



2025

Open enrollment
benefits overview





Novant Health is committed to providing affordable and robust benefit solutions to help you meet your needs at every stage of life.

Your Novant Health benefits program includes options to elect medical, dental, vision and life insurance coverage for you and your family, as well as other healthcare coverage. Short- and long-term disability benefits, bereavement leave and a caregiver support program provide an extra measure of support. You can save tax-free for eligible healthcare expenses in a Health Savings Account, or save tax-free for both healthcare and dependent care expenses like childcare with a Flexible Spending Account. Additionally, Retirement Plus, our defined contribution retirement plan, helps provide an income during your retirement years.

This open enrollment we all have important decisions to make. To have benefits coverage in 2025, you must log in to **Infor** and enroll in benefits Nov. 6 through Nov. 20.

Your care. Your choice. Your move.

Visit benefits.NovantHealth.org for plan details.

Team members in the South Carolina Coastal region should refer to the SC Coast section of I-Connect for more information on their benefits and Open Enrollment.



2025 benefits enrollment

What's new for 2025
When and how to enroll

What's new for 2025

Novant Health believes that delivering remarkable experiences for our patients requires us to deliver remarkable care for our team members.

We care about the things that matter to you. We listened to your feedback in the 2023 Benefits Survey, and we're taking action by offering more medical plan choices, and more support to care for yourself and your loved ones.

With these guiding principles in mind, Novant Health is introducing a number of changes and enhancements for 2025.

New choices

We are offering new medical plan options to help you choose the type of plan, premiums and providers that best meet your needs. We are also making changes to some of your current medical plan options.

- **NEW Novant Health Premier Plan:** This plan prioritizes care within our service areas and market. The Novant Health Premier Plan will offer the lowest deductibles, out-of-pocket maximums and premiums of all the medical plan options.
- **NEW High Deductible Health Plan:** This plan is paired with a Health Savings Account (HSA) that provides you the opportunity to set aside money, tax-free, to help cover the cost of the higher deductible. Novant Health will also contribute to your HSA to help ease the burden of the higher deductible.
- **Cigna Standard Plan and Premium Plan:** You will continue to have the option to enroll in these medical plans. However, there are some changes to the plan benefits for 2025.
- **Eliminating the Surest Plan:** The Surest Plan will not be available beginning Jan. 1, 2025.

New care

We listened to your requests for more support when you need to be with your family or provide care for them — and have made the following enhancements and additions.

- **Expanded Bereavement Policy:** The expanded policy will provide additional paid leave when you experience the loss of extended family members.
- **New caregiver support program:** Family First, a caregiver support program, connects you with accredited care experts who take a comprehensive approach to solving all the challenges that arise when you need to find facilities, in-home care or resources for people in your care.

New actions

All team members are required to enroll for benefits during the open enrollment period. Your elections for 2024 will not automatically carry over to 2025. **You must log into Infor Nov. 6 through Nov. 20 to enroll in benefits.**

You will not be able to enroll after Nov. 20 unless you have an IRS qualifying life or employment event in 2025.

Your care. More ways to care for your loved ones.

Your choice. New medical plan choices to suit your healthcare and financial needs.

Your move. You must log in to Infor to enroll, or you will not have benefits next year.

When and how to enroll

Open enrollment is Nov. 6 through Nov. 20.

This year is an **active enrollment**. That means **all team members must enroll to have benefits for 2025**. Your elections for 2024 will not carry over to 2025.

If you do not log in to Infor to enroll during open enrollment the only benefits coverage you will have for 2025 are:

- Basic life insurance (company paid)
- Long-term disability (company paid)
- Short-term disability with 30-day elimination period

All other benefit elections, including medical benefits, will default to no coverage (or waive). You will not be able to enroll or make benefits changes after Nov. 20 unless you experience an IRS qualifying life or employment event in 2025.

Spouse mandate for medical coverage

If your spouse is employed and eligible for employer-sponsored group medical coverage, they cannot be enrolled in a Novant Health medical plan; however, if your spouse is self-employed, unemployed/retired/disabled or their employer does not offer group medical coverage to its employees, your spouse may be eligible for medical coverage with Novant Health.

If you cover a spouse, you must verify they are not eligible for employer-sponsored group medical coverage in 2025. Verification may be completed by submitting the spousal survey in Infor. Novant Health may conduct periodic audits of an enrolled spouse's eligibility.

How to complete your benefits enrollment ...

FROM A NOVANT HEALTH COMPUTER

1. From the I-Connect homepage, select Tools and Services > Team member services > Infor HR & Workforce Management (WFM).
2. The Infor Employee Experience portal will open, select the Benefits icon.
3. Infor HR Talent tab will open in the Infor portal. Under Employee Menu, select Benefits.
4. Select Open Enrollment.

FROM A PERSONAL COMPUTER

1. Go to **NovantHealth.org/Team-Members**.
2. Select the Infor Workforce Management (WFM) link.
3. Follow the steps to log in and select Infor HR Talent from the waffle icon.
4. Once the Infor Employee Experience portal opens, select the Benefits icon.
5. Select Open Enrollment.

