

Benefits for Your Life

2022 Benefits Guide





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 on the Benefits Center 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 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 will 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 or coinciding with their date of hire. 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.

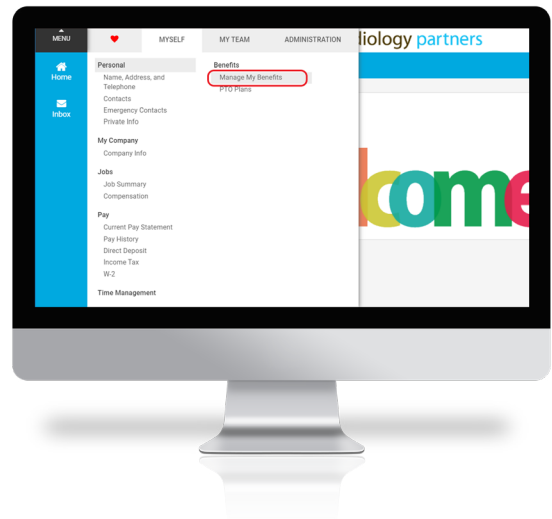
Your Eligible Dependents

- 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)



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.

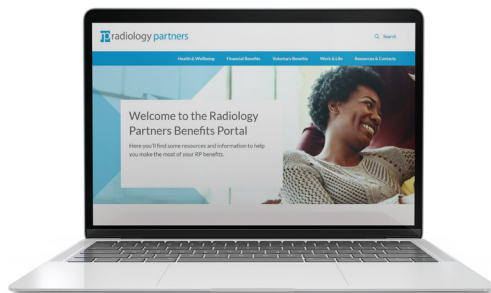
If you do not add, change or terminate elections during the 30 days, you will have to wait until the next plan year's open enrollment or experience another qualifying life event.

Need More Information?

Use the Radiology Partners benefits website to learn more about your plans. On the website you have 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 requirements, 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.

Radiology Partners' Medical Plans Are Self-Funded

Anthem processes the medical claims, but Radiology Partners pays the total cost of benefits and claims. So, trips to the doctor or emergency room are primarily funded by Radiology Partners. Therefore, you play a direct role in keeping our health costs low.

When you make wise healthcare decisions, like using generic prescription drugs, visiting an urgent care center instead of an emergency room or living a healthy lifestyle, the healthcare savings are passed on to our practice. This allows us to provide competitive plan options and keep the cost of your benefits lower. When you visit an in-network provider, you receive the highest level of benefits and save on out-of-pocket costs. These providers charge members reduced, contracted fees. Out-of-network providers set their own rates, so you may be responsible for the difference if a provider's fees are above the Reasonable and Customary (R&C) limits. By working together, we can keep our healthcare benefits affordable and sustainable.

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.

PPO 500	<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.
<p>HDHP HSA 2000</p> <p>HDHP HRA 4000</p>	<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 plan. 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 HDHP HSA 2000 plan and eligible, Radiology Partners makes a semi-annual contribution to your HSA. See Health Savings Account (HSA) Basics on page 12 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. Radiology Partners makes an annual contribution to your Health Reimbursement Arrangement (HRA) if you enroll in the HDHP HRA 4000 plan. More details on the HRA on page 13.

What is the Medical Plan Network?

Radiology Partners has selected to use the **Anthem Blue Cross - Prudent Buyer (Large Group) Network** for all medical plans. If you are located outside of California, the network used is the **National Blue Card Network**.

