Annual Enrollment

This year’s benefits annual enrollment period will be held **June 1 through June 14, 2022**. Changes you can make during the benefits annual enrollment period may include adding or deleting a dependent such as a child or spouse; adding or deleting enrollment for you or a dependent in a health plan; and/or changing/updating beneficiaries for life insurance programs. Changes made to your coverage during the enrollment period will become effective **July 1, 2022**.

What’s new for 2022-23?

**Cost Increase**: An increase in 2022-23 medical rates for the POS Plan is necessary due to the continued increase in medical costs. Dental and vision rates will remain the same as last year.

**Behavioral Mental Health**: To make it easier and more cost-effective to access behavioral mental health services, out-of-network behavioral mental health providers will now be covered at the in-network benefit level for the Aetna POS Plan. This includes psychiatry, psychology and other licensed behavioral health providers.

**Lab Services**: For the Aetna POS Plan, independent lab services (blood draws) will no longer be subject to the deductible. For non-preventive labs, the coinsurance will still apply.

**Medical Plan Incentives**: Incentives will be offered again in 2022, giving you the opportunity to offset your medical costs by participating in a variety of healthy activities through a new partnership with Sharecare. Spouses will also be able to earn all incentives except for the Diabetes Prevention Program. Incentives for preventive annual exams will not be available in 2022. For more details, see page 11.

**Flexible Spending Account (FSA) Reminder**
It is important to note that you will not be able to make changes to your Healthcare Flexible Spending Account (FSA) at this time. FSA changes are made in the fall of each year, as these plans run on a calendar year.
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This guide is meant to provide basic benefit plan information. Every attempt has been made to ensure that the information included in this guide is accurate. For additional details and specific information, please contact the vendor or review the Summary Plan Description (SPD) for each plan. SPDs are available online at www.hr.emory.edu/benefits or by contacting the Benefits and Work Life Department at 404-727-7613 for a printed version.

DISCLAIMER: Emory reserves the right to terminate, suspend, withdraw, amend or modify the plan in whole or in part at any time. Further, Emory reserves the right to terminate or modify coverage for any group of employees, active or retired and their dependents or a class of dependents at any time.

**Benefits and Work Life Department Office Hours:**

Monday - Thursday: 8:00 a.m. to 5:00 p.m.

Friday: 11:00 a.m. to 5:00 p.m.

Benefits and Work Life Department
1599 Clifton Road, 1st Floor
404-727-7613
Your Benefits

As a Medical House Staff member at Emory, you have a wide range of benefit programs available to you. Benefits give you important financial protection when you need it most. Use this Benefits Guide to review the benefit programs that Emory offers so that you can make the choices that are right for you and your family.

Some benefits Emory offers are employer-provided and coverage is automatic if you are eligible. Other benefits give you choices and require you to enroll.

Employer-Provided Benefits

As an eligible Medical House Staff member, Emory automatically provides you with several benefits. Emory pays the full cost for single medical coverage, life insurance, long term disability coverage and accidental death insurance. You are not required to make any contributions for these benefits.

Emory also offers a variety of other benefits not covered in this guide, including employee discounts, the Faculty Staff Assistance Program and more. For the most current information, visit the Medical House Staff Benefits website at www.hr.emory.edu/eu/medhousebenefits/index.html.

Optional Benefits

In addition to employer-provided benefits, eligible employees may enroll in optional benefits including medical coverage for dependents, dental, vision, flexible spending accounts and retirement plans. You contribute toward the cost of the optional benefits that you elect.

When Coverage Begins

For most benefits, coverage begins on an employee’s date of hire.

New Hires: If you are benefits-eligible, you must enroll during your first 31 days of employment with Emory. For optional benefits other than the 403(b), if you do not enroll during your first 31 days of employment, you will not receive coverage. Your next opportunity to enroll in optional benefits will be during the benefits annual enrollment period, typically held in June of each year for the upcoming year (i.e. June of 2022 for the 2022-23 plan year).

Current Employees: If you are a current benefits-eligible Medical House Staff member, each year you have an opportunity to review your benefit elections during the benefits annual enrollment period and make changes for the upcoming plan year.

When Coverage Ends

For most benefits, coverage will end on the last day of the month in which:

• Your regular work schedule is reduced to fewer than 20 hours per week;
• Your employment with Emory ends due to resignation, termination or death;
• You stop paying your share of the coverage; or
• You are no longer a Medical House Staff member.

Your dependent(s) coverage ends:

• When your coverage ends, or
• The last day of the month the dependent is no longer eligible:
  • For Dependent Child(ren) (up to age 26), end of the month in which they turn 26.
Eligibility

You are eligible for benefits if you are a regular full-time or part-time Medical House Staff member scheduled to work 20 hours or more per week. Full-time temporary positions on a six-month or longer assignment are eligible for medical, dental, vision and life insurance, but not disability.

If you elect coverage, your dependents are also eligible for medical, dental, vision and life insurance coverage. Eligible dependents include:

- Your legal spouse.
- Your legal child(ren): includes your natural, adopted or foster child(ren), stepchild(ren), or any child for whom you have legal custody. They are eligible:
  - Up to age 26.
  - Regardless of age, if fully disabled and unmarried, provided he/she became fully disabled either:
    - prior to age 19; or
    - between the ages of 19 and 26, if that child was covered by the plan when the disability occurred.

Dependent Verification of Eligibility

When you first enroll, or if you change coverage mid-year due to a qualified IRS family status change, you are required to provide documentation substantiating the eligibility of your dependent(s) within 31 days of the change or enrollment.

If documentation is not received within 31 days, a letter will be mailed to you requesting the documentation within a given deadline. Refer to the chart below for a list of events which require documentation.

<table>
<thead>
<tr>
<th>EVENT</th>
<th>DOCUMENTATION NEEDED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse with a last name different than yours</td>
<td>Marriage certificate OR joint tax return (current or previous year only).</td>
</tr>
<tr>
<td>Child with a last name different than yours</td>
<td>Birth certificate OR court document awarding custody or requiring coverage.</td>
</tr>
<tr>
<td>Dependent child over age 26</td>
<td>Birth certificate AND a Social Security Disability Award or letter from a physician AND the parent’s tax return claiming the child (current or previous year only).</td>
</tr>
</tbody>
</table>

You must provide the documents listed above to the Benefits and Work Life Department within 31 days from your initial election or mid-year family status change if one of the above situations applies to you and your family. If documentation is not received in a timely manner, the election/change requested will not be processed and the affected dependents will not be covered under Emory’s plans. Legible copies of required documents are acceptable.
How to Enroll

Current Employees
You must enroll during the annual enrollment period: Wednesday, June 1 through Tuesday, June 14, 2022. Prior to enrolling, be sure to review all of the annual enrollment materials available on the enrollment website at www.hr.emory.edu/mhsenrollment. An Enrollment Checklist is provided on page 5 to assist you. If you have questions or would like more information about Emory’s benefit programs, you can contact the Benefits and Work Life Department at 404-727-7613 or by email at hrbenef@emory.edu.

