

Benefits for Your Life

2022 Benefits Guide



DR
DESERT RADIOLOGY
a radiology partners practice



Medicare Part D Notice: If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see the Annual Notices in the back of this guide for more details.

Our teammate benefits program offers health coverage options. To help you make an informed choice and compare your options, a Summary of Benefits and Coverage (SBC) is available on [rpbenefits.com](https://www.rpbenefits.com) which summarizes important information about your health coverage options in a standard format. A paper copy is available by emailing benefits@radpartners.com.

A list of plan contacts is included at the back of this guide.

The benefits in this summary are effective 1/1/2022 through 12/31/2022

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Benefits for Your Life



This guide is about your benefits, but it's also about you and how to protect your health, your lifestyle, your future, and the people who are important to you. You'll find details about your healthcare, life, disability and retirement benefits and tips on how to use your benefits. You will also discover the programs that Radiology Partners provides to help you save time and money, and balance your work and home life.

Your Eligibility for Benefits

- **Full-time teammates** are eligible to enroll in our benefits program on the first of the month following the start of their employment. Most full-time teammates must work an average of at least 30 hours per week to be eligible for benefits. Full-time teammates are eligible for all benefit plans.
- **Part-time teammates** who have a change in status to full-time are eligible for benefits the first of the month following the day they become full-time.

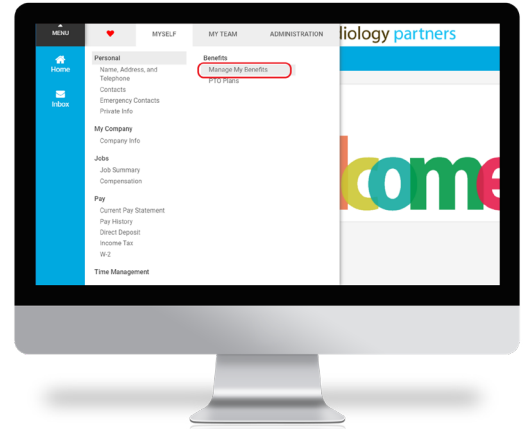
Your Eligible Dependents

- Legally married spouse (including same-sex spouse) or registered domestic partner. Domestic partners are not currently recognized by the IRS as dependents. Therefore, the premiums you pay for your domestic partner are deducted from your paycheck on a post-tax basis.
- Natural, adopted, or step children up to age 26.
- Tax dependents over age 26 who are disabled and dependent on you for support.
- Children named in a Qualified Medical Child Support Order (QMCSO) as defined by federal law.

Family members such as parents, grandparents and siblings who are not your tax dependents as described above are not eligible for coverage.

Enroll Online

1. To register, go to <https://n35.ultipro.com/Login.aspx>
2. Enter your full, practice specific Radiology Partners email address as the username (ex. dougie.howser@radpartners.com)
3. Password: Your date of birth as: mmddyyyy
4. Follow the prompts to receive and enter an access code, change your password, and establish security questions (when prompted to change your password at this step, your 'current password' is your DOB)
5. Once registered, login and navigate to Menu > Myself > Manage My benefits (as seen in the photo on the right)



Enrolling Your Family Members

The plan may require you to submit proof that your spouse/domestic partner or child qualifies as a dependent when you enroll them in the plan for the first time, whether as a new teammate or during open enrollment. Periodically, the plan may require proof that your spouse/domestic partner or child continues to qualify as your dependent.

Making Changes to Your Benefits

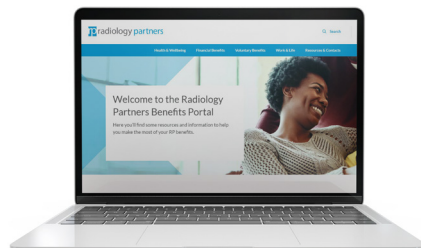
Once you choose your benefit options, you cannot make changes or additions until our annual open enrollment unless you have a qualifying life event. Teammates have 30 days from the date of a qualifying life event to add, change or terminate dependent coverage during a non-open enrollment period. The date of the actual marriage, divorce, birth, death, loss of other coverage or any other eligible qualifying life event is the date from which the 30 days begins.

If you do not add, change or terminate elections during the 30 days, you will have to wait until the next plan year's open enrollment or experience another qualifying life event.

Need More Information?

Use the Radiology Partners benefits website to learn more about your plans. On the website you have a access to:

- Benefits Guides
- Annual Notices
- Benefit Summaries
- and more!



Visit rpbenefits.com.

Eligible Events Include:

- Marriage
- Divorce or Annulment
- Dissolution of Domestic Partnership
- Legal Separation
- Birth of a dependent
- Adoption/placement for adoption
- Gain of other coverage
- Loss of other coverage

If you have any questions about what constitutes a qualifying life event or supporting documentation, please contact radiologypartners@alliant.com.

Make Good Health a Priority



Medical Coverage Your Benefits, Your Choice

You've got choices when it comes to medical coverage. It's important to weigh all your options and choose a plan that sets you up for success. Enrolling in healthcare can be complicated, and making the wrong selection could mean taking a significant financial hit as a result.

Which Medical Plan Is Right for You?

- **Do you prefer to pay more up front for coverage and pay a lower deductible when you need care?** You may want to choose a lower deductible plan with the understanding that you pay more in premiums each pay period regardless of whether you need healthcare services.
- **Do you prefer to pay less up front for coverage, and a higher deductible when you need healthcare services?** If so, you may want to choose a plan with a lower premium per pay period and consider putting additional funds into your Health Savings Account (HSA) to pay for healthcare services when needed.
- **Do you prefer to save money for future healthcare expenses?** If so, you may choose a plan that allows you to open an HSA and build your account balance with practice contributions as well as your own.