Note: If accessing outside of the Novant Health network, you will need to use PingID to authenticate. Please follow instructions on NovantHealth.org/Team-Members for PingID installation and registration.

If you do not enroll by Nov. 20, you will not have benefits coverage through Novant Health on Jan. 1, 2025.

If you have questions or require assistance, please call **800-890-5420** or submit an inquiry via ServiceNow.



Plans and benefits

- Medical benefits
- Pharmacy benefits
- Dental benefits
- Vision benefits
- Flexible Spending Accounts (FSAs)
- Accident insurance
- Critical illness insurance
- Hospital care plan
- Life insurance
- Disability
- Legal
- Time off
- Caregiver support program
- Well-being programs
- Novant Health Retirement Plus Plan
- Team Member Advantages

Medical benefits

You can choose from four medical plan options in 2025:

- **NEW** Novant Health Premier Plan
- Cigna Standard Plan
- Cigna Premium Plan
- **NEW** High Deductible Health Plan with Health Savings Account (HDHP with HSA)

All four plans include prescription drug coverage through MedImpact and have out-of-pocket maximums that place a cap on what you pay for covered services in a plan year.

Below is a summary of each of your medical plan options. Details, including costs for coverage and per paycheck premiums for each of the plans, are on the following pages. See **pages 18-19** for a side-by-side comparison of plan benefits, costs and coverage.

Insurance Terms to Understand

Premium — the amount you pay per paycheck for benefits coverage.

Deductible — the amount of your covered medical expenses you must pay up front, out of your own pocket, before your medical plan starts paying a percentage of your expenses.

Coinsurance — the percentage you pay for your covered expenses after you meet your deductible. The plan pays the remaining percentage.

Copay — a fixed dollar amount you pay for services such as doctor or specialist visits — instead of a deductible or coinsurance percentage.

Out-of-pocket maximum — the most you will pay for covered expenses in a plan year. This generally includes your deductible, coinsurance and copays combined. If you reach the out-of-pocket maximum, the plan pays 100% of the cost of your covered expenses for the remainder of the year. Each plan provides this protective limit for any one individual's expenses, as well as for a family's total expenses.

Networks or Tiers — each provider falls under a category or "tier." The tier determines how much you pay and how much the plan pays for the service you receive.

Novant Health Premier Plan

The Novant Health Premier Plan has the lowest premiums, deductibles, copays and coinsurance for services received within the Novant Health Plus Network. When team members prioritize seeking care from Novant Health providers and facilities within the greater Charlotte, greater Winston-Salem and Coastal region markets they benefit from higher coverage levels.

Cigna Standard Plan

The Cigna Standard plan has higher deductibles, copays, out-of-pocket maximums and premiums than the Novant Health Premier Plan. Team members have access to care in the Enhanced Network, Preferred Network and Non-preferred Network. Team members who participate in well-being activities are eligible to earn incentives from Novant Health to the plan's Health Reimbursement Account (HRA). See 2025 well-being programs on **page 29** for more information on HRA contributions.

Cigna Premium Plan

The Cigna Premium Plan offers higher premiums (the amount you pay per paycheck) in exchange for lower deductibles, copays and coinsurance. Plan participants in certain coverage tiers receive an initial deposit from Novant Health to the Health Reimbursement Account (HRA). They are also eligible for additional contributions from Novant Health for participating in the well-being program. See 2025 well-being programs on **page 29** for more information on HRA contributions.

High Deductible Health Plan with Health Savings Account

The High Deductible Health Plan has the highest deductible but includes a Health Savings Account (HSA) to help you set aside pre-tax funds to cover your medical expenses. This plan does not have copays. You pay 100% of your medical expenses until you meet your deductible. Then your coinsurance kicks in to cover a percentage of your costs. You will continue to pay a percentage of your costs until you have reached your annual out-of-pocket limit. Novant Health will contribute \$750/individual and \$1,500/family to your HSA annually.

Novant Health Premier Plan

The Novant Health Premier Plan prioritizes care within the Novant Health Plus Network to provide excellent care and the lowest deductibles, out-of-pocket maximums and premiums of all our plans.

The plan provides three tiers of coverage. It's important to understand how each of them works.

Novant Health Plus Network

Known as Tier 1 or Novant Health Plus Network. It includes Novant Health providers, clinics and facilities, plus select independent providers; and Non-Novant Health providers in the Cigna Open Access Plus Network in each market — greater Charlotte market, greater Winston-Salem market and the Coastal region. **This network is not the same as the Enhanced Network in the other medical plans.**

Alternative Network

Known as Tier 2 or Alternative Network. This is the Cigna Open Access Plus Network (not included in the Novant Health Plus Network). If you choose to utilize this network, there is a higher member cost.

Out-of-Network

Known as Tier 3 and is the highest cost tier.

Note: Novant Health completes network reviews on a regular basis. Team members are encouraged to use the "Find a Doctor" tool at Cigna.com to confirm their provider and/or facility's current tier of coverage prior to seeking care

It is your responsibility to utilize doctors and facilities in the Novant Health Plus Network to get the best coverage.