What happens if you don’t enroll: If you are currently enrolled in benefits and don’t participate in annual enrollment, your current coverage will roll over.

New Hires
You may enroll online during your first 31 days of employment. Note: There may be days when you can’t enroll such as payroll run days. Emory offers numerous tools and resources to help you make your benefit selections. You can also contact the Benefits and Work Life Department with your questions at 404-727-7613 or by email at hrbenef@emory.edu.

Enroll Online
You can enroll online through Self-Service (http://leo.cc.emory.edu) at any computer that has Internet connectivity. To access Self-Service, you will need your network ID and password. If you do not know your network ID or password, call the Libraries and Information Technology Help Desk at 404-727-7777 (available Monday – Friday, 7:00 a.m. to 6:00 p.m.).

Steps to Enrolling Online
2. Click the Annual Enrollment tile.
3. On the Welcome Instructions page, use the left-hand guide to walk through the enrollment steps or use the Next button to navigate.
4. Complete the Acknowledgment step to proceed to your Benefits Enrollment.
5. From the Benefits Enrollment page, to view or change your elections, select the Benefit Plan(s) you wish to change. You may also enroll, add or drop dependents.
   • If you select Medical, your Tobacco Certification will display.
   • Verify or update the information and click Agree to record your response(s).
6. After you have reviewed your benefits, click the Save button in the upper right-hand corner to store your elections.
7. Once you have completed your Annual Enrollment, click the Submit Enrollment button in the upper right-hand corner to submit your elections to the Benefits and WorkLife Department.
8. Click View to review your Elections Preview Statement or Done to return to the Benefits Enrollment Summary. Be sure to save a copy of your Elections Preview Statement and carefully review it for accuracy. After July 1, most elections cannot be changed (except within 31 days of a family status change).
9. You will receive an email from the Benefits and WorkLife Department after annual benefits enrollment has closed with instructions on how to access your confirmation statement.
Take some time to learn about all of the benefit options that are available to you. Read this 2022-23 Benefits Guide carefully as you consider your plan choices. Emory provides a variety of tools and resources to help you make your benefits decisions. These tools can be accessed online at www.hr.emory.edu/mhsenrollment.

New hires only, decide if you want to enroll in a Flexible Spending Account (Healthcare and/or Dependent Day Care). Your FSA election will be for July 1, 2022 through December 31, 2022 only. You will be given the option to re-elect in the fall for the 2023 calendar year.

Actively enroll online through Self-Service (http://leo.cc.emory.edu) during the enrollment period: June 1 through June 14, 2022. Changes are effective on July 1, 2022. If you are currently enrolled in benefits and don’t participate in annual enrollment, your current coverage will roll over.

Complete the tobacco surcharge certification, if not already done.

Review your beneficiary(ies). Make any necessary updates to ensure the accuracy of your beneficiary information for life insurance and accidental death and dismemberment insurance.

Once you have completed your enrollment online, save or print a copy of your confirmation statement, review it for accuracy, and retain it for your records.

Verify your 2022-23 benefits elections after Monday, June 20, 2022 by reviewing your Benefits Summary in Self-Service (http://leo.cc.emory.edu). You will receive an email reminder. If you notice any errors, notify the Benefits and Work Life Department immediately at 404-727-7613. After July 1, 2022, most elections cannot be changed except within 31 days of a family status change.
Making Changes

The IRS provides strict regulations about changes to pre-tax elections during the plan year. If you experience a qualified IRS family status change mid-year, you are permitted to make a change within 31 days of the event.

If the change request is not completed within 31 days of the event, you will not be able to change your elections until the following year’s benefits annual enrollment period. Below is a list of some of the more commonly known qualified family status changes:

- Marriage, divorce or annulment
- Birth of a child
- Placement of a foster child or child for adoption with you, or assumption of legal guardianship of a child
- Change in your spouse’s or dependent’s employment status that affects benefits eligibility, including termination or commencement of employment, or change in worksite
- You or your spouse returns from unpaid leave of absence
- You or your dependent becomes eligible or loses eligibility for Medicare or Medicaid
- The death of your spouse or dependent
- Court ordered coverage of your child by you or your spouse, allowing you to add or drop the child’s coverage
- Change in your employment that affects benefits eligibility (working at least 20 hours per week)
- Loss of eligibility for a dependent
- Change in dependent care provider or cost for Dependent Care Flexible Spending Account

The change you request must be consistent with the qualifying event. Some mid-year changes require documentation which must also be provided within 31 days of the event.

Completing a Family Status Change

Family status changes are completed online in Self-Service (http://leo.cc.emory.edu). Should you have questions or difficulty making your change mid-year, please contact the Benefits and Work Life Department within 31 days of your qualifying event.

You can reach the Benefits and Work Life Department at 404-727-7613. Office hours are: Monday - Thursday: 8:00 a.m. to 5:00 p.m. and Friday: 11:00 a.m. to 5:00 p.m. The Benefits and Work Life Department is located at 1599 Clifton Road, 1st Floor.

For more information about making changes to your benefits due to family status changes, visit the Benefits website at www.hr.emory.edu/benefits.
Emory offers comprehensive medical coverage to help protect you and your family from catastrophic medical costs. Use the information contained in this guide to learn how this plan works, the coverage it provides, and how to use it to best meet the needs of you and your family.

The POS Plan

The POS Plan is a conventional medical plan where members pay co-pays for some services (co-pays are fixed fee amounts that you pay at the time you receive services). The POS Plan also uses co-insurance for some services (co-insurance is the portion of expense you must pay for care, in most cases, after meeting your deductible). The deductible is a set amount that typically you must pay before co-insurance starts. See page 10 for deductible amounts.

The POS Plan allows members to receive services from a national network of providers and facilities. It is an open access plan that:

- Provides the flexibility to choose any provider
- Does not require that a Primary Care Physician (PCP) be identified or selected
- Does not require a PCP referral to see a specialist

Network Options

The POS Plan has three network options:

- **Tier 1**: Providers give you the maximum benefit available under the plans, with lower co-pays, co-insurance and deductibles. For a list of Tier 1 providers, see page 20.
- **Tier 2**: Providers and facilities that are a part of the Aetna network. Co-pays, co-insurance and deductibles are higher than with Tier 1.
- **Tier 3**: Providers and facilities that are not participating with Aetna are considered Out-of-Network. Costs are the highest.