Medical Plan Highlights

Radiology Partners offers different medical plans for different needs and budgets. Here's an overview of how each type of plan works.

HPN Solutions HMO	<p>A Health Maintenance Organization (HMO) plan limits coverage to care from doctors who work for or contract with the network. It generally won't cover out-of-network care except in an emergency.</p> <p>Here's how HMO plans work:</p> <ul style="list-style-type: none">• You choose a network primary care provider (PCP) from Health Plan of Nevada's HMO provider directory. PCPs are the leaders of your healthcare team and help coordinate your specialty care.• There is no deductible to meet before your plan shares in the cost of care and you will pay predictable copays for most services and prescriptions.
SHL Solutions PPO	<p>A Preferred Provider Organization (PPO) plan is a health plan that has contracts with a network of physicians and other medical professionals from which you can select a provider.</p> <p>Here's how PPO plans work:</p> <ul style="list-style-type: none">• You do not need to select a primary care physician and you do not need referrals from that physician to see other providers in the network.• If you receive care from a doctor in the preferred network, you will only be responsible for any applicable copays, deductible and/or coinsurance based on the type of care received.• If you receive health services from a doctor or hospital that is not in the preferred network (known as "out-of-network") you will pay a higher amount. In some cases you will need to pay the non-preferred provider directly and file a claim to receive reimbursement.
SHL Solutions HSA PPO	<p>High Deductible Health Plans are also known as consumer-driven health plans, these plans have a structure similar to a PPO plan – providing you access to the same network of providers – but they give you more control over your out-of-pocket costs.</p> <p>Here's how HDHPs work:</p> <ul style="list-style-type: none">• HDHP plans offer lower per-paycheck premiums in return for a higher annual deductible compared to the PPO or HMO plans.• You must first meet your deductible before the plan's coverage begins. However, in-network preventive care, such as an annual well visit, is covered 100% without copays and without requiring you to pay your deductible.• If you are enrolled in the SHP Solutions HSA PPO plan and eligible, Radiology Partners makes a semi-annual contribution to your Health Savings Account (HSA). See Health Savings Account (HSA) Basics on page 11 for details on how your HSA can help you save on medical costs now and in the future.• You must enroll in an HSA to receive the Radiology Partners contribution and be able to have a tax-advantaged account for saving your money for qualified health-related expenses.

Medical Plan Comparison Chart

	HPN Solutions HMO	SHL Solutions PPO	SHL Solutions HSA PPO
Coverage	In-network only	In-network	In-network
HSA /HRA Funding	None	None	Yes; \$750 for Individual and \$1,500 for Family coverage to HSA
Annual Deductible	None	\$1,500 Individual* \$3,000 Family*	\$3,000 Individual* \$6,000 Family*
Annual Out-of-Pocket Maximum	\$6,250 Individual* \$12,500 Family*	\$5,000 Individual* \$10,000 Family*	\$3,000 Individual* \$6,000 Family*
Outpatient Services			
Preventive care	No charge	No charge	No charge
Primary Care / Specialist Office Visits	Office Visit: \$25 copay/visit Specialist: \$50 copay/visit	Office Visit: \$25 copay/visit Specialist: \$40 copay/visit	\$0 copay after deductible*
Virtual Visit	\$0 copay /visit via NowClinic®	\$0 copay /visit via NowClinic®	\$0 copay /visit via NowClinic® after deductible
Urgent Care	\$30 copay/visit	\$25 copay/visit	\$0 copay after deductible*
Emergency Room	\$250 copay/visit + 20%*	\$200 copay/visit + 20%*	\$0 copay after deductible*
Diagnostic Lab and X-ray	Free-standing facility: \$10 copay/visit; Outpatient Hospital: \$35 copay/visit	Free-standing facility: 10% after deductible; Outpatient Hospital: \$25 copay after deductible + 10%	Free-standing facility: 20% after deductible; Outpatient Hospital: \$25 copay after deductible + 20%
Outpatient Hospital	Physician: \$75 copay/surgery; Facility: \$150 copay	Physician/Facility: 20% after deductible ^{1*}	\$0 copay after deductible ^{1*}
Inpatient Hospitalization	Physician: \$150 copay/surgery; Facility: 20%*	Physician/Facility: 20% after deductible ^{1*}	\$0 copay after deductible ^{1*}
Other Services			
Outpatient Mental Health/Substance Abuse	\$25 copay	\$25 copay ¹	\$0 copay after deductible ^{1*}
Inpatient Mental Health/Substance Abuse	20% *	20% after deductible ^{1*}	\$0 copay after deductible ^{1*}

¹ 50% reduction if no prior authorization

* of EME (Eligible Medical Expense)

Note: For Out-of-Network coverage and more details including limitations and exclusions please contact Human Resources for a Summary Plan Description. See [page 10](#) for **Prescription Drug** coverage information.