PLAN FEATURES	NOVANT HEALTH PREMIER PLAN		
	Novant Health Plus Network	Alternative Network	Out-of-Network
DEDUCTIBLE: Copays do not apply to the deductible. Deductibles cross-accumulate.			
Employee Only	\$700	\$3,200	\$7,000
Employee/Child(ren)	\$1,400	\$6,400	\$14,000
Employee/Spouse	\$1,400	\$6,400	\$14,000
Employee/Family	\$1,400	\$6,400	\$14,000
OUT-OF-POCKET MAXIMUMS: Includes deductible, coinsurance and copays. All out-of-pocket tiers cross-accumulate. Medical and pharmacy are separate limits for all plans except the High Deductible Health Plan.			
Employee Only	\$2,500	\$6,800	\$14,000
Employee/Child(ren)	\$5,000	\$13,600	\$28,000
Employee/Spouse	\$5,000	\$13,600	\$28,000
Employee/Family	\$5,000	\$13,600	\$28,000
Rx Out-of-Pocket Maximum	\$1,600 EE Only, \$3,200 Family	\$1,600 EE Only, \$3,200 Family	Not Covered

What happens if...

I am on vacation in another state and I think I have the flu.

Novant Health team members should contact their PCP office to determine next steps. If the team member is unable to contact their PCP or cannot be seen via a virtual health platform, the team member should consider utilizing a **Convenience care clinic** or **Urgent care**, both of which would be subject to Tier 2 deductible and coinsurance.

If experiencing a medical emergency, you are strongly encouraged to go to the closest emergency room.

Keep in mind that any claims incurred outside of the Novant Health Plus Network will be subject to the Alternative Network (Tier 2) or Out-of-Network (Tier 3) benefit level.

I have chest pains when visiting family in California.

Seek immediate care at the closest emergency room. For true emergencies, the Novant Health Premier Plan will cover the cost at the Novant Health Plus Network benefit after you pay your deductible and coinsurance, regardless of the facility that you use.

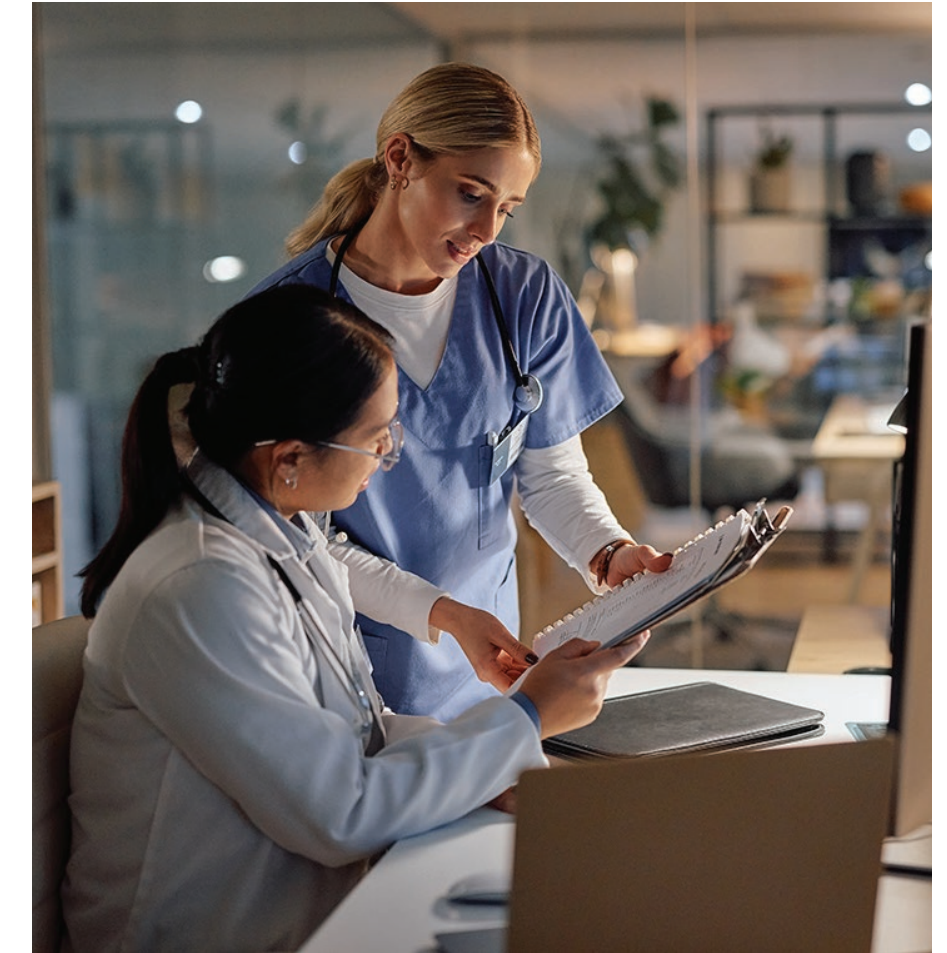
My daughter is living in Cullowhee, NC while she attends Western Carolina University and she needs to see a provider.

There are no Novant Health providers in her area. If you enroll in this plan, your daughter will need to wait until she is in the Novant Health service area to get the preferred Tier 1 benefit. If she chooses a provider in the Alternative Network or Out-of-Network, there will be higher out-of-pocket costs.