To locate a Tier 1 or Tier 2 physician or facility, go to [www.aetna.com/docfind/custom/emory](http://www.aetna.com/docfind/custom/emory).

Tier 1 and Tier 2 preventive care is covered at 100% and is not subject to the deductible. For certain other medical services, such as diagnostic labs, hospitalization or radiology, the plan pays a portion of your covered expenses: 85% for Tier 1, 75% (Tier 2) and 50% percent (Tier 3) after you pay the annual deductible. Office visits are covered with a co-payment. Prescription drugs are covered through co-insurance.

The POS Plan also has an out-of-pocket maximum to protect you in the event you have significant medical expenses during the year. The out-of-pocket maximum includes all co-pays, as well as deductible and co-insurances, such as prescription drug costs and office visit co-pays.

Preventive Care

Routine preventive care is covered at 100% under the Tier 1 and Tier 2 Networks. Preventive care can help you identify potential health risks before they become real health problems. Services include annual physicals, well-child visits, immunizations, health screenings and more. A complete list of preventive care services can be found online at [www.hr.emory.edu/mhsenrollment](http://www.hr.emory.edu/mhsenrollment).
Medical Coverage

POS Plan Prescription Drugs

Prescription drug coverage is part of your medical plan and you pay a percentage of the cost through co-insurance. There is also a retail minimum and a retail maximum within a five-tier structure (see chart on the right). You will pay the co-insurance amount subject to the retail minimum and maximum cost. You do not have to meet your deductible first.

Prescription drug coverage is administered through CVS/caremark. To determine your coverage tier or cost, call 866-601-6935.

Maintenance Drugs

If you take any maintenance prescription medications to treat certain ongoing medical conditions, you will need to fill your 90-day prescriptions in one of three ways:

- Through CVS/caremark’s mail order service;
- At a CVS retail pharmacy location; or
- At an Emory pharmacy.

Note: If you attempt to fill a maintenance drug at a pharmacy other than CVS or Emory, you will be charged the full retail cost.

TIP: Save Money on Your Prescriptions: One way to save on costs is to buy generic drugs. Always ask your doctor and/or pharmacist if a generic version is available.

<table>
<thead>
<tr>
<th>TIER</th>
<th>CO-INSURANCE</th>
<th>30-DAY RETAIL MINIMUM</th>
<th>30-DAY RETAIL MAXIMUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zero</td>
<td>0%</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>1</td>
<td>10%</td>
<td>$10</td>
<td>$25</td>
</tr>
<tr>
<td>2</td>
<td>20%</td>
<td>$20</td>
<td>$75</td>
</tr>
<tr>
<td>3</td>
<td>30%</td>
<td>$60</td>
<td>$120</td>
</tr>
<tr>
<td>4</td>
<td>40%</td>
<td>$90</td>
<td>$150</td>
</tr>
</tbody>
</table>

90-day supply is 2½ x the retail amount

Tier Zero Prescription Drugs

The POS Plan offers Tier Zero for prescription drugs. With Tier Zero, prescription medications used to prevent and treat chronic health conditions such as congestive heart failure, diabetes, high blood pressure, high cholesterol, tobacco addiction and more, are covered at 100% which means you pay $0 for these drugs. See page 22 for the current list of Tier Zero medications.

Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from Emory, the State of Georgia may have a premium assistance program that can help pay for coverage. States use funds from Medicaid or CHIP programs to help those who are eligible for these programs, but also have access to health insurance through an employer. For more information, go to: www.hr.emory.edu/mhsenrollment.
Medical Plan Rates

<table>
<thead>
<tr>
<th>2022-23 Medical Plan Contributions *</th>
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</thead>
<tbody>
<tr>
<td><strong>POS Plan</strong></td>
</tr>
<tr>
<td>**MONTHLY RATE ***</td>
</tr>
<tr>
<td>Employee only</td>
</tr>
<tr>
<td>Employee + child(ren)</td>
</tr>
<tr>
<td>Employee + spouse</td>
</tr>
<tr>
<td>Family</td>
</tr>
</tbody>
</table>

* These medical plan rates do not reflect the monthly $50 per person tobacco use surcharge. See below.

Tobacco Surcharge

To support the health and wellness of our faculty and staff, Emory has implemented a $50 per person monthly tobacco-use surcharge on medical contributions for employees and their spouses who are covered by an Emory medical plan and use tobacco products.

You must certify online in Self-Service whether or not you and your spouse have used tobacco within the last 60 days. The per person tobacco-use surcharge will be waived if:

- You certify that you and/or your spouse have not used tobacco within the last 60 days; OR
- You are currently being treated by a physician for a medical condition such as nicotine addiction. In this case, you will need to complete and return a Tobacco Free Physician Affidavit to the Benefits and Work Life Department. This form is available online at: www.hr.emory.edu/mhsenrollment.
# Medical Plan Quick Guide

<table>
<thead>
<tr>
<th>Earned Incentives</th>
<th>POS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$675/$1,100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>TIER 1</th>
<th>TIER 2</th>
<th>TIER 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Deductible - Single</strong></td>
<td>$850</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
<tr>
<td><strong>Annual Deductible - Family</strong></td>
<td>$2,550</td>
<td>$3,000</td>
<td>$6,000</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum(^3) - Single</strong></td>
<td>$3,000</td>
<td>$4,500</td>
<td>$11,250</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum(^3) - Family</strong></td>
<td>$6,000</td>
<td>$9,000</td>
<td>$22,500</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum(^3) - Aggregate</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Primary Care Office Visits(^4)</strong></td>
<td>$25 co-pay</td>
<td>$35 co-pay</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Pediatrician &amp; Behavioral Mental Health Office Visits</strong></td>
<td>$25 co-pay</td>
<td>$25 co-pay</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Specialist Office Visits</strong></td>
<td>$35 co-pay</td>
<td>$50 co-pay</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Diagnostic Labs</strong></td>
<td>15% co-insurance</td>
<td>25% co-insurance</td>
<td>50% co-insurance</td>
</tr>
<tr>
<td><strong>X-Ray</strong></td>
<td>15% after deductible</td>
<td>25% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Durable Medical Equipment</strong></td>
<td>15% co-insurance</td>
<td>25% co-insurance</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Routine Preventive Care(^5)</strong></td>
<td>$0 co-pay</td>
<td>$0 co-pay</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Emergency Room Visits(^6)</strong></td>
<td>$250 co-pay</td>
<td>$250 co-pay</td>
<td>$250 co-pay</td>
</tr>
<tr>
<td><strong>Hospitalizations: Inpatient/Outpatient Coverage</strong></td>
<td>15% after deductible</td>
<td>25% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Behavioral Health Inpatient</strong></td>
<td>15% after deductible</td>
<td>25% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Behavioral Health Outpatient</strong></td>
<td>$25 co-pay</td>
<td>$25 co-pay</td>
<td>$25 co-pay</td>
</tr>
</tbody>
</table>