Know Where to Go When You Need Care

Type of Care	Appropriate for	Examples	Access	Average Cost*
24/7 Advice Nurse	Quick answers from a trained nurse or healthcare professional	<ul style="list-style-type: none"> Identifying symptoms Deciding if immediate care is needed Home treatment options and advice 	24/7 Call: (800) 288-2264, TTY 711	\$0
NowClinic® Online Visit	Minor illnesses and conditions	<ul style="list-style-type: none"> Common cold, flu, fever Headache, migraine Skin conditions Allergies Sinus infections 	24/7 nowclinic.com or via the NowClinic® app	No charge
Office Visit	Routine medical care and overall health management	<ul style="list-style-type: none"> Preventive care Illnesses, injuries Managing existing conditions 	During regular office hours Find a provider on healthplanofnevada.com or call (800) 288-2264	\$75
Urgent care, Walk-in clinic	Non-life-threatening conditions requiring prompt attention	<ul style="list-style-type: none"> Stitches Sprains Animal bites Ear-nose-throat infections 	Hours vary by location, up to 24/7	\$125
Emergency room	Life-threatening conditions requiring immediate medical expertise	<ul style="list-style-type: none"> Suspected heart attack or stroke Major bone breaks Excessive bleeding Severe pain Difficulty breathing 	24/7	\$500 and up

* Average out-of-pocket cost after deductible. Your cost may vary depending on your plan and location.

\$0 Virtual Care with NowClinic®

Download the app and start a visit anytime. **NowClinic®** is available 24/7. Go to [NowClinic.com](https://nowclinic.com) or get the NowClinic® app and sign up. Choose a provider. The average wait time is 5 - 7 minutes. Behavioral health therapy is available by appointment only. Call Behavioral Healthcare Options at **(702) 364-1484** or toll-free **(800) 873-2246**, TTY 711, to arrange a convenient time.

Convenience and Savings

From Your OptumRx Pharmacy Benefits

OptumRx works with your health plan to get you the prescription medications you need. At the pharmacy, use your OptumRx ID card instead of your medical plan ID card. OptumRx's Mail Order Pharmacy helps you manage refills and gives you convenient options for obtaining up to a 90-day supply of maintenance medications commonly used to treat chronic illnesses or long-term conditions such as asthma, diabetes, blood pressure and arthritis. You can have it delivered to your home (or other preferred address) or pick it up at your network pharmacy of choice.

Tips for Using Your Prescription Drug Benefits:

- You will pay lower copays at in-network retail pharmacies.
- You can go to any participating retail pharmacy.
- Search for a pharmacy in your area by registering on [optumrx.com](https://www.optumrx.com).

	HPN Solutions HMO	SHL Solutions PPO		SHL Solutions HSA PPO	
Retail (30-Day Supply)	In-network	In-network	Out-of-network	In-network	Out-of-network
Prescription Drug Deductible	N/A	N/A	N/A	Included in medical deductible	
Generic (Tier 1)	\$25 copay	\$25 copay	30% *	0% after deductible	0% after deductible
Preferred Brand Name (Tier 2)	\$50 copay	\$50 copay	30% *	0% after deductible	0% after deductible
Non-Preferred (Tier 3)	\$75 copay	\$75 copay	30% *	0% after deductible	0% after deductible
Specialty	Applicable tier copay	Applicable tier copay	N/A	0% after deductible	0% after deductible
Mail Order (90-Day Supply)					
Generic (Tier 1)	\$62.50 copay	\$62.50 copay	30% *	0% after deductible	no coverage
Preferred Brand Name (Tier 2)	\$125 copay	\$125 copay	30% *	0% after deductible	no coverage
Non-Preferred (Tier 3)	\$187.50 copay	\$187.50 copay	30% *	0% after deductible	no coverage
Specialty	Applicable tier copay	Applicable tier copay	N/A	0% after deductible	no coverage

* of EME (Eligible Medical Expenses)

Tax-Free Health Accounts

Health Savings Account (HSA)

A Health Savings Account (HSA) is an easy way to pay for healthcare expenses that you have today and save for expenses you may have in the future. You must be eligible and enrolled in our **SHL Solutions HSA PPO** plan. You can use the money in your account to pay for eligible medical, dental and vision costs — for yourself and your dependents. Think of it as a retirement account for your healthcare expenses.

How the HSA Works

- Your HSA account is set up automatically after you enroll in the SHL Solutions HSA PPO plan.
- To help you get started, **Radiology Partners makes a contribution* to your HSA**, up to **\$750** for individual coverage and up to **\$1,500** for family coverage.
- You can contribute up to the limit set by the IRS (includes practice contribution amount).
 - **Individual: \$3,600 per year**
 - **Family: \$7,200 per year**
- If you are age 55+ you can contribute an additional \$1,000 per year.
- You can use your HSA debit card to pay for eligible expenses like office visits, lab tests, prescriptions, dental and vision care, over-the-counter medications, feminine care products and even certain drugstore items.

* 50% of your annual contribution from Radiology Partners will be deposited in your HSA on January 1 and the remaining 50% will be deposited on July 1. New teammates hired after 1/1 will receive prorated contribution beginning the first of the month following medical benefit effective date.

Find Out More About Eligible Expenses

- [Eligible expenses](#)
- [Ineligible expenses](#)

Four Reasons to Love an HSA

1. **It's tax-free.** No federal tax on contributions, or state tax in most states. Withdrawals are also tax-free as long as they're for eligible healthcare expenses.
2. **No "use it or lose it."** Your balance rolls over from year to year. You own the account and can continue to use it even if you change medical plans or leave the practice.
3. **Use it now or later.** Use your HSA for healthcare expenses you have today or save it to use in the future.
4. **Boosts retirement savings.** After you turn 65, you can use your HSA for healthcare expenses tax-free, or for regular living expenses, taxable but no penalties.

Using Your VitaFlex HSA

Once you have signed up for the SHL Solutions HSA PPO plan, an HSA with **VitaFlex** will be opened on your behalf. You will receive an email from **VitaFlex** acknowledging your enrollment. Please follow the directions to access your account online. The full website allows you to:

- Check current balances
- View statements and tax documents
- Request reimbursements
- Set up, realign and view investment details
- Contribute additional funds

Are You Eligible? You're eligible only if you are:

1. Enrolled in the SHL Solutions HSA PPO.
2. Not enrolled in other non-HDHP medical coverage, including Medicare, Medicaid, or Tricare.
3. Not a tax dependent of someone else.
4. Not enrolled in a Healthcare Flexible Spending Account (FSA), unless it's a "limited purpose" FSA for dental and vision expenses.