I enroll in the Novant Health Premier Plan and change my mind later.

Your benefits will remain in effect until December 31, 2025 unless you experience an IRS qualifying life event. In this instance, you have 31 days from the date of the event to submit a life event in Infor to update your benefit elections. The change you are eligible to make must be consistent with the event that you have experienced.

Compare the medical plan networks, coverage and costs side-by-side on pages 18-19.



Cigna Standard Plan and Premium Plan

The Cigna Standard Plan and Premium Plan both offer varying degrees of coverage and cost to you. There are four tiers of coverage under each plan.

Enhanced Network

Known as Tier 1 or Novant Health Network. Includes all Novant Health facilities, clinics and providers. Also includes some independent providers in our communities.

Preferred Network

Known as Tier 2 or Cigna Network. This is the default in-network tier and includes the Cigna Open Access Plus Network.

Non-Preferred Network

Known as Tier 3. Applies to facility charges at local non-domestic facilities.

Out-of-Network

Known as Tier 4 and is the highest cost tier.

Note: Novant Health completes network reviews on a regular basis. Team members are encouraged to use the "Find a Doctor" tool at Cigna.com to confirm their provider and/or facility's current tier of coverage prior to seeking care.



PLAN FEATURES	CIGNA STANDARD PLAN				CIGNA PREMIUM PLAN			
	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
DEDUCTIBLE: Copays do not apply to the deductible. Deductibles cross-accumulate								
Employee Only	\$1,200	\$2,200	\$3,200	\$4,400	\$900	\$1,950	\$2,800	\$3,850
Employee/Child(ren)	\$2,400	\$4,400	\$6,400	\$8,800	\$1,800	\$3,900	\$5,600	\$7,700
Employee/Spouse	\$2,400	\$4,400	\$6,400	\$8,800	\$1,800	\$3,900	\$5,600	\$7,700
Employee/Family	\$2,400	\$4,400	\$6,400	\$8,800	\$1,800	\$3,900	\$5,600	\$7,700
OUT-OF-POCKET MAXIMUMS: Includes deductible, coinsurance and copays. All tiers cross-accumulate. Medical and pharmacy are separate limits for all plans except the High Deductible Health Plan								
Employee Only	\$4,200	\$6,200	\$6,800	\$9,400	\$3,200	\$5,000	\$5,600	\$7,700
Employee/Child(ren)	\$8,400	\$12,400	\$13,600	\$18,800	\$6,400	\$10,000	\$11,200	\$15,400
Employee/Spouse	\$8,400	\$12,400	\$13,600	\$18,800	\$6,400	\$10,000	\$11,200	\$15,400
Employee/Family	\$8,400	\$12,400	\$13,600	\$18,800	\$6,400	\$10,000	\$11,200	\$15,400
Rx Out-of-Pocket Maximum	\$1,600 EE Only / \$3,200 Family			\$1,600 EE Only / \$3,200 Family				

Health Reimbursement Account (HRA)

PLAN FEATURES	2025 CIGNA STANDARD PLAN			2025 CIGNA PREMIUM PLAN		
	Fixed with Salary: <\$150,000	Fixed with Salary: >\$150,000	Wellness Incentive up to:	Fixed with Salary: <\$150,000	Fixed with Salary: >\$150,000	Wellness Incentive up to:
Employer-Funded Health Reimbursement Account (HRA)						
Employee Only	\$0	\$0	\$900	\$0	\$0	\$900
Employee/Child(ren)	\$0	\$0	\$900	\$375	\$0	\$900
Employee/Spouse	\$0	\$0	\$1,175	\$450	\$0	\$1,175
Employee/Family	\$0	\$0	\$1,175	\$750	\$0	\$1,175

High Deductible Health Plan

This health plan has the highest deductible but qualifies for a Health Savings Account (HSA). Team members will receive preventive care at no cost, however, you will pay for medical claims up to the deductible before the plan coinsurance will apply.

Novant Health will contribute a total of \$750 per individual or \$1,500 per family to your HSA annually. Contributions are made in lump sum (\$250 per individual, \$500 per family) and per paycheck installments (\$19.23 per individual, \$38.46 for family).*

In addition to the HSA funding provided by Novant Health, team members can set aside pre-tax dollars to save for when you incur claims in the future. An HSA is a tax-free account that you can use to pay for current and future medical expenses (even medical expenses during retirement). Money in your HSA rolls over year to year and the account is always yours — even if you change employers.

Federal tax regulations restrict the amount contributed to an HSA. In 2025, contributions are limited to:

- Employee Only Health Coverage: \$4,300
- Employee with any dependent Health Coverage: \$8,550
- Catch-up provision for those 55 & up: \$1,000

Health Savings Accounts (HSAs) offer a unique triple-tax advantage

1. **Contributions are tax-deductible:** The money you put into an HSA reduces your taxable income for the year.
2. **Earnings grow tax-free:** Any interest or investment gains in the account are not subject to taxes.
3. **Withdrawals for qualified medical expenses are tax-free:** When you use HSA funds for eligible healthcare costs, you don't pay taxes on those withdrawals.