\(^1\) An annual maximum of $675 in incentives can be earned (for Single level coverage) or $1,100 (for Employee+Spouse or Family level coverage).  
\(^2\) Amounts applied to deductible and out-of-pocket maximums are limited to the Reasonable and Customary charges.  
\(^3\) Out-of-Pocket maximum includes co-pays.  
\(^4\) Includes services of an internist, general physician, family practitioner, dermatologist, and/or allergist.  
\(^5\) Routine Preventive Care services ONLY are covered at 100% under the plan at the Tier 1 and Tier 2 levels. Diagnostic Labs are subject to coinsurance based on Tier level.  
\(^6\) Co-pay waived if admitted.

**DISCLAIMER:** Every attempt has been made to ensure the chart and information above accurately reflect the details of the plan. Should there be any errors, the terms and conditions of the Summary Plan Description (SPD) prevail.
Medical Plan Incentives

To encourage you and your spouse to take an active role in your health and well-being, Emory provides financial incentives for your participation in healthy activities. That’s right -- you can actually save money on your medical expenses by doing things that help you live a healthier lifestyle!

Incentives are applied to your medical plan; you will receive a credit towards your deductible and co-insurance.

Incentive activities must be completed between January 1, 2022 and November 15, 2022.

2022 INCENTIVES

Healthy Emory Connect Registration & Health Risk Assessment (RealAge®): Get started earning your incentives by registering through the Healthy Emory Connect platform and completing the RealAge® test. This incentive is for employees and spouses on the medical plan. Earn $75.*

Healthy Emory Connect Programs: Earn incentives by competing in challenges and participating in other virtual programs and activities offered through Healthy Emory Connect’s website and Sharecare mobile app. This incentive is for employees and spouses on the medical plan. Earn up to $350.*

Diabetes Prevention Program (DPP): This is for those employees who are at high risk of developing diabetes. DPP is a one-year, small group program that teaches you how to eat healthy, increase your physical activity, and manage your stress to prevent type 2 diabetes. This incentive is for employees on the medical plan. Earn up to $250.*

* You must join Healthy Emory Connect in order to receive these incentives.
Flexible Spending Accounts

Out-of-pocket expenses for medical care and dependent day care can be difficult to manage. Emory offers two types of Flexible Spending Accounts to help you set aside pre-tax funds to pay for these expenses.

OPEN TO NEW MEDICAL HOUSE STAFF MEMBERS ONLY!

A Flexible Spending Account (FSA) is funded with money you contribute on a pre-tax basis. You can use FSA funds to pay for qualified out-of-pocket health care costs for you and eligible dependents or dependent day care charges. According to IRS regulations, each year you must enroll during your benefits annual enrollment period if you want to participate in either a Healthcare FSA or a Dependent Day Care FSA. Aetna/PayFlex is Emory’s Flexible Spending Account Administrator. Your 2022 election will be for expenses from July 1, 2022 through December 31, 2022.

Remember: New and current Medical House Staff Members must re-enroll in the fall for 2023 Flexible Spending Accounts.

Healthcare FSA

You can contribute between $200 and $2,750 pre-tax annually into the Healthcare FSA. All money you elect to contribute is accessible immediately and can be used to cover out-of-pocket costs such as:

- Medical expenses: co-pays, deductibles, co-insurance
- Dental expenses: deductibles and co-insurance
- Vision expenses: prescription glasses, contact lenses, co-pays
- Prescription drug costs
- Over-the-counter drugs

Grace Period for Healthcare FSA

The risk of forfeiting money from your Healthcare FSA has been reduced by a grace period (extra time in the following year to use your FSA money). For those with a current 2022 FSA, you will be able to use any remaining balance in your Healthcare FSA at the end of 2022 to pay for expenses incurred through March 15, 2023. Any 2022 Healthcare FSA funds not used by March 15, 2023 will be forfeited. To avoid forfeiture, purchase items such as eyeglasses, contact lenses and other approved Healthcare FSA expenditures. Reimbursement requests using your previous year’s remaining Healthcare FSA balance must be filed by May 15, 2023. Please remember to keep all of your receipts and Explanation of Benefits from insurance companies as they are required for verification of expenses.

Dependent Day Care FSA

Money you contribute into a Dependent Day Care FSA can be used toward care for a child under age 13, a physically or mentally disabled parent or child, or elder care for tax-qualified dependents. If you’re single or married and filing a joint tax return, you can contribute up to $5,000 into this FSA. If you’re married and file separately, you can contribute up to $2,500. If you are a highly compensated employee under the IRS definition (i.e. you had Emory earnings of more than $130,000 for 2021), you are restricted to an annual contribution of no more than $2,400. Unlike the Healthcare FSA, you can only access the money that is currently in your account. To qualify for reimbursement, these expenses must be incurred so that you and/or your spouse can work or go to school.

No Grace Period for Dependent Day Care FSA

If you have a Dependent Day Care FSA, you do NOT have a grace period in which to use remaining previous year balances. All expenses must occur before December 31, 2022 and claims for 2022 Dependent Day Care FSA must be filed no later than May 15, 2023, to receive reimbursement. File by the May 15th deadline to avoid forfeiture of your 2022 FSA funds.
Flexible Spending Accounts

Aetna/PayFlex Debit Card

All new FSA participants will automatically receive a new debit card in the mail for 2022 Please activate the card when you receive it. Current FSA participants who elect FSAs for 2022 will have their new balances loaded onto their existing card. The use of the card is for convenience only. IRS guidelines still require you to retain receipts for any eligible expense for which you receive reimbursement. On occasion, Aetna may request verification of expenses and you will need to submit appropriate documentation for the expense. If not received, the card will be deactivated until the expense can be substantiated as eligible under IRS definitions. Check with Aetna to determine what supporting documentation is required. You can manage your account online at www.payflex.com.