Medical Plan Comparison Chart

	PPO 500	HDHP HSA 2000	HDHP HRA 4000
Coverage	In-network	In-network	In-network
HSA /HRA Funding	None	Yes; \$750 for Individual and \$1,500 for Family Coverage to HSA	Yes; \$1,000 to HRA
Annual Deductible	\$500 Individual \$1,000 Family	\$2,000 Individual \$4,000 Family (\$2,800 per participant within a family)	\$4,000 Individual \$8,000 Family (aggregate deductible for family)
Coinsurance	10%	10%	20%
Annual Out-of-Pocket Maximum	\$2,000 Individual \$4,000 Family	\$3,000 Individual \$6,000 Family	\$5,000 Individual \$10,000 Family
Outpatient Services			
Preventive care	No charge	No charge	No charge
Primary Care / Specialist Office Visits	\$10 copay/visit	10% coinsurance after deductible	20% coinsurance after deductible
Virtual Visit	\$5 copay via 98point6	\$5 copay via 98point6	\$5 copay via 98point6
Urgent Care	\$10 copay/visit	10% after deductible	20% after deductible
Emergency Room	\$100 copay/visit + 10% after deductible	\$100 copay/visit + 10% after deductible	\$100 copay/visit + 20% 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	10% after deductible	10% after deductible	20% after deductible
Inpatient Hospitalization	\$100 copay/visit + 10% after deductible for hospital stay; 10% after deductible for physician/surgeon fees	\$100 copay/visit + 10% after deductible for hospital stay; 10% after deductible for physician/surgeon fees	\$100 copay/visit + 20% after deductible for hospital stay; 20% after deductible for physician/surgeon fees
Other Services			
Mental Health/ Substance Abuse	10% after deductible	10% after deductible	20% after deductible
Durable Medical Equipment /	10% after deductible	10% after deductible	20% after deductible
Prosthetic Devices	10% after deductible	10% after deductible	20% after deductible
Acupuncture	10% after deductible	10% after deductible	20% after deductible
Chiropractic	10% after deductible	10% after deductible	20% after deductible
Fertility/Family Planning	Covered through Kindbody, includes two IVF cycles and egg freezing (See page 11 for more info) ¹		
Home Health Care	10% after deductible	10% after deductible	20% after deductible
Skilled Nursing or Extended Care Facility	10% after deductible	10% after deductible	20% after deductible

¹ All contributions for Kindbody benefits are applied towards your medical plan lifetime maximum.

Note: For Out-of-Network coverage details, email radiologypartners@alliant.com to request the plan SBC. 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*
98point6 Online Visit	Minor illnesses and conditions	<ul style="list-style-type: none"> Primary care (via 98point6) Common cold, flu, fever Headache, migraine Skin conditions Allergies 	24/7 98point6.com/radpartners	\$5 **
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 anthem.com or call (833) 951-1371 <ul style="list-style-type: none"> CA teammates, search the Prudent Buyer network Outside of CA, search the National Blue Card network 	\$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.

** Teammates and their family members covered on a Radiology Partners' medical plan can receive no-cost virtual primary care through **98point6** while legislation due to COVID allows us to waive the copay.

Virtual and Text-based Primary Care with 98point6

Download the app and start a visit anytime. **98point6** is available 24/7. Simply tell the automated assistant a few details and a doctor will assess your symptoms, diagnose health issues and answer any questions you have via secure, in-app messaging (with photo, audio and video capabilities, if required).



Additional Medical Resources

Total Health, Total You supports your overall health

Access these services through the Sydney Health mobile app. Your health plan includes Total Health, Total You, which provides access to services and resources for your health and well-being at no extra cost. Use the Sydney Health mobile app to manage your health:

- View your health plan details
- Access your digital ID card
- Find local doctors
- Participate in wellness activities
- Call or chat directly with an Anthem

Health Guide

You gain access to a team of health professionals, such as nurses, social workers, dietitians, respiratory therapists, pharmacists, exercise physiologists, and health coaches. For your convenience, you may contact an Anthem Health Guide via chat, or reach out directly by calling the number on the back of your ID card.

Sydney Health

Sydney Health is Anthem's digital-first platform that is all about saving you time and connecting you with the care you need. Within minutes, members can access their health plan details and medical information, and redirect to other RP benefit providers in one place. Teammates and their dependents 18 and older can download the app in the Apple Store or Google Play to register with the Sydney Health platform.

Sydney will have access to redirect you to:

98point6 Virtual Visits	Prudential Life & Disability
Costco Rx	Retirement benefits with Charles Schwab
Kindbody Family Planning	Vita (HSA, HRA, FSA)
Guidance Resources EAP	VSP Vision
MetLife Dental	And More!



Future Moms

Future Moms is your go-to source for all of your questions about pregnancy! The Future Moms program can answer your questions, guide you in making good choices and follow your healthcare provider's plan of care - all to help you to have a safe delivery and a healthy child. There's no extra cost to you.

Sign up as soon as you know you're pregnant. Just call us toll free at **800-828-5891**. One of our registered nurses will help you get started.

Medicare Enrollment Help

Medicare is government-run health insurance for people age 65 and older, younger people with disabilities, and people with End Stage Renal Disease. Medicare can be complicated and there are many choices to make.

Radiology Partners's Alliant Medicare Solutions program is a resource to help you understand the different parts of Medicare, what is and isn't covered, how Medicare works with employer coverage, and how to choose the best coverage for your situation.

Alliant Medicare Solutions is a free resource for you, or any family members and friends who are nearing age 65. Alliant Medicare Solutions' Licensed Insurance Agents can help you navigate the Medicare maze to find a plan that is right for you. Agents are contracted and certified in all 50 states to provide Medicare advice and an "A-rated" or better insurance carrier at competitive rates.