Healthcare Flexible Spending Account (FSA)

A Healthcare FSA allows you to set aside tax-free money to pay for healthcare expenses you expect to have over the coming year. You use the funds in your FSA to pay at the time of service or reimburse yourself after those expenses occur. You are not eligible to enroll in an FSA plan if you are enrolled in an HSA, but you can participate in a Limited Purpose FSA to save pre-tax funds for eligible dental and vision expenses.

How the Healthcare FSA Works

You estimate what you and your family's out-of-pocket costs will be for the coming year and set aside pre-tax dollars to pay for your eligible expenses throughout the year. Think about what out-of-pocket costs you expect to have such as office visits, surgery, dental and vision expenses, prescriptions, over-the-counter medications, feminine care products and even certain drugstore items.

How the Limited Purpose FSA Works

Money is set aside from your paycheck before taxes are taken out. You can use FSA dollars to pay for eligible vision or dental expenses throughout the plan year. You save money on expenses you're already paying for like dental checkups, vision exams and eyeglasses.

Annual Contribution Limits

You can contribute a minimum amount of **\$240** and up to **\$2,750**, the annual limit set by the IRS. Contributions are deducted from your pay pre-tax, meaning no federal or state tax on that amount.

Find Out More About Your FSA

- [Eligible Expenses](#)
- [Ineligible Expenses](#)
- vitaflex.net

Are You Eligible?

You don't have to enroll in one of our medical plans to participate in the Healthcare FSA. However, if you or your spouse are enrolled in a HSA-eligible health plan (like our SHL Solutions HSA PPO) you can only participate in the "limited purpose" FSA for dental and vision expenses.

Estimate Carefully and Don't Forget to Re-Enroll During Open Enrollment!

If you don't spend all the money in your account, you can **roll over up to \$550** to use the following year. Any additional remaining balance will be forfeited. You must enroll and make new elections annually during open enrollment to participate.

Pay With Your FSA

- Use your Vita Flex FSA debit card for approved expenses at the time of service.
- You can incur eligible expenses any time during the calendar year.
- You will have until March 31, 2023 to submit claims incurred in 2022.
- Complete a Flexible Spending Reimbursement claim form with an itemized receipt or bill that indicates the date and type of service(s) and the amount to be reimbursed. For more information, visit vitaflex.net.



Compare Health Account Features

	HSA	Healthcare FSA	Limited Purpose FSA
Medical plan enrollment	SHL Solutions HSA PPO; You may not have other non-HDHP coverage.	Non-HSA-eligible medical plans.	HSA-eligible medical plans.
Eligible expenses	Medical, dental, vision, prescription and over-the-counter expenses.	Medical, dental, vision, prescription and over-the-counter expenses.	Dental and vision care expenses.
Practice funding	Up to \$750 for individual and up to \$1,500 for family coverage.	\$0	\$0
Annual contribution limit	\$3,600 individual or \$7,200 family, including practice funds. Extra \$1,000 allowed after age 55.	Minimum of \$240 up to a maximum of \$2,750	Minimum of \$240 up to a maximum of \$2,750
Federal and state tax	No federal tax. CA and NJ do not exclude HSA contributions from income.	None	None
Funds are available	After deposit	Day 1 of plan year	Day 1 of plan year
Account balance earns interest	Yes, plus investment options after \$2,000.	No	No
Allows rollover to next year	Yes, unlimited.	You may carryover \$550 each year; additional unused funds are forfeited.	You may carryover \$550 each year; additional unused funds are forfeited.
Deadline for reimbursement	N/A; unused funds remain in your account for future expenses.	Eligible expenses must be incurred by Dec 31, 2021. Claims must be submitted by March 31, 2022.	Eligible expenses must be incurred by Dec 31, 2021. Claims must be submitted by March 31, 2022.
If you leave the practice	Your account goes with you for future eligible expenses, tax-free.	You can spend your balance if you elect COBRA.	You can spend your balance if you elect COBRA.

Want to Save Up to 30% on Medical, Dental and Vision Costs?

Using a health account saves you money because you can pay your healthcare bills with tax-free dollars! There are different accounts for different situations and needs. Each type of account has its own eligibility requirements and rules.

Dependent Care Flexible Spending Account (FSA)

A Dependent Care Flexible Spending Account (FSA) can help families save potentially hundreds of dollars per year on day care. This program is administered by [VitaFlex](#).

Here's How the Dependent Care FSA Works

You set aside money from your paycheck, before taxes, to pay for work-related day care expenses. Eligible expenses include not only child care but also before and after school care programs, preschool and summer day camp for children under age 13. Tuition beyond kindergarten is not eligible unless it is classified as a special need due to handicap. The account can also be used for day care for a spouse or other adult dependent who lives with you and is physically or mentally incapable of self-care.

You can set aside up to \$5,000 annually, or up to \$2,500 if you are married and filing single. You can pay your dependent care provider directly from your FSA account, or you can submit claims to get reimbursed for eligible dependent care expenses you pay out of pocket.

Estimate Carefully!

You can't change your FSA election amount mid-year unless you experience a qualifying event. Money contributed to a Dependent Care FSA must be used for expenses incurred during the same plan year. Unspent funds will be forfeited.