GET REIMBURSED

1. Register on Aetna's website at www.aetna.com to download your medical or dental Explanation of Benefits (EOB).
3. Enroll in direct deposit.
4. Follow the steps to upload documents.
5. Receive reimbursement in a few days.
Dental Coverage

For 2022-23, you may elect the Aetna Traditional Dental (PPO). Details of the plan are provided below.

Plan 1 - Aetna Traditional Dental (PPO) Plan

The Aetna Traditional Dental (PPO) Plan is a traditional dental plan that allows you to see any dental provider. Some services require you to pay the deductible and applicable co-insurance. The deductible is a set amount that typically you pay before co-insurance starts. Co-insurance is the portion you must pay for services, in most cases, after meeting your deductible. Features of this plan include:

- Flexibility to choose any provider. This plan has a large number of In-Network providers.
- Reimbursements for most Out-of-Network claims.
- Preventive services received by either In-Network or Out-of-Network providers are covered at 100% up to reasonable and customary levels.

Some examples of routine preventive services include:

- Oral examinations
- Routine, deep cleanings and polishing (deep cleanings, or full mouth debridement, CPT 4355, are covered under preventive services as a replacement for one of your routine cleanings once in a 24 month period of time)
- Fluoride
- Sealants (permanent molars only)
- Bitewing X-rays
- Full Mouth Series X-Rays
- Space Maintainers

For more information, go to [www.aetna.com/docfind/custom/emory](http://www.aetna.com/docfind/custom/emory).

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### 2022-23 Dental Plan Contributions
(for Medical House Staff)

<table>
<thead>
<tr>
<th>Aetna PPO Plan</th>
<th>MONTHLY RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee only</td>
<td>$27.00</td>
</tr>
<tr>
<td>2-Person</td>
<td>$53.00</td>
</tr>
<tr>
<td>Family</td>
<td>$87.00</td>
</tr>
</tbody>
</table>
# Dental Plan Quick Guide

## Aetna Traditional PPO Plan

<table>
<thead>
<tr>
<th>Service</th>
<th>IN-NETWORK</th>
<th>OUT OF NETWORK¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services (routine &amp; deep cleanings, X-rays, etc.)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Basic Services (filling, root canal, etc.)</td>
<td>10%²</td>
<td>20%²</td>
</tr>
<tr>
<td>Major Restorative (crown, bridge, etc.)</td>
<td>50%²</td>
<td>50%²</td>
</tr>
<tr>
<td>Calendar Year Deductible³</td>
<td>$50/person $150/family</td>
<td>$50/person $150/family</td>
</tr>
<tr>
<td>Annual Plan Payment Maximums</td>
<td>$1,500/person</td>
<td>$1,500/person</td>
</tr>
<tr>
<td>Orthodontia:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Deductible</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>- Co-insurance</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>- Lifetime Maximum</td>
<td>$1,500</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

¹ Amounts applied to deductible are limited to the Reasonable and Customary charges
² After deductible
³ Waived for preventive services

**DISCLAIMER:** Every attempt has been made to ensure the chart and information above accurately reflect the details of the plan. Should there be any errors, the terms and conditions of the Summary Plan Description (SPD) prevail.
Vision Coverage

Emory offers an optional vision plan through EyeMed Vision Care. Some features of this plan include:

- Routine annual eye exam: $0 co-pay.
- Single, bifocal, trifocal, lenticular lenses: $0 co-pay.
- Progressive lenses: $65 co-pay.
- Frames: Up to $150 allowance, 20% off balance over $150.
- Contact lenses (conventional and disposable): $0 co-pay up to $200 allowance. 15% off balance over $200 on conventional lenses.
- Benefits provided once every 12 months for lenses or contact lenses.
- Contact lens and frame allowance are a one-time use benefit. Members are encouraged to use their full allowance at the time of initial service. Unused balances are not available for future visits during the same plan year in which the initial service was utilized.
- 40% off unlimited additional prescription eyewear purchases.
- 20% off nonprescription sunglasses.

For a complete list of the plan details, visit EyeMed Vision Care at: www.eyemedvisioncare.com.

<table>
<thead>
<tr>
<th>2022-23 Vision Plan Contributions</th>
<th>(for Medical House Staff)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EyeMed Vision Care</strong></td>
<td><strong>MONTHLY RATE</strong></td>
</tr>
<tr>
<td>Employee only</td>
<td>$12.28</td>
</tr>
<tr>
<td>Employee + child(ren)</td>
<td>$24.50</td>
</tr>
<tr>
<td>Employee + spouse</td>
<td>$23.28</td>
</tr>
<tr>
<td>Family</td>
<td>$36.08</td>
</tr>
</tbody>
</table>

EyeMed Providers

EyeMed Vision Care offers a large network of providers including the Emory Eye Center, LensCrafters, Pearle Vision and many more. For a complete list of providers, call 855-270-2343 or go to www.eyemedvisioncare.com: Select Find a Provider (top menu), enter your zip code, click on Choose Network and click Select, then click on Get Results.

Discount at the Emory Eye Center

Emory employees and their immediate family members are eligible to receive services and discounts at the Emory Eye Center. For a complete list of discounts, visit https://hr.emory.edu/eu/benefits/medical-house-staff/vision/index.html. To schedule an appointment, call 404-778-2020.

Important Note: Plan participants cannot use EyeMed Vision Care and discounts from the Emory Eye Center at the same time.

Vision Coverage through your Medical Plan

Medical House Staff members enrolled in Emory's medical plan receive one routine vision exam per calendar year at an optometrist or ophthalmologist. Because an annual vision exam is considered preventive care, it is covered at 100%. Locate a participating vision provider at www.aetna.com/docfind/custom/emory.
Life Insurance

Emory provides basic life insurance for all eligible Medical House Staff, eligible spouses and dependent children. Coverage for dependent children may continue through the age of 26, provided the child is not married. Coverage is provided at no cost to you. Enrollment is automatic for you but you must enroll your dependents. Life insurance benefits are administered by The Standard Insurance Company.

<table>
<thead>
<tr>
<th>Life Insurance</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Medical House Staff Member</td>
<td>$50,000</td>
</tr>
<tr>
<td>Spouse</td>
<td>$25,000</td>
</tr>
<tr>
<td>Child</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

Accidental Death and Dismemberment

Emory provides Accidental Death and Dismemberment Insurance for all eligible Medical House Staff in the amount of $50,000.

This insurance pays a benefit in the event of loss of life, loss of the use of more than one member (one arm, hand or foot) or the loss of sight in both eyes. Loss of sight means legal blindness. One-half of the full benefit amount is payable for loss of the use of one member or the loss of sight in one eye.