How Does It Work?

Call Alliant Medicare Solutions at **888-660-1195** to speak to a Licensed Insurance Agent (Alliant Medicare Solutions is managed by Insuractive).

Discuss with Alliant Medicare Solutions:

- Your current insurance coverage
- Types of coverage including Original Medicare, Medigap, Medicare Advantage, and prescription drug plans
- Which plans might work the best for you

Alliant Medicare Solutions helps you enroll immediately or emails the policy materials for you to review and enroll at a later date.





Convenience and Savings

From Your Costco Pharmacy Benefits

Costco Health Solutions works with your health plan to get you the prescription medications you need. At the pharmacy, reference the pharmacy plan details on your medical plan ID card. Costco 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 do not need to have a Costco membership and you will pay lower copays at Costco Pharmacies.
- You can go to any participating retail pharmacy including Walmart, Walgreens, CVS, Rite Aid, Savon, Kroger and Vons.
- Search for a pharmacy in your area by visiting [costcohealthsolutions.com](https://www.costcohealthsolutions.com), then Pharmacy Locator.

	PPO 500		HDHP HSA 2000		HDHP HRA 4000	
Costco Retail (30-Day Supply)	Costco	Non-Costco	Costco	Non-Costco	Costco	Non-Costco
Generic (Tier 1)	\$5 copay	\$10 copay	\$5 copay after ded.	\$10 copay after ded.	\$5 copay	\$15 copay
Preferred Brand Name (Tier 2)	\$15 copay	\$30 copay	\$15 copay after ded.	\$25 copay after ded.	\$15 copay	\$25 copay
Non-Preferred (Tier 3)	\$30 copay	\$50 copay	\$30 copay after ded.	\$40 copay after ded.	\$30 copay	\$30 copay
Costco Mail Order (90-Day Supply)						
Generic (Tier 1)	\$10 copay	Not covered	\$10 copay after ded.	Not covered	\$10 copay	Not covered
Preferred Brand Name (Tier 2)	\$30 copay	Not covered	\$30 copay after ded.	Not covered	\$30 copay	Not covered
Non-Preferred (Tier 3)	\$60 copay	Not covered	\$60 copay after ded.	Not covered	\$50 copay	Not covered
Specialty	20% coinsurance	Not covered	20% after ded.	Not covered	20% coinsurance	Not covered

Family Planning Benefits

Kindbody

Say Hi to Your New Family Planning Benefit!

Meet Kindbody, your modern-day fertility and family planning provider helping you understand and take control of your family planning and future. Kindbody's mission is to make access to fertility and family-building services more accessible. We're re-imagining family planning to put the power back in your hands.

Who Is Eligible?

Kindbody is available only to those enrolled in an Anthem Blue Cross medical plan including teammates and spouses/partners.

Your Kindbody Benefit Through Radiology Partners Includes:

- Two Cycle Coverage including egg freezing and fertility medication, subject to copay, deductible or other cost-share according to your medical plan
- Network of partner clinics in locations where you work and live
- A dedicated Care Navigation Team available to guide you through your journey
- End-to-end fertility services from standard gynecological care to conception, nutrition and mental wellness in re-imagined clinics
- 24/7 virtual care options, online appointment scheduling and a dedicated patient care navigator to guide you through your entire process
- A first-of-its-kind personalized patient portal giving you convenient and transparent around-the-clock visibility
- Five complimentary, virtual service sessions on topics such as lactation support, mental wellbeing, nutrition and back-to-work care

Note: All contributions for Kindbody benefits are applied towards your medical plan lifetime maximum.



Cost and Access:

- Medication costs will be covered under your cycle costs for two cycles
- 24/7 on-demand virtual care
- Navigation through the Kindbody mobile app is not billed to your medical insurance and is provided to you for free
- All Cycles apply to both Kindbody Direct and Kindbody Plus clinics. Members who opt for a Plus clinic will be required to pay the rate difference for services
- All cycles at Direct clinics include PGT testing when applicable

How Can I Get Started With Kindbody?

Step 1: Call **(844) 547-0096** now or visit **portal.kindbody.com/activate-kindbody-benefit** to get started.

Step 2: Enter your Access Code: **"KINDRP."**

Step 3: Create your Kindbody account using your **work email address** to verify your eligibility.

For more information, or to enroll, contact Kindbody at **employeebenefits@kindbody.com** or **portal.kindbody.com/activate-kindbody-benefit**.

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 **HDHP HSA 2000** 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 HDHP HSA 2000 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: \$3,650 per year**
 - **Family: \$7,300 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.