Examples of Eligible Expenses

- Licensed nursery schools
- Qualified childcare centers
- Adult day care facilities
- After school programs
- Summer camps for dependents under age 13
- Preschool tuition

This list is not meant to be all-inclusive. For a complete list of qualified dependent care expenses see [IRS Publication 503](#).

Commuter Flexible Spending Account (FSA)

Do you have out-of-pocket commuting expenses for public transportation, van pooling or for worksite parking? If so, you can save on taxes by enrolling in our transportation savings account, administered by [VitaFlex](#).

The account lets you set aside money—before it's taxed—through payroll deduction. You may enroll in or stop this program at any time. Money in the account can be used in future months or plan years. Set aside up to \$270 per month for work-related parking expenses and up to \$270 per month for work-related commute expenses. If you participate in this program, you'll have a lower tax obligation at the end of the year.

How the Commuter FSA Works

- You can set aside a minimum of \$10 and maximum of **\$270 for parking** and a minimum of \$10 and a maximum of **\$270 for transit** each month.
- When you enroll, you will receive a debit card from VitaFlex to pay for the costs of your transportation

Examples of Eligible Expenses

- Trains
- Metro
- Bus
- Subway
- Vanpool
- UberPOOL and Lyft Line (in certain areas)
- Parking at or near work

Something

to Smile About



Dental Coverage

Your dental plan through MetLife makes good dental health easy and affordable. Your dental plan covers preventive, basic and major services for eligible full-time teammates and their eligible dependents.

MetLife Dental		
	In-Network	Non-Network
Annual deductible	Preventive: None \$50 individual / \$150 family	Preventive: None \$50 individual / \$150 family
Annual plan maximum	\$2,500	\$2,500
Preventive services X-rays Office/Visits/Exams Cleanings/Prophylaxis (1 time every 6 months)	100%	100%
Basic services Fillings Root canals Oral surgery Periodontics Endodontics	80%	80%
Major services Crowns, Bridges, & Prosthetics	50%	50%
Orthodontia services (Adults and children) Lifetime maximum Benefit	\$1,000 50%	\$1,000 50%

Find a Dental Provider
[metlife.com/dental](https://www.metlife.com/dental)





Vision Coverage

Keep your vision sharp with vision coverage through Vision Service Plan (VSP). You can receive vision services in the VSP network or outside of the VSP network. You will be reimbursed at a lower rate outside of the network, while your out-of-pocket costs will be less when you receive care inside the network.



Radiology Partners Vision Plan		
	In-Network	Non-Network
Exam Coverage	\$20 copay	Up to \$45
Single lenses	\$20 copay	Up to \$30
Bifocal lenses	\$20 copay	Up to \$50
Trifocal lenses	\$20 copay	Up to \$65
Frame coverage	\$130 allowance	Up to \$70
Medically necessary contacts	Covered in full	Up to \$210
Elective contacts	\$130 allowance	Up to \$105
Frequency Exam Lenses Frames Contacts	12 months	12 months

Find a Vision Provider

vsp.com

Here's Looking

at You

Life and AD&D Insurance

Life insurance can fill a number of financial gaps for a family recovering from the death of a loved one. Without enough life insurance, many families have to reduce their standard of living after the loss of an income. Consider your current and future financial needs when evaluating how much coverage you need. The most common short and long-term financial needs include:

- Medical bills and funeral expenses
- Living expenses for the surviving family (housing, food, clothing, utilities, etc.)
- Large expenses, e.g., college education or home mortgage
- Taxes and debts that need to be settled

Practice-Provided Basic Life and AD&D

Radiology Partners provides a comprehensive life insurance and accidental death & dismemberment (AD&D) plan through Prudential for teammates in the event that a death or accident occurs while you're employed by RP.

Hourly Teammates	\$50,000 benefit
Salaried Teammates	1x annual salary up to \$500,000* or flat \$50,000 benefit

*A note about taxes: A life insurance benefit over \$50,000 is considered a taxable benefit. You will see the value of the benefit over \$50,000 included in your taxable income on your paycheck and W-2. If you want to opt out of the full benefit and to eliminate the imputed income, you can elect a flat \$50,000 life benefit.

Make sure that you have named a beneficiary for your life insurance benefit, and update it if your family or marital status changes.

Voluntary Life and AD&D

Radiology Partners offers eligible teammates the opportunity to purchase additional life and AD&D insurance benefits for themselves, their spouse/domestic partner and their child(ren). You will pay the cost of coverage through after-tax payroll deductions. You must first elect voluntary insurance for yourself to elect spouse/domestic partner or child coverage. Spouse/Child coverage cannot exceed the coverage amount for yourself.

Teammate	\$10,000 increments up to 5x base annual earnings up to \$500,000. Guaranteed Issue is \$250,000.
Spouse/Domestic Partner	\$5,000 increments to a maximum of \$250,000. Guaranteed Issue is \$100,000.
Child(ren)	Up to \$10,000. Guaranteed Issue is \$10,000.

When you are in your initial enrollment period, you may elect coverage up to the Guaranteed Issue (GI) amount without providing Evidence of Insurability (EOI), also referred to as a health status questionnaire. If you elect more than the GI, you must complete an EOI and have the amount that exceeds the GI approved by Prudential.

If you waive your election for voluntary coverage in the initial enrollment period or during open enrollment, you may still apply at any point in the future if you change your mind; however, you will be required at that time to complete the EOI process and the GI amount no longer applies. Currently enrolled Employees only may increase coverage by any plan increment up to \$50,000 (not to exceed the guarantee issue limit of \$250k), without evidence of insurability. Elected amounts in excess of \$50,000 or any amount in excess of the plan guarantee issue limit is subject to evidence of insurability. Prudential will not grant coverage until it receives your EOI and issues an approval.