Long Term Disability (LTD)

Emory offers a long term disability benefit through UNUM. This benefit provides an income in the event you become disabled due to an injury or illness that is not work-related.

With long term disability (LTD) coverage provided by Emory, you can receive a benefit equal to 60% of your base salary in the event you are unable to work due to a non-work-related injury or illness. With LTD there is a 90-day elimination period. Emory’s LTD coverage has a monthly maximum benefit of $5,000. It is automatically provided on your date of hire in a benefits-eligible status. For LTD coverage, the 60% salary benefit is taxable to the recipient as LTD is employer paid.

Designate a Beneficiary

Since Emory provides you with life insurance benefits, you should designate a beneficiary. Your beneficiary is the person(s) who will receive your life insurance benefits when you die. Your beneficiary can be a person or multiple people, charitable institutions or your estate. Once named, your beneficiary remains on file until you make a change. If your family situation changes, you will want to review the beneficiaries on file and make updates if necessary. If you do not name a beneficiary, your life insurance benefits will be distributed in accordance with the policy. Use Self-Service to designate a beneficiary.
Other Benefits

**AFLAC**

Emory provides a voluntary coverage through AFLAC for Hospital, Cancer and Accident insurance. These policies are available at group rates that are lower than those typically available to individual policy holders. You have access to a wide range of policy and rider insurance products through AFLAC. Coverage is portable in the event that you leave Emory. For more information or to schedule an appointment to receive a personal quote, call AFLAC at 877-384-3344 or visit online at www.aflac.com/emory.

**Home & Auto Insurance**

Emory provides access to this voluntary coverage through MetLife for home and auto insurance. This coverage is available at group rates that are lower than those typically available to individual policy holders. You have access to a wide range of personal property and casualty insurance products through MetLife. You may get coverage for your automobile, boat, motor home or recreational vehicle. Policies for your rental property, house or condo are also available. Your coverage is portable, so in the event that you leave Emory, you may continue your coverage through MetLife’s direct bill program. For more information or to receive a personal quote for Home and Auto, call MetLife at 800-GET-MET8 (800-438-6388).

**529 Plans for College Savings**

**The Georgia Higher Education Saving Plan (529 Education Plan)**

If you’re making future education plans for your child or other beneficiary, the Georgia Higher Education Savings Plan offers a low-cost way to save money for a child’s college education. Contributions to the plan are made on an after-tax basis, but earnings are tax free if they are spent on qualified educational expenses. Participants can open an account by payroll deduction, with as little as $25 per investment option. While there is no annual contribution limit, there is an overall maximum account balance limit of $235,000. You can enroll in the plan at any time. For more information, call 877-424-4377 or visit online at www.path2college529.com.

**The Private College 529 Plan**

The Private College 529 Plan, sponsored by more than 270 private colleges across the country (including Emory), is a pre-paid tuition plan. The plan allows families to purchase tuition at today’s prices that can be used at any member school tomorrow, for up to 30 years, and the increase in value is tax free. The plan protects families from tuition increases and market volatility. Account owners pay no fees so 100% of contributions go toward the purchase of tuition. Participants can enroll in the plan at any time and contribute as little as $25 a month. Enroll in and view member schools at www.tomorrowstuitiontoday.org or call 888.718.7878.
Retirement Savings

Emory’s 403(b) Savings Plan will provide a basic contribution of 1% of eligible salary for all current Medical House Staff members. If you are a newly hired Medical House Staff member and your start date is on the first of the month, you will receive Emory's basic contribution during the month of your hire. If you are hired after the first of the month, your contributions will begin the first of the following month.

403(b) Savings Plan

A 403(b) plan is a tax-deferred retirement plan available to employees of educational institutions and certain non-profit organizations. Emory’s 403(b) Savings Plan allows you to contribute a percentage of your pay before taxes and receive a basic contribution from Emory. Contributions and investment earnings grow tax-deferred until withdrawal, assumed to be retirement, at which time they are taxed as ordinary income. Medical House Staff do not have to make their own contribution in order to receive Emory’s Basic Contribution. Full-time and part-time Medical House Staff members who are at least 21 years of age and who work at least 20 hours are eligible to participate in the 403(b) Savings Plan.

Emory’s 403(b) savings plan offers a variety of investment options. From the simplest of options, or mixing and matching to develop your own investment mix, you can create the retirement portfolio that is right for you. You can choose to invest with one or all three of Emory’s retirement plan vendors: Fidelity Investments, TIAA, and/or Vanguard. If you do not select funds, you will be placed in the default Lifecycle Fund of your selected vendor(s) until you make your selections. Lifecycle Investments are allocated and invested based on your projected retirement timeline, starting out with a higher allocation to stocks when you are younger, and then reallocating gradually toward more conservative assets as you get closer to retirement. Vanguard is the default vendor for Emory (if a vendor is not selected within the enrollment period window). For more information, visit the Benefits website at https://hr.emory.edu/eu/benefits/medical-house-staff/index.html.

403(b) Roth

The 403(b) Roth allows individuals to save for retirement by contributing after-tax dollars. At the time of distribution, in retirement, the withdrawal of your contributions are tax-free; however, the earnings on any contributions are taxed unless your account has been open at least five years and you have reached age 59½.

You have the option of directing 403(b) contributions to either the 403(b) Savings Plan or the 403(b) Roth, or some combination of the two plans that does not exceed that year’s contribution limits set by the IRS.

Vesting

Your contributions and Emory’s Contributions are 100% vested. There are no service requirements to be completely vested.

How to Enroll

You can enroll in the 403(b) Savings Plan or 403(b) Roth at any time throughout the year (enrollment is not limited to the benefits annual enrollment period). Enroll using Self-Service (http://leo.cc.emory.edu). You can also make changes to your contribution amounts at any time throughout the year using Self-Service. Visit https://hr.emory.edu/eu/benefits/medical-house-staff/index.html for more information.

Retirement Plan Counseling

Fidelity Investments, TIAA and Vanguard offer individual retirement counseling sessions throughout the year. To view the counseling schedule and to make an appointment, visit the benefits website.
Resources

Summary of Benefits and Coverage

All employers are required to provide an eight-page Summary of Benefits and Coverage (SBC) for all the health plans available to their employees. Emory’s SBC is available online at: www.hr.emory.edu/mhsenrollment.

Tier 1 Network

Providers and facilities in the Tier 1 Network give you the maximum benefit available under the plans, with lower co-pays, co-insurance and deductibles.