This combination makes HSAs a powerful tool for saving on healthcare expenses — and the money that you and Novant Health contribute to your account is yours to keep forever.

* HSA paycheck contributions are pro-rated for new hires.

Please note that IRS regulations dictate that if you enroll in the High Deductible Health Plan with a Health Spending Account, any existing HRA balances will be forfeited effective Jan. 1, 2025.

Enhanced Network

Known as Tier 1 or Novant Health Network. Includes all Novant Health facilities, clinics and providers. Also includes some independent providers in our communities.

Preferred Network

Known as Tier 2 or Cigna Network. This is the default in-network tier and includes the Cigna Open Access Plus Network.

Non-Preferred Network

Known as Tier 3. Applies to facility charges at local non-domestic facilities.

Out-of-Network

Known as Tier 4 and is the highest cost tier.

Note: Novant Health completes network reviews on a regular basis. Team members are encouraged to use the "Find a Doctor" tool at Cigna.com to confirm their provider and/or facility's current tier of coverage prior to seeking care.

Please note that IRS regulations dictate that if you enroll in the High Deductible Health Plan with a Health Spending Account, any existing HRA balances will be forfeited effective January 1, 2025.



PLAN FEATURES	HIGH DEDUCTIBLE HEALTH PLAN WITH HEALTH SAVINGS ACCOUNT			
	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
DEDUCTIBLE: Deductibles cross-accumulate.				
Employee Only	\$2,000	\$3,000	\$4,000	\$7,000
Employee/Child(ren)	\$4,000	\$6,000	\$8,000	\$14,000
Employee/Spouse	\$4,000	\$6,000	\$8,000	\$14,000
Employee/Family	\$4,000	\$6,000	\$8,000	\$14,000
OUT-OF-POCKET MAXIMUMS: Includes deductibles and coinsurance. All tiers cross accumulate. Medical and pharmacy are combined for the High Deductible Health Plan.				
Employee Only	\$6,000	\$7,500	\$8,300	\$14,000
Employee/Child(ren)	\$12,000	\$15,000	\$16,600	\$28,000
Employee/Spouse	\$12,000	\$15,000	\$16,600	\$28,000
Employee/Family	\$12,000	\$15,000	\$16,600	\$28,000
Rx Out-of-Pocket Maximum	Combined with Medical			

HEALTH SAVINGS ACCOUNT CONTRIBUTION SCHEDULE		
Novant Health Contributions	Individual	Family
Jan. 1, 2025	\$250	\$500
Per paycheck	\$19.23	\$38.46
Annual total	\$750	\$1,500

Medical plan comparison

PLAN FEATURES	NOVANT HEALTH PREMIER PLAN			2025 CIGNA STANDARD PLAN			
	Novant Health Plus Network	Alternative Network	Out-of-Network	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
DEDUCTIBLE							
Employee Only	\$700	\$3,200	\$7,000	\$1,200	\$2,200	\$3,200	\$4,400
Employee/Child(ren)	\$1,400	\$6,400	\$14,000	\$2,400	\$4,400	\$6,400	\$8,800
Employee/Spouse	\$1,400	\$6,400	\$14,000	\$2,400	\$4,400	\$6,400	\$8,800
Employee/Family	\$1,400	\$6,400	\$14,000	\$2,400	\$4,400	\$6,400	\$8,800
OUT-OF-POCKET MAX							
Employee Only	\$2,500	\$6,800	\$14,000	\$4,200	\$6,200	\$6,800	\$9,400
Employee/Child(ren)	\$5,000	\$13,600	\$28,000	\$8,400	\$12,400	\$13,600	\$18,800
Employee/ Spouse	\$5,000	\$13,600	\$28,000	\$8,400	\$12,400	\$13,600	\$18,800
Employee/Family	\$5,000	\$13,600	\$28,000	\$8,400	\$12,400	\$13,600	\$18,800
Rx Out-of-Pocket Maximum	\$1,600 EE Only / \$3,200 Family		Not Covered	\$1,600 EE Only / \$3,200 Family			Not Covered
Physician Office Services, Excluding Surgery	\$10	25%	50%	\$25	25%	25%, tier 2 ded/ooop	50%
Specialist Office Services, Excluding Surgery	\$35	25%	50%	\$65	25%	25%, tier 2 ded/ooop	50%
Primary Care Physician Copay/Virtual Visit	\$10	25%	50%	\$25	25%	25%, tier 2 ded/ooop	50%
Health Savings Account — Novant Health Funding	N/A			N/A			

Ded/ooop is an abbreviation of deductible and out-of-pocket maximum.

