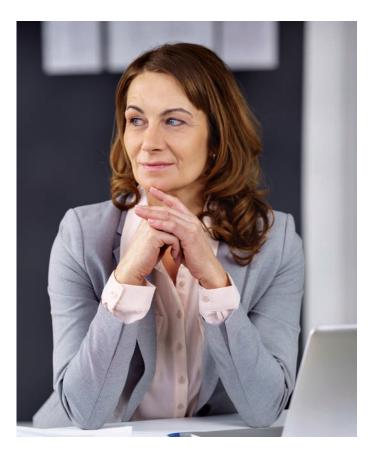
If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- all stages of reconstruction of the breast on which the mastectomy was performed;
- surgery and reconstruction of the other breast to produce a symmetrical appearance;
- prosthesis; and
- treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under our health plan. If you would like more information on WHCRA benefits, call bswift at (855) 373-6012.

Notice of Availability of Notice of Privacy Practices

The Nemours Group Health Plan (the "Plan") provides health benefits to eligible employees of Nemours (the "Company") and their eligible dependents as described in the summary plan description(s) for the Plan. The Plan creates, receives, uses, maintains and discloses health information about participating employees and dependents in the course of providing these health benefits. The Plan is required by law to provide notice to participants of the Plan's duties and privacy practices with respect to covered individuals' protected health information and has done so by providing to Plan participants a Notice of Privacy Practices, which describes the ways that the Plan uses and discloses protected health information. To receive a copy of the Plan's Notice of Privacy Practices you should contact Terence Barfield, who has been designated as the Plan's contact person for all issues regarding the Plan's privacy practices and covered individuals' privacy rights. You can reach the contact person at: 10140 Centurion Parkway North, Jacksonville, FL 32256 or (904) 697-5656.



Imputed Income Reminder

Employers are required by the IRS to apply imputed income when calculating income taxes for any employer-provided life insurance in excess of \$50,000, as the value of these benefits is taxable to the employee. For more information, email benefits@nemours.org.

Medicare Part D Annual Notice

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Nemours and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. Nemours has determined that the prescription drug coverage offered by the Nemours plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

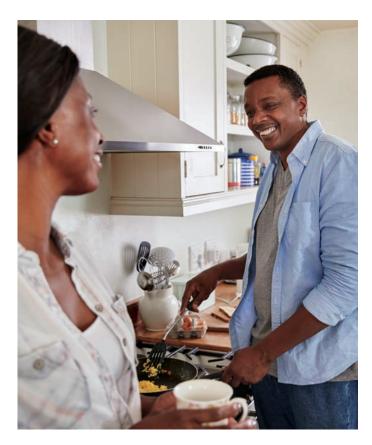
You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15 through December 7. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two-month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage if You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Nemours coverage will not be affected. Your Nemours plan will be primary and Medicare secondary.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Nemours, and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.





If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1 percent of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without Creditable Coverage, your premium may consistently be at least 19 percent higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice or Your Current Prescription Drug Coverage

Contact the person listed below for further information. Note: you'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Nemours changes.

You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare Prescription Drug Coverage:

- Visit www.medicare.gov.
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help.
- Call (800) MEDICARE or (800) 633-4227, TTY users should call (877) 486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at (800) 772-1213, tty users should call (800) 325-0778.



Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: October 2020

Name of Entity/Sender: Nemours

Contact-Position / Office: Terence Barfield, Benefits Manager

Address: 10140 Centurion Parkway North

Jacksonville, FL 32256

Phone Number: (904) 697-5656

SUMMARY ANNUAL REPORT FOR NEMOURS FOUNDATION EMPLOYEE WELFARE BENEFIT PLAN

This is a summary of the annual report of the Nemours Foundation Employee Welfare Benefit Plan, a health, life insurance, dental, vision, temporary disability, prepaid legal and long term disability plan (Employer Identification Number (EIN) 59-0634433, Plan Number 513) for the plan year Jan. 1, 2019 through Dec. 31, 2019. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Nemours Foundation has committed itself to pay certain Medical, Prescription and Short-Term Disability claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with Delta Dental of Delaware, MetLife Legal Plans, United of Omaha Life insurance Company, Reliance Standard Life Insurance Company, Metropolitan Life Insurance Company, Unum Life Insurance Company of America, Vision Service Plan and Life Insurance Company of North America to pay certain dental, legal, temporary disability, long term disability, life insurance, accidental death and dismemberment (AD&D), critical illness insurance, accident, hospital indemnity, long term care and vision claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2019 were \$11,081,062.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The item listed below is included in that report:

 Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Rodney McKendree, who is a representative of the plan administrator, at 10140 Centurion Parkway North, Jacksonville, FL 32256 and phone number, (904) 697-5648.