Tier 1 facilities include:

- Emory University Hospital
- Emory University Hospital Midtown
- Emory Decatur Hospital
- Emory Long Term Acute Care
- Emory Hillandale Hospital
- Emory University Orthopaedics & Spine Hospital
- Emory Johns Creek Hospital
- Emory Rehabilitation Hospital, in partnership with Select Medical
- Children’s Healthcare of Atlanta (including Egleston and Scottish Rite)
- Grady Memorial Hospital (including Hughes Spalding)
- Emory Saint Joseph’s Hospital
- St. Francis Hospital (Columbus)
- Wesley Woods Geriatric Hospital

Tier 1 physicians include:

- Emory physicians
- DeKalb Physician Hospital Organization (DPHO)
- Community physicians

To locate a participating Tier 1 physician or facility, go to www.aetna.com/docfind/custom/emory or call Aetna at 800-847-9026.

Out-of-State Coverage

If you or your covered dependents live outside of Georgia, search for providers in the Tier 2 Network at www.aetna.com/docfind/custom/emory.

International Coverage

If you live or travel outside the U.S., coverage for urgent/acute care is provided at the Tier 2 Network level. Routine care will be covered at the Tier 3 level. Call Aetna at 800-847-9026 for more information.

Emergency Coverage

Emergencies are always covered at the Tier 2 Network co-pay or co-insurance level. Contact Aetna within 48 hours.

8-EVIP (404-778-3847) Appointment Line

Emory Healthcare is committed to the health care needs of Emory’s employees and to meet this commitment, will facilitate and expedite employee access to Emory providers. The EVIP Appointment Line was developed for this purpose. Emory Employees and family members can simply call 404-778-EVIP for expedited access to Emory physicians. Features include:

- Senior level call agents answering from 8:00 am to 5:00 pm, M-F, who can assist you in making appointments with Emory Clinic providers.
- Assurance that non-urgent appointments will be scheduled within 14 days with the first available provider. If your preferred provider is not available, we will connect you with another well-qualified Emory Clinic provider or Emory-affiliated practice.
- Assurance that urgent appointments will be clinically reviewed to secure an appointment within a medically appropriate time frame.
The Emory Express Care Clinic

NOTE: The Express Care Clinic has suspended its services until further notice due to the COVID-19 pandemic.

The Express Care Clinic provides Emory University employees with free evaluation and treatment of common illnesses, such as: Influenza, sinus problems, common cold, ear pain, rashes, pink eye, urinary pain, and acute musculoskeletal injuries. Services do not include treatment for chronic conditions, such as high blood pressure, diabetes and high cholesterol.

Express Care Clinic visits are by appointment only, as there is limited capacity. Acute occupational accidents and exposures are considered a priority and take precedent over other express care appointments. To schedule an appointment, contact the location most convenient for you:

- **Emory University Hospital**
  2nd floor, D-Wing
  Hours: M-F, 7:30 am to 4:00 pm by appointment only
  Phone: 404-686-8587

- **Emory University Hospital Midtown**
  W.W. Orr Building, 6th Floor
  Hours: M-F, 7:30 am to 4:00 pm by appointment only
  Phone: 404-686-2352

- **Emory Johns Creek Hospital**
  MOB, Suite 303
  Hours: Friday, 8:00 am to 3:00 pm
  (appointments recommended, walk-ins subject to availability)
  Phone: 404-686-8587

- **Emory Saint Joseph’s Hospital**
  Hours: M-F, 7:30 am to 4:00 pm by appointment only
  Phone: 678-843-7174

To request an invitation, contact your provider’s office, complete an online registration form at www.emoryhealthcare.org/patientportal, or call 404-727-8820.

Note: If you see an outpatient private practice provider, that provider may have a separate portal in place. Please contact your provider directly.

The Pharmacy at Emory

The Pharmacy at Emory is a full-service pharmacy with a convenient, on-campus location. Hours are: 9:00 am to 6:00 pm, M-F. For more information, call 404-778-2022 or visit: www.emoryhealthcare.org/pharmacy.

Emory HealthConnection

Emory HealthConnection is available to assist you in selecting the right Emory provider to meet your needs. Emory HealthConnection can be reached online at www.emoryhealthcare.org or by calling 404-778-7777.

Emory Healthcare Patient Portal

If you receive care from an Emory Healthcare physician, you are encouraged to sign up for the Emory Healthcare Patient Portal Technology – a convenient and secure health-management tool. Patient portal technology provides you with increased access to your care team, resources and empowerment to manage your health.
## Tier Zero Prescription Drug List

### ANTIRETROVIRAL THERAPY *
- Emtricitabine/tenofovir disoproxil fumarate 200 mg – 300 mg

### BLOOD PRESSURE & HEART FAILURE
- Acebutolol HCL
- Amiodarone HCL
- Amlodipine Besylate
- Amlodipine/Olmesartan
- Amlodipine/Olmesartan/HCT
- Amlodipine/Valsartan
- Amlodipine/Telmisartan
- Atenolol
- Atenolol/Chlorthalidone
- Benazepril HCL
- Benazepril/Hydrochlorothiazide
- Betaxolol HCL
- Bisoprol/Hydrochlorothiazide
- Bisoprolol Fumarate
- Captopril
- Captopril/Hydrochlorothiazide
- Candesartan Cilexetil
- Candesartan Cilexetil/Hydrochlorothiazide
- Carvedilol
- Clonidine HCL
- Digoxin
- Diltiazem HCL
- Doxazosin Mesylate
- Enalapril Maleate
- Enalapril/Hydrochlorothiazide
- Eplerenone
- Esmolol HCL
- Felodipine
- Fosinopril Sodium
- Fosinopril/Hydrochlorothiazide
- Furosemide
- Guanabenz Acetate
- Guanfacine HCL
- Hydralazine HCL
- Hydralazine/Hydrochlorothiazide
- Hydrochlorothiazide
- Irbesartan
- Irbesartan/Hydrochlorothiazide
- Isosorbide Dinitrate
- Isosorbide Mononitrate
- Irsadipine
- Labetalol HCL
- Lisinopril
- Lisinopril/Hydrochlorothiazide
- Losartan Potassium
- Losartan Potassium/Hydrochlorothiazide
- Methyldopa
- Metolozone
- Metoprol/Hydrochlorothiazide
- Metoprolol Succinate
- Metoprolol Tartrate
- Minoxidil
- Moexipril HCL
- Moexipril/Hydrochlorothiazide
- Nadolol
- Nicardipine HCL
- Nifedipine
- Nimodipine
- Nisoldipine
- Nitroglycerin
- Olmesartan
- Olmesartan/Hydrochlorothiazide
- Papaverine HCL
- Pindolol
- Prazosin HCL
- Propranolol HCL
- Propranolol/Hydrochlorothiazide
- Quinapril HCL
- Ramipril
- Reserpine
- Sotalol
- Spironolact/Hydrochlorothiazide
- Telmisartan
- Telmisartan/Hydrochlorothiazide
- Terazosin HCL
- Timolol Maleate
- Torsemide
- Trandolapril
- Trandolapril/Veralamipril
- Triamterene/Hydrochlorothiazide
- Valsartan
- Valsartan/Hydrochlorothiazide
- Verapamil HCL