Medical plan comparison (continued)

PLAN FEATURES	2025 CIGNA PREMIUM PLAN				HIGH DEDUCTIBLE HEALTH PLAN WITH HEALTH SAVINGS ACCOUNT			
	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
DEDUCTIBLE								
Employee Only	\$900	\$1,950	\$2,800	\$3,850	\$2,000	\$3,000	\$4,000	\$7,000
Employee/Child(ren)	\$1,800	\$3,900	\$5,600	\$7,700	\$4,000	\$6,000	\$8,000	\$14,000
Employee/Spouse	\$1,800	\$3,900	\$5,600	\$7,700	\$4,000	\$6,000	\$8,000	\$14,000
Employee/Family	\$1,800	\$3,900	\$5,600	\$7,700	\$4,000	\$6,000	\$8,000	\$14,000
OUT-OF-POCKET MAX								
Employee Only	\$3,200	\$5,000	\$5,600	\$7,700	\$6,000	\$7,500	\$8,300	\$14,000
Employee/Child(ren)	\$6,400	\$10,000	\$11,200	\$15,400	\$12,000	\$15,000	\$16,600	\$28,000
Employee/Spouse	\$6,400	\$10,000	\$11,200	\$15,400	\$12,000	\$15,000	\$16,600	\$28,000
Employee/Family	\$6,400	\$10,000	\$11,200	\$15,400	\$12,000	\$15,000	\$16,600	\$28,000
Rx Out-of-Pocket Maximum	\$1,600 EE Only / \$3,200 Family			Not Covered	Combined with Medical			
Physician Office Services, Excluding Surgery	\$20	25%	25%, tier 2 ded/ooop	50%	10%	25%	25%, tier 2 ded/ooop	50%
Specialist Office Services, Excluding Surgery	\$50	25%	25%, tier 2 ded/ooop	50%	10%	25%	25%, tier 2 ded/ooop	50%
Primary Care Physician Copay/Virtual Visit	\$20	25%	25%, tier 2 ded/ooop	50%	10%	25%	25%, tier 2 ded/ooop	50%
Health Savings Account — Novant Health Funding	N/A				\$750 Individual/\$1,500 Family			

Ded/ooop is an abbreviation of deductible and out-of-pocket maximum.

Medical plan features

PLAN FEATURES	NOVANT HEALTH PREMIER PLAN			2025 CIGNA STANDARD PLAN			
	Novant Health Plus Network	Alternative Network	Out-of-Network	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
ALL COINSURANCE AMOUNTS IN-NETWORK AND OUT-OF-NETWORK ARE AFTER THE CALENDAR YEAR DEDUCTIBLE, EXCEPT WHERE NOTED.							
Preventive Care	\$0	\$0	50%	\$0	\$0	\$0	50%
PCP Office Services, Excluding Surgery	\$10	25%	50%	\$25	25%	25%, tier 2 ded/oop	50%
Specialist Office Services, Excluding Surgery	\$35	25%	50%	\$65	25%	25%, tier 2 ded/oop	50%
Hospital Inpatient Services	5%	25%	50%	15%	25%	40%, tier 3 ded/oop	50%
Hospital Outpatient Services	5%, No Deductible*	25%	50%	15%, No Deductible*	25%	40%, tier 3 ded/oop	50%
Physician Inpatient Visits	5%	25%	50%	15%	25%	25%, tier 2 ded/oop	50%
Physician Surgery, Office	\$60	25%	50%	\$85	25%	25%, tier 2 ded/oop	50%
Physician Surgery, IP and OP	\$75	25%	50%	\$200	25%	25%, tier 2 ded/oop	50%
Hospital Emergency Room	15%	15%	15%	20%	20%	20%, tier 3 ded/oop	20%
Urgent Care Facility	\$15	25%	50%	\$35	25%	40%, tier 3 ded/oop	50%
Hospital IP MH and SA	5%	5%, tier 1 ded/oop	50%	15%	15%, tier 1 ded/oop	15%, tier 1 ded/oop	50%
Physician Office MH and SA	\$10	\$10	50%	\$25	\$25	\$25	50%
PT, OT and ST, No Visit Limit	\$10	\$25	50%	\$25	\$40	40%, tier 3 ded/oop	50%
Maternity, Hospital	5%	25%	50%	15%	25%	40%, tier 3 ded/oop	50%
Maternity, Physician Global	\$75	25%	50%	\$200	25%	25%, tier 2 ded/oop	50%
Durable Medical Equipment**	5%	5%, tier 1 ded/oop	50%	15%	15%, tier 1 ded/oop	40%, tier 3 ded/oop	50%

* Not all hospital-based providers at Novant Health facilities are in the Novant Health Plus Network or Enhanced Network (tier 1), so you will receive the Cigna network (tier 2) benefit if the hospital-based provider is not in the Novant Health Plus Network or Enhanced Network. Novant Health is seeking to expand the number of hospital-based providers in the Novant Health Network.

** Novant Health Plus Network and Enhanced Network tier applies when DME services are obtained through Cigna's DME, eviCore.

Ded/oop is an abbreviation of deductible and out-of-pocket maximum.