You also have the legally protected right to examine the annual report at the main office of the plan at 10140 Centurion Parkway North, Jacksonville, FL 32256, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs.

Requests to the Department should be addressed to:

Public Disclosure Room, Room N-1513 Employee Benefits Security Administration U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, D.C. 20210

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol. gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires June 30, 2022)

Nemours complies with applicable Federal civil rights laws and does not discriminate on the basis of race,color, national origin, age, disability or sex.

Language services are available at no cost. If you need assistance, please contact Nemours Benefits and we will provide you with an interpreter.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **www.healthcare.gov.**

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll inyour employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2020. Contact your state for more information on eligibility.

ALABAMA - Medicaid	KANSAS - Medicaid
Website: http://myalhipp.com Phone: (855) 692-5447	Website: http://www.kdheks.gov/hcf/default.htm Phone: (800) 792-4884
ALASKA - Medicaid	KENTUCKY - Medicaid
The AK Health Insurance Premium Payment Program Website: http://myakhip.com Phone: (866) 251-4861 Email: CustomerStervice@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	Kentucky Integrated Health Insurance Premium Payment Program Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: (855) 459-6328 Email: KIHIPP.PROGRAM@ky.gov KCHIP Website: https://kidshealth.ky.gov/Pages/index.aspx Phone: (877) 524-4718 Kentucky Medicaid Website: https://chfs.ky.gov
ARKANSAS - Medicaid	LOUISIANA - Medicaid
Website: http://myarhipp.com Phone: (855) MyARHIPP (855-692-7447)	Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp Phone: (888) 342-6207 (Medicaid Hotline) or (855) 618-5488 (LaHIPP)
CALIFORNIA - Medicaid	MAINE - Medicaid
Website: https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_cont.aspx Phone: (916) 440-5676	Enrollment Website: https://www.maine.gov/dhhs/ofi/applications-forms Phone: (800) 442-6003 TTY: Maine Relay 711 Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applications-forms Phone: (800) 977-6740 TTY: Maine Relay 711
COLORADO - Health First Colorado (Medicaid) & Child Health Plan Plus (CHP+)	MASSACHUSETTS - Medicaid and CHIP
Health First Colorado Website: https://healthfirstcolorado.com/ Health First Colorado Member Contact Center: (800) 221-3943 / State Relay 711 CHP + Website: https://Colorado.gov/Pacific/HCPF/Child-Health-Plan-Plus CHP + Customer Service: (800) 359-1991/State Relay 711 Health Insurance Buy-In Program Website: https://www.colorado.gov/pacific/hcpf/ health-insurance-buy-program Health Insurance Buy-In Program Customer Service: (855) 692-6442	Website: http://www.mass.gov/eohhs/gov/departments/masshealth/ Phone: (800) 862-4840
FLORIDA - Medicaid	MINNESOTA - Medicaid
Website: https://www.flmedicaidtplrecovery.com/flmedicaidtplrecovery.com /hipp/index.html Phone: (877) 357-3268	Website: https://www.mn.gov/dhs/people-we-serve/children-and-families/ health-care/health-care-programs/programs-and-services/other-insurance.jsp Phone: (800) 657-3739
GEORGIA - Medicaid	MISSOURI - Medicaid
Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: (678) 564-1162 ext. 2131	Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: (573) 751-2005
INDIANA - Medicaid	MONTANA - Medicaid
Healthy Indiana Plan for low-income adults 19-64 Website: http://www.in.gov/fssa/hip/ Phone: (877) 438-4479 All other Medicaid Website: https://www.in.gov/medicaid/ Phone: (800) 457-4584	Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: (800) 694-3084
IOWA - Medicaid and CHIP	NEBRASKA - Medicaid
Medicaid Website: https://dhs.iowa.gov/ Hawki Website: http://dhs.iowa.gov/Hawki ime/members Phone: (800) 338-8366 Phone: (800) 257-8563	Website: http://www.ACCESSNebraska.ne.gov Phone: (855) 632-7633 Lincoln: (402) 473-7000 Omaha: (402) 595-1178

