MAGNOLIA PHYSICIAN SERVICES BENEFIT SUMMARY Effective 01/01/2023

BENEFITS	PAID BY	COST PER PAY PERIOD	FT	NOTES	DESCRIPTION
Health Insurance -Trustmark Health Benefits Core Plan	Plan self-insured by Employer; Deductions shown paid by Employee	FULL-TIME Employee - \$10.00 Emp+child(ren) - \$82.00 Emp+Spouse - \$92.00 Family - \$127.00	Effective 1st of the month after eligibility date. Open Enrollment - (Oct-Nov -all benefits) Changes effective January 1.	Full-Time 36+ hours per week	TSPO: Physician's Office \$25.00 Copay, Inpatient Visit - \$300.00 deductible. Pays at 90%, Outpatient Visit -\$300.00 Deductible. Pays at 100%. Baptist: Physician's Office - No Copay, \$950.00 Deductible. Pays at 70%. Out of Network: Physician's Office No copay, \$2,400.00 deductible. Pays at 50%. All deductibles per person per calendar year, 3 family members max. Note: With an "Out of Network Referral" form, (People Page - Shared Documents) benefits will be paid at TSPO level, for services are not available in TSPO.
Prescription Coverage		Included w/Health	Effective w/Health insurance.		Generic Brand - Copay is \$7.00 Name Brand - Copay is the greater of \$20.00 or 25%.
Flexible Spending Account - Dependent Child Care - Trustmark Health Benefits	Fees paid by Employer; Contributions by Employee	Contribution determined by employee (FSA \$3,050.00 annual max - DCC \$5000.00 annual max)	Eligible 1st of the month after 90 days of employment.		
Health Insurance -Trustmark Health Benefits High Deductible Health Plan	Plan self-insured by Employer; Deductions shown paid by Employee	FULL-TIME Employee - \$7.50 Emp+child(ren) - \$77.00 Emp+Spouse - \$87.00 Family - \$117.00	Effective 1st of the month after eligibility date. Open Enrollment - (Oct- Nov -all benefits) Changes effective January 1.	Full-Time 36+ hours per week	No co-pays. All Services TSPO \$2,500/\$5,000 deductible. Pays at 90%, Baptist PPO - \$3,000/\$6000 Deductible. Pays at 70%. Out of Network: \$6,000/\$18,000. Pays at 50% per calendar year
Prescription Coverage		Included w/Health	Effective w/Health insurance.		90% after deductible
Health Savings Account		Employee maximum contribution with plan level elected: Employee: \$3,850.00 Employee + Child(ren) or Employee + Spouse: \$7,750.00 Family: \$7,750.00	Eligible 1st of the month after 90 days of employment.		
Dental Insurance - Sun Life	Employee	Single - Option 1 \$15.89 Single - Option 2 \$19.32 Family - Option 1 \$47.70 Family - Option 2 \$51.28	Effective 1st of the month after eligibility date	Class A & B - Preventive & Basic Procedures - No Waiting Period Class C - Major pocedures - 6 months Class D - Orthodontics - 12 months	Preventative: No deductible, 100% 2 visits per calendar year. Covered procedures: \$50 deductible per calendar year, 3 family members max; Basic plan 80% \$1000 annual max; Enhanced Plan 80% \$1500 annual max. Orthodontics: life time benefit, Basic plan \$1,000: Enhanced plan \$1,500
Vision - VSP	Employee	Emp - \$5.40 Emp + Spouse - \$8.65 Emp + Child (ren) - \$8.82 Emp + Family - \$14.25	Effective 1st of the month after eligibility date		Exam & lenses every 12 mos., Frames every 24 mos. or Contacs every 12 mos., Co-Pay is \$10.00 on Exams & \$15.00 on glasses.

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Group Life Insurance - Sun Life	Employer - pays employee coverage. Employee - pays for dependant coverage	Dependent coverage - \$1.42 1st pay period of the month	Effective 1st of the month after eligibility date. (90 days of employment required.)		Employees life benefit - 1 X Annual Salary up to \$250,000.00. Dependent coverage benefit - Spouse \$5,000, Children - \$2,500 ea.
Long Term Disability - MetLife	Employer		Effective 1st of the month after eligibility date. (90 days of employment required.)	90 days	Pays 60% of employee's salary after an employee has to be off longer than 3 months for a disability. \$7,500/\$15,000 monthly max
Retirement - 401a	Employer	4% gross earnings (max \$12,200 per calendar year) Additional 2% (max \$6,100)w/457b participation	Effective 1st day of next quarter for new hire employees / immediate (with eligibility) for current employees	Vesting 4 years - 25% per calendar year (1,000 hours required.)	
Retirement - 457B	Employee	% selected by employee (4% min for additional 2% in 401a) \$22,500 max under 50 years of age; \$30,000 50+	Effective 1st day of next quarter for new hire employees / immediate (with eligibility) for current employees		
Supplemental Life - Sun Life	Employee	Determined by employee	Effective 1st of the month after eligibility.	Guaranteed issue up to 200k when 1st available. Approval by company for later enrollment requests	This is term life insurance and is offered on an individual basis to new hires and during open enrollment in December.
Cancer - Sun Life	Employee	Determined by employee	Effective 1st of the month after eligibility.		
Accident - MetLife	Employee	Determined by employee	Effective 1st of the month after eligibility.		
Critical illness - MetLife	Employee	Determined by employee	Effective 1st of the month after eligibility.		
Hospital Indemnity - MetLife	Employee	Determined by employee	Effective 1st of the month after eligibility.		
Short Term Disability - MetLife	Employee	Determined by employee	Effective 1st of the month after eligibility.	Elimination period according to plan selected	
E.A.P.	Employer		Eligible		E.A.P., (Employee Assistance Program) is a free service for all employees and their immediate family members for counseling.
DIRECT DEPOSIT	N/A	N/A			Mandatory. Failure to provide required imformation will result in suspension.
PTO (FT ONLY)	Employer		Days per calendar year - Medical Residents 1: 14 days; Medical Residents 2 & 3 and Cardio Fellows: 21 days; Physicians, NPs & Administrators: 30 days. Additional days for Education and Business		