Disability Insurance

Most people underestimate their likelihood of being disabled at some point in their life. Disability insurance replaces part of your pay while you are unable to work so you have a continuing income for living expenses.

Practice-Provided Short Term Disability

For limited duration issues such as:

- Pregnancy issues and childbirth recovery
- Prolonged illness or injury
- Surgery and recovery time

Short Term Disability (STD) is a benefit that can help supplement your income during a period of disability. It pays a benefit if you temporarily can't work because of an injury, illness or pregnancy.

Weekly benefit amount	60% of covered weekly earnings up to a maximum of: <ul style="list-style-type: none">• \$1,000 for Hourly, Salaried, Directors and Managers• \$2,500 for Physicians, Officers and Executives
Benefits begin	After 14 days of disability due to accident or sickness
Maximum payment period	Up to 11 weeks

Practice-Provided Long Term Disability

For longer term issues such as:

- Debilitating illness (cancer, heart disease, etc.)
- Serious injuries (accident, etc.)
- Heart attack, stroke, mental disorders

Long Term Disability (LTD) insurance is paid by the practice. It provides a monthly income during a period of disability lasting up to age 65.

Monthly benefit amount	60% of covered monthly earnings up to a monthly maximum of: <ul style="list-style-type: none">• \$20,000 for Physicians• \$15,000 for Officers• \$6,250 for all other teammates
Benefits begin	After 90 days
Maximum payment period	Social Security normal retirement age (The age at which disability begins may affect duration of benefits.)

Practice-Provided Individual Disability Insurance

Desert Radiology provides all employees with Individual Disability Insurance (IDI) at no cost to you. IDI acts as a supplement to your Long-Term Disability (LTD) coverage by providing you with income over and above your regular LTD benefit. You will either be covered under Unum or under MetLife depending on your position at Desert Radiology. Please contact Human Resources if you are unsure which insurance carrier covers you. No medical examination is required if you enroll when you are first eligible. You must enroll in this benefit directly with the carriers; you cannot enroll via the bswift portal.

How to Enroll in MetLife IDI: Technologists, hourly employees and certain salaried employees can enroll by visiting **online.metlife.com** and either enter your login information if you have an existing account or select "Register Now" to create one. If registering, choose "MetLife benefits through an employer or association." After you create an account, you will see a notification on your "My Accounts" page that you are eligible for Supplemental IDI benefits. Click on "Learn More" and then "Apply Now." You will be asked to verify eligibility, enter other disability coverage you carry, and identify a beneficiary.

If you need help with any steps of this process, please call **(866) 363-8669** Monday through Friday, 5 am to 5 pm Pacific Time.



Benefits That Fit

Your Lifestyle and Needs

Employee Assistance Program (EAP)

Personal problems, planning for life events or simply managing daily life can affect your work, health and family. GuidanceResources is a company-sponsored service that is available to you at no cost, to provide confidential support, resources and information to get through life's challenges. From counseling to financial consulting, the EAP is sure to have a resource for anything you need. Best of all, it's completely confidential, free and available to any member of your immediate household. Contact GuidanceResources for assistance at anytime, 24/7.

Phone: **(800) 311-4327** | TDD: **(800) 697-0353**
Web: **guidanceresources.com** | Web ID: **MGR311**

Confidential Counseling on Personal Issues

Your EAP is a confidential assistance program to help address the personal issues you and your dependents are facing. A GuidanceConsultantSM is available to listen to your concerns and refer you to a local provider for in-person counseling or to resources in your community. Call any time with personal concerns, including:

- Depression
- Stress and anxiety
- Marital and family conflicts
- Substance abuse
- Grief and loss
- Job pressures

Online Will Preparation, Final Arrangements and Legal Resources

You may complete a legally binding will or plan your final arrangements online through EstateGuidance[®] at no cost to you. When a legal issue arises, our attorneys are available to provide confidential support. If you require representation, you can be referred to a qualified attorney in your area for a free 30-minute consultation with a 25% reduction in customary fees thereafter. Call with issues such as:

- Civil lawsuits
- Divorce and family law
- Real estate transactions
- Landlord and tenant issues

Beneficiary Financial Counseling

FinancialPoint[®] provides no-cost financial planning assistance to beneficiaries with an approved life claim or teammates with an approved Accelerated Benefit Option claim. Your beneficiary may call or go online to receive a welcome kit containing helpful information and a questionnaire, which may be completed via the form provided or online. Upon completion of the questionnaire, a personalized financial planning report will be prepared. In addition, your beneficiary will receive one year of access to financial professionals through a toll-free number.

Online Information, Tools and Services

Create an account on **GuidanceResources[®] Online** to get assistance with issues from personal or family concerns to legal and financial concerns. You can:

- Review in-depth HelpSheetsSM
- Get answers to specific questions
- Search for services and referrals



401(k) Retirement Savings Plan

Our 401(k) retirement savings plan offered by **Charles Schwab** helps you save for retirement. The plan offers tax savings now through pre-tax contributions and/or tax savings after you retire through a Roth after-tax option. Visit the Charles Schwab website at workplace.schwab.com to manage your account, investments and contributions. Schwab offers a variety of quality investment options. You'll also have access to special services such as automatic account rebalancing and personal investment assistance from a licensed investment counselor.