NEVADA - Medicaid	SOUTH CAROLINA - Medicaid
Medicaid Website: http://dhcfp.nv.gov Medicaid Phone: (800) 992-0900	Website: https://www.scdhhs.gov Phone: (888) 549-0820
NEW HAMPSHIRE - Medicaid	SOUTH DAKOTA - Medicaid
Website: https://www.dhhs.nh.gov/oii/hipp.htm Phone: (603) 271-5218 Toll free number for the HIPP program: (800) 852-3345 ext. 5218	Website: http://dss.sd.gov Phone: (888) 828-0059
NEW JERSEY - Medicaid and CHIP	TEXAS - Medicaid
Medicaid Website: http://www.state.nj.us/humanservices/dmahs/ clients/medicaid/ Medicaid Phone: (609) 631-2392	Website: http://www.gethipptexas.com/ Phone: (800) 440-0493
CHIP Website: http://www.njfamilycare.org/index.html	UTAH - Medicaid and CHIP
CHIP Phone: (800) 701-0710 NEW YORK - Medicaid	Medicaid Website: https://medicaid.utah.gov/ Phone: (877) 543-7669 CHIP Website: http://health.utah.gov/chip
Website: https://www.health.ny.gov/health_care/medicaid/	VERMONT - Medicaid
Phone: (800) 541-2831	
NORTH CAROLINA - Medicaid	Website: http://www.greenmountaincare.org/ Phone: (800) 250-8427
Website: https://medicaid.ncdhhs.gov Phone: (919) 855-4100	VIRGINIA - Medicaid AND CHIP
NORTH DAKOTA - Medicaid	Website: http://www.coverva.org/hipp/
Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: (844) 854-4825	Medicaid Phone: (800) 432-5924 CHIP Phone: (855) 242-8282
OKLAHOMA - Medicaid and CHIP	WASHINGTON - Medicaid
Website: http://www.insureoklahoma.org Phone: (888) 365-3742	Website: http://www.hca.wa.gov/ Phone: (800) 562-3022
OREGON - Medicaid	WEST VIRGINIA - Medicaid
Medicaid: http://www.healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Medicaid: (800) 699-9075	Website: http://mywvhipp.com/ Phone: (855) MyWVHIPP (855-699-8447)
PENNSYLVANIA - Medicaid	WISCONSIN - Medicaid
Website: http://www.dhs.pa.gov/providers/Providers/Pages/ Medical/HIPP-Program.aspx Phone: (800) 692-7462	Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: (800) 362-3002
RHODE ISLAND - Medicaid and CHIP	WYOMING - Medicaid
Website: http://www.eohhs.ri.gov/ Phone: (855) 697-4347 or (401) 462-0311 (Direct RIte Share Line)	Website: https://health.wyo.gov/healthcarefin/medicaid/programs-and- eligibility/ Phone: (800) 251-1269

To see if any other states have added a premium assistance program since July 31, 2020, or for more information on special enrollment rights, contact either:

U.S. Department of Labor	U.S. Department of Health and Human Services
Employee Benefits Security Administration	Centers for Medicare & Medicaid Services
www.dol.gov/agencies/ebsa	www.cms.hhs.gov
(866) 444-EBSA (3272)	(877) 267-2323, Menu Option 4, Ext. 61565

PAPERWORK REDUCTION ACT STATEMENT

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512. The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

IMPORTANT PHONE NUMBERS

Benefit	Carrier	Phone Number
Log-In and Enrollment Questions	Nemours bswift Benefits Center	(855) 373-6012
Medical (Adult and Bridge Plans)	Aetna	(855) 878-4195
Prescription Drug (Adult and Bridge Plans)	Express Scripts	(844) 394-2932
Dental	Delta Dental	(800)932-0783
Vision	VSP	(800)877-7195
Legal Plan	MetLaw (Hyatt Legal)	(800) 821-6400
Health Advocacy	Health Advocate	(866)695-8622
Flexible Spending Accounts (FSA)	PayFlex	(844)729-3539
Health Savings Account (HSA)	PayFlex	(844)729-3539
Accident, Critical Illness and Hospital	MetLife	(800)438-6388
Indemnity		(800) GET-MET8
Identity Theft Protection	InfoArmor	(800)789-2720
Long Term Care	UNUM	(800)227-4165
Life Insurance Plans	Reliance Standard	(800) 351-7500
Certified Financial Planners	Financial Finesse	(877)234-1782
EAP	Resources For Living	(855) 506-2373



Available Through the Benefits Portal Home Page

Don't Forget to "Ask Emma"

Ask Emma is an interactive decision support tool — and so much more! She can help you make an informed and personalized decision across the range of Nemours benefits offerings.