Medical plan features (continued)

PLAN FEATURES	2025 CIGNA PREMIUM PLAN				HIGH DEDUCTIBLE HEALTH PLAN WITH HEALTH SAVINGS ACCOUNT			
	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network	Enhanced Network	Preferred Network	Non-Preferred Network	Out-of-Network
ALL COINSURANCE AMOUNTS IN-NETWORK AND OUT-OF-NETWORK ARE AFTER THE CALENDAR YEAR DEDUCTIBLE, EXCEPT WHERE NOTED.								
Preventive Care	\$0	\$0	\$0	50%	\$0	\$0	\$0	50%
PCP Office Services, Excluding Surgery	\$20	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Specialist Office Services, Excluding Surgery	\$50	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Hospital Inpatient Services	10%	25%	40%, tier 3 ded/oop	50%	10%	25%	40%, tier 3 ded/oop	50%
Hospital Outpatient Services	10%, No deductible*	25%	40%, tier 3 ded/oop	50%	10%	25%	40%, tier 3 ded/oop	50%
Physician Inpatient Visits	10%	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Physician Surgery, Office	\$75	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Physician Surgery, IP and OP	\$100	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Hospital Emergency Room	15%	15%	15%, tier 3 ded/oop	15%	10%	10%	10%	10%
Urgent Care Facility	\$20	25%	40%, tier 3 ded/oop	50%	10%	25%	40%, tier 3 ded/oop	50%
Hospital IP MH and SA	10%	10%, tier 1 ded/oop	10%, tier 1 ded/oop	50%	10%	10%, tier 1 ded/oop	10%, tier 1 ded/oop	50%
Physician Office MH and SA	\$20	\$20	\$20	50%	10%	10%, tier 1 ded/oop	10%, tier 1 ded/oop	50%
PT, OT and ST, No Visit Limit	\$20	\$35	40%, tier 3 ded/oop	50%	10%	25%, tier 1 ded/oop	40%, tier 3 ded/oop	50%
Maternity, Hospital	10%	25%	40%, tier 3 ded/oop	50%	10%	25%	40%, tier 3 ded/oop	50%
Maternity, Physician Global	\$100	25%	25%, tier 2 ded/oop	50%	10%	25%	25%, tier 2 ded/oop	50%
Durable Medical Equipment**	10%	10%, tier 1 ded/oop	40%, tier 3 ded/oop	50%	10%	10%, tier 1 ded/oop	40%, tier 3 ded/oop	50%

* Not all hospital-based providers at Novant Health facilities are in the Novant Health Plus Network or Enhanced Network (tier 1), so you will receive the Cigna network (tier 2) benefit if the hospital-based provider is not in the Novant Health Plus Network or Enhanced Network. Novant Health is seeking to expand the number of hospital-based providers in the Novant Health Network.

** Novant Health Plus Network and Enhanced Network tier applies when DME services are obtained through Cigna's DME, eviCore.

Ded/oop is an abbreviation of deductible and out-of-pocket maximum.

Plan premiums

FULL-TIME TEAM MEMBER Classified as 30 hours or more per week			
Novant Health Premier Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$444.48	\$425.35	\$19.13
Employee/Child(ren)	\$928.93	\$851.24	\$77.69
Employee/Spouse	\$995.60	\$870.05	\$125.55
Employee/Family	\$1,404.53	\$1,259.68	\$144.85
Cigna Standard Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$401.18	\$363.04	\$38.14
Employee/Child(ren)	\$838.43	\$724.61	\$113.82
Employee/Spouse	\$898.61	\$729.93	\$168.68
Employee/Family	\$1,267.69	\$1,054.34	\$213.35
Cigna Premium Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$420.64	\$349.63	\$71.01
Employee/Child(ren)	\$879.11	\$702.18	\$176.93
Employee/Spouse	\$942.20	\$705.44	\$236.76
Employee/Family	\$1,329.19	\$1,018.90	\$310.29
High Deductible Health Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$383.80	\$329.23	\$54.57
Employee/Child(ren)	\$799.52	\$654.15	\$145.37
Employee/Spouse	\$852.77	\$650.05	\$202.72
Employee/Family	\$1,179.33	\$917.51	\$261.82

TM = Team Member

PART-TIME TEAM MEMBER Classified as 24 to 29 hours per week			
Novant Health Premier Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$444.48	\$336.70	\$107.78
Employee/Child(ren)	\$928.93	\$679.06	\$249.87
Employee/Spouse	\$995.60	\$693.80	\$301.80
Employee/Family	\$1,404.53	\$998.00	\$406.53
Cigna Standard Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$401.18	\$288.01	\$113.17
Employee/Child(ren)	\$838.43	\$576.06	\$262.37
Employee/Spouse	\$898.61	\$581.72	\$316.89
Employee/Family	\$1,267.69	\$840.83	\$426.86
Cigna Premium Plan			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$420.64	\$265.29	\$155.35
Employee/Child(ren)	\$879.11	\$535.25	\$343.86
Employee/Spouse	\$942.20	\$538.82	\$403.38
Employee/Family	\$1,329.19	\$778.88	\$550.31
High Deductible Health Plan with HSA (rates include NH HSA contributions)			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$383.80	\$249.54	\$134.26
Employee/Child(ren)	\$799.52	\$496.40	\$303.12
Employee/Spouse	\$852.77	\$492.63	\$360.14
Employee/Family	\$1,179.33	\$690.75	\$488.58

Plan premiums (continued)

DENTAL PAYROLL PREMIUMS			
COVERAGE LEVEL	TOTAL COST	LESS NH \$	TM COST
Employee Only	\$20.11	\$11.84	\$8.27
Employee/Child(ren)	\$43.46	\$16.30	\$27.16
Employee/Spouse	\$41.78	\$15.19	\$26.59
Employee/Family	\$70.98	\$34.99	\$35.99

VISION PAYROLL PREMIUMS	
COVERAGE LEVEL	TM COST
Employee Only	\$5.17
Employee/Child(ren)	\$8.11
Employee/Spouse	\$8.29
Employee/Family	\$13.35

Note: Payroll premiums are made on a bi-weekly basis. They are made pre-tax which lowers the amount of taxes you pay. Your first paycheck in 2025 will reflect the premiums for the plan coverage you have elected for 2025.