Radiology Partners 401(k) Plan

Eligibility	<ul style="list-style-type: none"> • Full-time teammates are eligible to participate in the 401(k) savings and retirement plan on the first of the month following your date of hire. • Part-time teammates are eligible to participate after completion of 1,000 hours during a 12-month period.
Contributions	<ul style="list-style-type: none"> • You may make contributions on a Traditional (pre-tax) or Roth (after-tax) deferral basis. • You may contribute up to 100% of your paycheck up to the IRS limit (currently \$19,500*). • If you are age 50 or older, you may contribute an additional \$6,500 (\$26,000 maximum). • All contributions are 100% vested immediately. • Safe harbor contribution¹: Teammates earning less than \$130,000 in 2021 will receive a safe harbor practice contribution equal to 3% of eligible compensation. • Profit sharing contribution¹: If eligible under the terms of the Plan, the practice may make an additional discretionary profit sharing contribution.
Rollover From Prior Plans	<ul style="list-style-type: none"> • You may rollover qualified assets from prior retirement plans into the Radiology Partners plan. • Should you need assistance in rolling over your previous plan's balance, please contact Charles Schwab at (800) 724-7526 or online at workplace.schwab.com.
Access Your Account	<ul style="list-style-type: none"> • Through Charles Schwab you will be able to choose from the core plan investment options. There are multiple investment strategy tools available, as well as Vanguard Target Retirement Funds. Select your funds, change investment options and access account values via phone (800) 724-7526 or online at workplace.schwab.com. • Schwab Personal Choice Retirement Account: If you would like to invest your assets outside of the core investment options available in the plan, you may do so via the Personal Choice Brokerage Account. For more information on the Schwab PCRA option, call (888) 393-7272.

¹Safe harbor and profit sharing contributions are subject to change with or without notice, as required by law.

* The IRS has not yet released 2022 limits

Physician Professional Expense Program (PPE)

The Physician Professional Expense Program (PPE) is an exclusive benefit offered by Radiology Partners to its valued physicians. It is administered by **VitaFlex**. The program allows physicians to participate in the reimbursement of business and continuing medical education expenses on a pre-tax basis. RP offers this unique program to further the professional growth and development of its physicians.

Key Features

- Reimbursements can be made by direct deposit.
- If you submit a claim by Tuesday of any given week, we will process reimbursement the following Friday.

Program rules

1. Physicians working full-time or part-time for a Radiology Partners affiliated practice are eligible. Physicians who are independent contractors of a Radiology Partners affiliated practice are not eligible.
2. Teammates must pay for and attend the CME class within the calendar year in order for the expense to be eligible.
3. Professional expenses must be paid for and used within the calendar year.
4. Amounts are only eligible if not otherwise reimbursed by the practice.
5. For reimbursements, you can email Vita at ppe@vitamail.com or submit an online claim form through your Vita account or the online mobile app along with a receipt that contains the following items Physician name, paid date, class/CME date (if applicable) and description of expense.
6. VitaFlex will review the expense and determine eligibility. If the expense is ineligible or there is missing documentation, they will communicate directly with the physician by sending them an Explanation of Benefits via email.
7. VitaFlex will process an approved expense by direct deposit the following week. If the claim is submitted by Tuesday, the reimbursement will be processed by the following Friday.
8. Claims incurred prior to the plan termination date must be submitted within 30 days of the plan termination date.

Eligible Expenses Include:

- CME and expenses associated with CME (including travel)
- Qualified business expenses per IRS guidelines
- Cell phone expense
- Professional licenses
- Physician associations
- Textbooks
- Internet is eligible if it is necessary to perform your professional duties

Please note this is not a complete list.



Voluntary Benefits



You're unique—and so are your benefit needs. Voluntary benefits are optional coverages that help you customize your benefits package to your individual needs. You pay the entire cost for these plans, but rates may be more affordable than individual coverage, and you get the added convenience of paying through payroll deduction. Voluntary benefits are just that: voluntary. You have the freedom and flexibility to choose the benefits that make sense for you and your family.

Accident

Accident insurance from MetLife supplements your medical plan by providing a cash benefit in cases of accidental injuries. Benefits include hospital stays, fractures, dislocations and physical therapy. The cash benefit can be used to help offset out-of-pocket medical expenses (deductibles and coinsurance), or other expenses (lost income and household bills) arising from a covered accident. Accident insurance pays in addition to your medical plan and benefits are payable regardless of any other insurance programs. Eligible teammates and dependents will be able to elect coverage during their initial enrollment and annual enrollment, regardless of prior health history.

Critical Illness

Critical illness insurance from MetLife helps protect against the financial impact of certain illnesses, such as heart attack, stroke and cancer. A lump-sum payment is paid directly to you and can be used to help offset out-of-pocket medical expenses (deductibles and coinsurance), or other expenses (lost income and household bills) arising from the critical illness. Critical illness pays in addition to your medical plan and benefits are payable regardless of any other insurance programs. Eligible teammates and dependents will be able to elect coverage during their initial enrollment and annual enrollment, regardless of prior health history.

Hospital Indemnity

Hospital Indemnity insurance from MetLife helps protect against the financial impact of a hospital stay. A hospital stay due to an accident or illness can require a variety of treatments, testing and therapies which can mean extra out-of-pocket costs beyond what your medical plan may cover. A flat amount is paid on the day you are admitted to a hospital and a per-day amount is paid for each day of a covered stay. Eligible teammates and dependents will be able to elect coverage during their initial enrollment and annual enrollment, regardless of prior health history.

Nationwide Pet Insurance

For pet owners, the cost of providing unexpected veterinary care if medical issues arise could add up to hundreds or even thousands of dollars. Pet Insurance through Nationwide is a cost-effective way to protect you from the risk of these expenses and provide medical care for your pet with peace of mind. Nationwide offers several policy options to meet a variety of needs and budgets. With this coverage, you are free to use any veterinarian worldwide.