- Take the guesswork out of benefits enrollment.
- Explore Emma's FAQs and cost calculator to find the plans that best fit you and your family.
- Personalized cost comparisons by health needs.
- Model future health scenarios for the whole family.
- Translate insurance jargon into easy-to-understand explanations.

Emma will also host the associate-friendly Annual Enrollment video, posted on the Benefits portal home page. She will cover everything you'll need to know for 2021 Annual Enrollment in about 15 minutes.

2021 FULL-TIME ASSOCIATE PAYROLL CONTRIBUTIONS: MEDICAL, DENTAL and VISION

MEDICAL and RX – WITH Wellness	Monthly				
	Red	Blue	White	Green	
Associate Only	\$242.70	\$174.26	\$103.32	\$63.44	
Associate & Child(ren)	N/A	N/A	N/A	\$80.92	
Associate & Spouse*	\$441.08	\$317.42	\$189.48	\$122.04	
Associate & Family	N/A	N/A	N/A	\$187.70	

MEDICAL and RX – WITHOUT Wellness	Monthly				
	Red	Blue	White	Green	
Associate Only	\$303.38	\$217.84	\$129.16	\$79.30	
Associate & Child(ren)	N/A	N/A	N/A	\$101.16	
Associate & Spouse*	\$551.36	\$396.78	\$236.86	\$152.56	
Associate & Family	N/A	N/A	N/A	\$234.64	

MEDICAL and RX – WITH Wellness	Semi-Monthly				
	Red	Blue	White	Green	
Associate Only	\$121.35	\$87.13	\$51.66	\$31.72	
Associate & Child(ren)	N/A	N/A	N/A	\$40.46	
Associate & Spouse*	\$220.54	\$158.71	\$94.74	\$61.02	
Associate & Family	N/A	N/A	N/A	\$93.85	

MEDICAL and RX – WITHOUT Wellness	Semi - Monthly				
	Red	Blue	White	Green	
Associate Only	\$151.69	\$108.92	\$64.58	\$39.65	
Associate & Child(ren)	N/A	N/A	N/A	\$50.58	
Associate & Spouse*	\$275.68	\$198.39	\$118.43	\$76.28	
Associate & Family	N/A	N/A	N/A	\$117.32	

Note: The contribution rates shown above DO NOT include the spousal surcharge. Also, newly-eligible or newly-enrolled associates pay the "With Wellness" rates for the remainder of the current calendar year.

BRIDGE TO A HEALTHY FUTURE PLAN	Monthly	Semi-Monthly
Dependents until the end of the month in which they turn 26 years old	\$95.00	\$47.50

DENTAL		Monthly		Semi-Monthly		
	Red	Blue	White	Red	Blue	White
Associate Only	\$30.30	\$18.26	\$6.44	\$15.15	\$9.13	\$3.22
Associate & Child(ren)	\$58.62	\$37.68	\$10.28	\$29.31	\$18.84	\$5.14
Associate & Spouse*	\$53.30	\$32.16	\$11.36	\$26.65	\$16.08	\$5.68
Associate & Family	\$95.56	\$60.98	\$18.70	\$47.78	\$30.49	\$9.35

VISION	Mon	thly	Semi-Monthly		
	Premium	Base	Premium	Base	
Associate Only	\$8.14	\$5.24	\$4.07	\$2.62	
Associate & Child(ren)	\$17.41	\$11.20	\$8.71	\$5.60	
Associate & Spouse*	\$16.28	\$10.47	\$8.14	\$5.24	
Associate & Family	\$27.86	\$17.92	\$13.93	\$8.96	

For the 2021 payroll contributions for other benefits, please go to the online benefits portal at www.nemoursbenefits.com.



NemoursBenefits.com

10140 Centurion Parkway North Jacksonville, Florida 32256

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