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 HDHP HSA 2000 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

Find Out More About Eligible Expenses

- **Eligible expenses**
- **Ineligible expenses**

* 50% of your annual contribution from Radiology Partners will be deposited in your HSA during the 1st week in January 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 your date of hire.

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

1. Enrolled in the HDHP HSA 2000 plan.
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 Health Care Flexible Spending Account (FSA), unless it's a "limited purpose" FSA for dental and vision expenses.



Health Reimbursement Arrangement (HRA)

The Health Reimbursement Arrangement (HRA) allows the practice to contribute funds for teammates enrolled in the **HDHP HRA 4000** plan to pay for certain out-of-pocket healthcare expenses. An HRA is not a medical plan; instead, it is a reimbursement account that works alongside your medical plan to help you pay for a wide range of out-of-pocket expenses such as your deductible, copays or coinsurance.

How the HRA Works

- An HRA is only available if you enroll in the **HDHP HRA 4000** medical plan.
- RP will give you \$1,000* to help you pay for out of pocket expenses regardless of your medical , prescription drug or over-the-counter tier level.
- Contributions to an HRA can only be made by the practice.
- You will receive a VitaFlex Debit Card to use your HRA money to pay for qualified medical expenses for you or your dependents.
- Unused money will not roll over to future years.
- If you leave the practice any unused funds will be forfeited.

Get More Tax Savings With an FSA

Yes! You can have both an HRA and a healthcare Flexible Spending Account (FSA) at the same time but you can't be reimbursed from both accounts for the same expense. Generally, the HRA is used first until the account is depleted.

* Your annual contribution from Radiology Partners will be deposited in your HRA during the 1st week in January. New teammates hired after 1/1 will receive prorated contribution beginning the first of the month following your date of hire.

Reasons to Love an HRA

1. **It's 100% employer-funded.** All contributions are made by Radiology Partners. In fact, the rules prohibit teammate contributions.
2. **It's tax-free.** HRA reimbursements are excluded from your gross income, so they are 100% tax-free.

Using Your VitaFlex HRA

Once you have signed up for the HDHP HRA 4000 plan, an HRA 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



Health Care Flexible Spending Account (FSA)

A Health Care 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 Health Care 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 Health Care FSA. However, if you or your spouse are enrolled in a HSA-eligible health plan (like our HDHP HSA 2000) 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	HRA	Health Care FSA	Limited Purpose FSA
Medical plan enrollment	HDHP HSA 2000; You may not have other non-HDHP coverage.	HDHP HRA 4000	Non-HSA-eligible medical plans	HSA-eligible medical plans
Eligible expenses	Medical, dental, vision, prescription and over-the-counter expenses.	Medical, 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.	\$1,000	\$0	\$0
Annual contribution limit	\$3,650 individual or \$7,300 family, including practice funds. Extra \$1,000 allowed after age 55.	N/A, teammates cannot contribute to this account.	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	None
Funds are available	After deposit	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	No
Allows rollover to next year	Yes, unlimited.	No, unused funds will be forfeited.	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.	Unused money will not roll over to future years, you must submit all claims by Dec 31, 2022.	Eligible expenses must be incurred by Dec 31, 2022. Claims must be submitted by March 31, 2023.	Eligible expenses must be incurred by Dec 31, 2022. Claims must be submitted by March 31, 2023.
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 for the HDHP HRA 4000.	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
- Van pool
- UberPOOL and Lyft Line (in certain areas)
- Parking at or near work

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 available immediately upon date of hire and 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 on 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.

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

Search "PDP/PDP Plus" network



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



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. This benefit provides you with three visits per issue, per year. 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

covers three visits per issue, per year

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.

All Support, Physicians, and Executive Teammates	\$10,000 increments up to 5x base annual earnings up to \$500,000. Guaranteed Issue is \$250,000.
Spouse/Domestic Partner	\$10,000 increments to a maximum of \$250,000. Guaranteed Issue is \$100,000.
Child(ren)	\$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.

Voluntary 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 voluntary 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 \$2,000
Benefits begin	After 14 days of disability due to accident or sickness
Maximum payment period	Up to 11 weeks

All California, Connecticut, Hawaii, New Jersey, New York and Rhode Island teammates may be eligible to receive a weekly benefit through their work state and therefore may receive limited benefit under the voluntary STD program.