Legal Benefits

The MetLife® Hyatt Legal Assistance Plan offers you economical access to attorneys for common legal services, such as will preparation, estate planning and family law. You, your spouse and dependents will have access to a nationwide network of 14,000 experienced attorneys. You can also use a non-plan attorney and get reimbursed for covered services according to a set fee schedule. Legal advice will be just a phone call away. A knowledgeable client service representative can help you locate a plan attorney in your area. You'll also have online access to resources that will assist with court appearances, document review and preparation, or real estate matters.

Identity Theft Protection from Norton LifeLock®

Identity theft protection services from Norton LifeLock® help assess your risk, deter theft attempts, detect fraud and manage the restoration process in the event of identity theft. Your identity will be monitored to uncover fraud at its inception. You will be notified of a potential fraud alert by text, phone or email. If you confirm that the suspicious transaction is fraudulent, Norton LifeLock® is on it. If your identity is ever compromised an Identity Restoration Specialist takes charge.



Long Term Care

You can purchase Long Term Care (LTC) coverage for yourself and your family members. LTC insurance pays benefits when a physician certifies that you are unable to perform (without substantial assistance), two of six activities of daily living for at least 90 days, or that you require substantial supervision to protect yourself and others from threats to health or safety due to severe cognitive impairment. Coverage is provided by UNUM.

Physician and Executive teammates can learn more and enroll by visiting unuminfo.com/desertradiologists001/index.aspx.

All other eligible teammates can learn more and enroll by visiting unuminfo.com/desertradiologists002/index.aspx.

Whole Life Insurance

Whole Life Insurance provides a fixed coverage amount with premiums and benefits that won't change as you grow older. The policy can build cash value over time — which you can apply toward a paid-in-full life policy or even borrow against later. Other benefits include guaranteed coverage, family options, additional payments for covered accident-related claims and early payouts for terminal illness.

Coverage for you

You can purchase coverage for as little as \$3 weekly as long as the minimum benefit is \$2,000. The benefit amount is based on the premium amount you select, your age when coverage begins and whether you use tobacco.

Coverage for your spouse

Available for your spouse up to age 80, even if you don't purchase coverage for yourself. If you leave RP you can continue this coverage.

Coverage for your child(ren)

Your children and grandchildren can have individual coverage, even if you don't purchase coverage for yourself.

Whole Life Insurance earns interest, or "cash value" at a guaranteed rate of 4.5%. You can borrow from that cash value or you can buy a smaller, paid-up policy—with no more premiums due.

You can also add an Accidental Death Benefit that can increase the payment your family would receive if you die from a covered illness before age 70.

Employee Perks

LifeBalance



LifeBalance is a great way to make life a little more fun and save money at the same time! Enjoy exclusive member pricing on discounts at over 20,000 retailers on thousands of services and products - like cell phone discounts with Verizon and laptop discounts with Lenovo. With savings around the corner and across the country – you can do more of what you love!

You can find discounted rates through LifeBalance on the following:

- Electronics
- Sports & Exercise
- Arts & Culture
- Home & Relaxation
- Outdoor Adventure
- Travel & Tourism

Visit RadPartners.LifeBalanceProgram.com to explore all benefits and program options.

Some of our partners include:



Plan Contacts

Plan type	Provider	Phone	Web	Policy #
Medical	HPN Solutions HMO SHL Solutions PPO SHL Solutions HSA PPO	(702) 242-7300 (702) 242-7700 (702) 242-7700	myhpnonline.com myshlonline.com myshlonline.com	50501002
Dental	MetLife	(800) 942-0854	metlife.com/dental	317190
Vision	VSP	(800) 877-7195	vsp.com	30-078469
Health Savings Account Flexible Spending Accounts Commuter Benefits Physician Professional Expense Program (PPE)	VitaFlex	(800) 424-3052	vitaflex.net	N/A
Basic/Voluntary Life and AD&D, Short Term and Long Term Disability	Prudential	Life Claims: (800) 524-0542 Disability Claims: (800) 842-1718	prudential.com/mybenefits	53011
Individual Disability Insurance	Unum MetLife	(866) 296-3594 (866) 363-8669	online.metlife.com	N/A
Whole Life Insurance	Unum	(800) 635-5597	services.unum.com	N/A
Long Term Care	Unum	(800) 421-0344	unuminfo.com/ desertradiologists001/ index.aspx	N/A
Employee Assistance Program	GuidanceResources	(800) 311-4327	guidanceresources.com	MGR311
401(k)	Charles Schwab	(800) 724-7526	workplace.schwab.com	RDO



Get help with your benefits however you feel most comfortable. You have many different ways to get answers to your questions and assistance with coverage and claims issues. Need help? Contact benefits@radpartners.com.

Important Plan Notices

The notices on the following pages must be provided to plan participants on an annual basis. Other documents available to you include:

Plan documents

Important documents for our health plan and retirement plan are available by emailing radiologypartners@alliant.com. Paper copies of these documents and notices are available if requested. If you would like a paper copy, please contact benefits@radpartners.com

Summary Plan Descriptions

The legal document for describing benefits provided under the plan as well as plan rights and obligations to participants and beneficiaries.

- Radiology Partners Group Health Plan

Summary of Benefits and Coverage

A document required by the Affordable Care Act (ACA) that presents benefit plan features in a standardized format.

Statement of Material Modifications

This enrollment guide constitutes a Summary of Material Modifications (SMM) to the Radiology Partners Group Health Plan. It is meant to supplement and/or replace certain information in the SPD, so retain it for future reference along with your SPD. Please share these materials with your covered family members.