### CHOLESTEROL LOWERING
- Amlodipine Besylate/Atorvastatin Calcium
- Atorvastatin Calcium
- Cholestyramine
- Colestipol HCL
- Ezetimibe
- Fenofibrate
- Fenofibric acid
- Fluvastatin
- Gemfibrozil
- Lovastatin
- Niacin
- Omega-3 Polyunsaturated FA
- Pravastatin Sodium
- Simvastatin
- Rosuvastatin

### CONTRACEPTIVES
- Oral Contraceptives: Monophasic/Biphasic/Triphasic Generic Agents
- Non-Oral Contraceptive: NuvaRing
- Non-Oral Contraceptive: Ortho Evra

### DIABETES
- Acarbose
- Acetohexamide
- Alogliptin
- Alogliptin/Metformin
- Alogliptin/Pioglitazone
- Chlorpropamide
- Glimepiride
- Glibizide
- Glyburide, ext-rel
- Glyburide/Metformin HCL
- Metformin HCL
- Metformin ext-rel
- Metformin/Repaglinide
- Miglitol
- Nateglinide
- Pioglitazone
- Pioglitazone HCl/Metformin HCl
- Repaglinide
- Tolazamide
- Tolbutamide

### SMOKING CESSATION
- Nicotrol NS
- Nicotrol Inhaler
- Bupropion HCl (smoking deterrent)
  SR 12 hr 150 mg
- Zyban
- Chantix

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*Generic antiretroviral therapy for preexposure prevention of human immunodeficiency virus (HIV) infection in people who are at an increased risk.

As prescription drugs come off patent protection (lose brand status), become available as generics, or over-the-counter, this list will change.

For the most up-to-date list, contact CVS Caremark at 866-601-6935, www.caremark.com.
# Numbers & Websites

<table>
<thead>
<tr>
<th>VENDOR/ORGANIZATION</th>
<th>PHONE NUMBER</th>
<th>WEBSITE(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emory University Benefits and Work Life Department</td>
<td>404-727-7613</td>
<td><a href="http://www.hr.emory.edu/benefits">www.hr.emory.edu/benefits</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Enrollment site: <a href="http://www.hr.emory.edu/mhsenrollment">www.hr.emory.edu/mhsenrollment</a></td>
</tr>
<tr>
<td>Aetna Medical (Medical, Behavioral Mental Health, Incentives)</td>
<td>800-847-9026</td>
<td><a href="http://www.aetna.com">www.aetna.com</a></td>
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<tr>
<td></td>
<td></td>
<td><a href="http://www.aetna.com/docfind/custom/emory">www.aetna.com/docfind/custom/emory</a></td>
</tr>
<tr>
<td>PayFlex (Health Savings Account &amp; Flexible Spending Account)</td>
<td>888-678-8242</td>
<td><a href="http://www.payflex.com">www.payflex.com</a></td>
</tr>
<tr>
<td>Aetna Dental (PPO)</td>
<td>877-238-6200</td>
<td><a href="http://www.aetna.com/docfind/custom/emory">www.aetna.com/docfind/custom/emory</a></td>
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<tr>
<td>AFLAC</td>
<td>877-374-6909</td>
<td><a href="http://www.aflac.com/emory">www.aflac.com/emory</a></td>
</tr>
<tr>
<td>CVS/caremark (Pharmacy Manager)</td>
<td>866-601-6935</td>
<td><a href="http://www.caremark.com">www.caremark.com</a></td>
</tr>
<tr>
<td>Emory Employees Appointment Line (EVIP)</td>
<td>404-778-EVIP</td>
<td>N/A</td>
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<tr>
<td>Emory Express Care Clinic</td>
<td>404-686-8587</td>
<td><a href="https://www.hr.emory.edu/eu/wellness/general-health/occupational-injury-management/express-care-clinic.html">https://www.hr.emory.edu/eu/wellness/general-health/occupational-injury-management/express-care-clinic.html</a></td>
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<tr>
<td>EyeMed Vision Care (Vision Plan)</td>
<td>855-270-2343</td>
<td><a href="http://www.eyemedvisioncare.com">www.eyemedvisioncare.com</a></td>
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<tr>
<td>Fidelity Investments (Retirement Plans)</td>
<td>800-343-0860</td>
<td><a href="http://www.netbenefits.com">www.netbenefits.com</a></td>
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<tr>
<td>MetLife Home and Auto</td>
<td>800-GET-MET8</td>
<td><a href="https://mybenefits.metlife.com">https://mybenefits.metlife.com</a> (code: Emory University)</td>
</tr>
<tr>
<td>The Pharmacy at Emory</td>
<td>404-778-2022</td>
<td><a href="http://www.emoryhealthcare.org/pharmacy">www.emoryhealthcare.org/pharmacy</a></td>
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<tr>
<td>TIAA (Retirement Plans)</td>
<td>800-842-2252</td>
<td><a href="http://www.tiaa.org">www.tiaa.org</a></td>
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<tr>
<td>The Standard (Life Insurance)</td>
<td>866-756-8118</td>
<td><a href="http://www.standard.com">www.standard.com</a></td>
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<tr>
<td>UNUM (Long Term Disability)</td>
<td>800-421-0344 (Customer Service)</td>
<td><a href="http://www.unum.com">www.unum.com</a></td>
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<td></td>
<td>800-858-6843 (Claims)</td>
<td></td>
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<tr>
<td>Vanguard (Retirement Plans)</td>
<td>800-523-1188</td>
<td><a href="http://www.vanguard.com/retirementplans">www.vanguard.com/retirementplans</a></td>
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TAKE ACTION!

Emory University’s annual benefits enrollment for Medical House Staff is June 1 through June 14, 2022. Find out what’s new for 2022-23 and the steps you need to take to enroll in your benefits for the upcoming year.