California State Disability Insurance (SDI)

Most California teammates have a small part of their income taken out of their paychecks for State Disability Insurance (SDI). The SDI program generally pays 60-70% of your wages for up to 52 weeks of non-work-related disability, including pregnancy. Benefits start after 7 days of disability. You must meet certain eligibility requirements to receive benefits under SDI. Your SDI benefit may be integrated with other time off benefits you receive, such as paid sick time, PTO or holiday pay. For information on eligibility requirements as well as to apply, visit the [State of California website](#).

New Jersey Temporary Disability Insurance (TDI)

New Jersey teammates are covered by state Temporary Disability Insurance (TDI), a benefit that replaces part of your income if you can't work due to a disability related to pregnancy or a non-work-related injury or illness. Disability benefits begin after a 7-day waiting period and are payable for a maximum of 26 weeks per disability. TDI also covers up to six weeks for leave to bond with a child or care for a family member with a serious health condition. To review eligibility requirements, visit the [State of New Jersey website](#).

New York Disability Benefits (DBL)

New York teammates are covered by the New York Disability Benefits Law (DBL) that replaces part of your income if you can't work due to pregnancy or a nonwork-related injury or illness. Benefits begin on the 8th consecutive day of illness or injury and are payable for a maximum of 26 weeks per disability. For pregnancy, women are covered for six weeks after a normal pregnancy and eight weeks after a Caesarian section (coverage may be extended if there are complications). While New York has a Paid Family Leave Law, you cannot collect disability benefits and paid family leave benefits at the same time.

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 if you make \$130,000 or less annually. 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 maximum of \$6,500
Benefits begin	After 90 days
Maximum payment period	Social Security normal retirement age (The age at which disability begins may affect duration of benefits.)

Voluntary Long Term Disability

Physicians and teammates who make more than \$130,000 annually can purchase LTD insurance to replace 60% of their lost income, up to a monthly maximum benefit of \$15,000. Benefits begin after 90 days of accident injury or sickness.





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) Savings and Retirement 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 hire date.• Part-time teammates are eligible to participate after the 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.

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

You may contribute up to 100% of your paycheck up to the IRS limit (currently \$19,500).

All new hires will receive a welcome email from Charles Schwab to enroll in 401k about 2 weeks after your first paycheck. Please note once you update your deferral in Charles Schwab, it may take an additional 2 weeks for the deferral to be reflected in your next paycheck.



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.

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:



Need Help?



Say Hello to the Radiology Partners Benefits Advocates Team

Reach out to a benefits advocate for personal and confidential assistance with general benefit questions; eligibility and coverage; finding a network provider; coverage changes due to life events such as marriage, a new child, or divorce; and healthcare claim or billing issues.

radiologypartners@alliant.com
(925) 378-6808

7:00 am - 5:00 pm PT, Mon - Fri

Make Friends With the Sydney Health App

Sydney Health

Sydney Health is all about saving you time and connecting you with the care you need. You can access your health plan and medical information in one place.

How to begin:

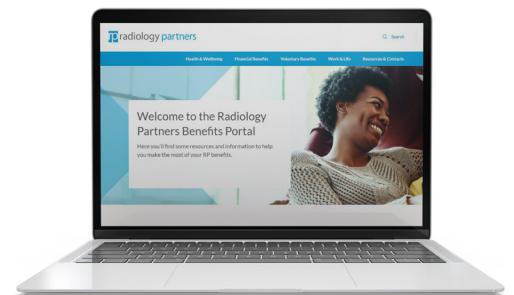
1. Download the Sydney Health app from Google PlayTM or the App Store®.
2. Open the Sydney Health app and register.
3. Choose Register.
4. Enter your first and last name, birth date, and Member ID number.
5. Choose Register to create your account.
6. You can also access your Anthem account by logging in at anthem.com/ca.

Need More Information?

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

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

Visit rpbenefits.com.



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.

Plan Contacts

Plan type	Provider	Phone	Web	Policy #
Medical	PPO 500 HDHP HSA 2000 HDHP HRA 4000	(844)-451-2077	anthem.com/ca	Anthem: 174302
Virtual Care	98point6	N/A	98point6.com/radpartners	N/A
Family Planning Benefits	Kindbody	(855) KND-BODY	portal.kindbody.com/ activate-kindbody-benefit	Access code: KINDRP
Pharmacy	Costco Health Solutions	(877) 908-6024	costcohealthsolutions.com	RADA
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
Employee Assistance Program	GuidanceResources	(800) 311-4327	guidanceresources.com	MGR311
401(k)	Charles Schwab	(800) 724-7526	workplace.schwab.com	RDO

Note: Regardless of teammate's state of residence, you will see anthem.com/ca on all Anthem documents

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 visiting rpbenefits.com or 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