Pharmacy benefits

You automatically receive prescription drug benefits when you enroll in a Novant Health medical plan. However, each plan covers prescription drug benefits differently.

Prescription drug benefits are provided through MedImpact. You can call MedImpact toll-free at **833-726-0668** with any questions.

Some important notes about pharmacy benefits

- The out-of-pocket maximum per calendar year for the **Novant Health Premier Plan, Cigna Standard and Cigna Premium Plan** is:
 - \$1,600 — Employee Only
 - \$3,200 — Family (\$1,600 out-of-pocket maximum for any one member)
- The **High Deductible Health Plan** has a **combined medical and pharmacy out-of-pocket maximum** per calendar year:
 - \$6,000 — Employee Only
 - \$12,000 — Family (\$6,000 out-of-pocket maximum for any one member)
- Team members enrolled in the High Deductible Health Plan have access to no-cost preventive drugs.
- Generic drugs are mandatory unless a dispense-as-written (DAW) waiver has been prescribed by your doctor or provider. The difference between the cost of brand and generic is not covered under the copay or out-of-pocket limits.
- Tiers 4 through 6 are filled by the Novant Health Specialty Pharmacy. Call the Novant Health Specialty Pharmacy toll-free at **855-307-6868**.
- Team members have a choice in where prescriptions can be filled and **prescriptions filled at Novant Health pharmacies or Walgreens have more favorable copays.**

Pharmacy plan comparison

PLAN FEATURES	NOVANT HEALTH PREMIER PLAN		
Prescription Drugs	Novant Health Pharmacies and Walgreens Retail Pharmacies (30-and 90-day Supplies)	Non-Walgreens Retail Pharmacies (30-day Supply)	Novant Health Pharmacies/ Walgreens Prescription Home Delivery (90-day Supply)
Rx Deductible	N/A	\$150 for brand drugs	N/A
Rx Out-of-Pocket Maximum	\$1,600 EE Only / \$3,200 Family		
Preventive Drug List	N/A	N/A	N/A
Tier 1 - Generics	\$5 (30 days)/ \$12 (90 days)	\$10	\$12
Tier 2 - Preferred Brands	\$35 (30 days)/ \$85 (90 days)	\$40 + 20% up to \$150	\$85
Tier 3 - Non-Preferred Brands	\$60 (30 days)/ \$180 (90 days)	\$85 + 40% up to \$150	\$180
Tier 4 - Specialty generics	\$70 (30-day limit)	Not Covered	\$70 (30-day limit)
Tier 5 - Specialty Preferred Brands	\$100 (30-day limit)	Not Covered	\$100 (30-day limit)
Tier 6 - Specialty Non-Preferred Brands	\$200 (30-day limit)	Not Covered	\$200 (30-day limit)
OOP Maximum per Claim	N/A	\$150	N/A

Pharmacy plan comparison (continued)

PLAN FEATURES	2025 CIGNA PREMIUM PLAN + 2025 STANDARD PLAN			CIGNA HIGH DEDUCTIBLE HEALTH PLAN WITH HEALTH SAVINGS ACCOUNT		
Prescription Drugs	Novant Health Pharmacies and Walgreens Retail Pharmacies (30-and 90-day Supplies)	Non-Walgreens Retail Pharmacies (30-day Supply)	Novant Health Pharmacies/ Walgreens Prescription Home Delivery (90-day Supply)	Novant Health Pharmacies and Walgreens Retail Pharmacies (30-and 90-day Supplies)	Non-Walgreens Retail Pharmacies (30-day Supply)	Novant Health Pharmacies/ Walgreens Prescription Home Delivery (90-day Supply)
Rx Deductible	N/A	\$150 for brand drugs	N/A	\$2,000/\$4,000		
Rx Out-of-Pocket Maximum	\$1,600 EE Only / \$3,200 Family			\$6,000/\$12,000		
Preventive Drug List	N/A	N/A	N/A	No Cost	No Cost	No Cost
Tier 1 - Generics	\$10 (30 days)/ \$25 (90 days)	\$15	\$25	Deductible, then 10% Coinsurance	Deductible, then 25% Coinsurance	Deductible, then 10% Coinsurance
Tier 2 - Preferred Brands	\$40 (30 days)/ \$100 (90 days)	\$45 + 20% up to \$250	\$100	Deductible, then 10% Coinsurance	Deductible, then 25% Coinsurance	Deductible, then 10% Coinsurance
Tier 3 - Non-Preferred Brands	\$80 (30 days)/ \$240 (90 days)	\$100 + 40% up to \$250	\$240	Deductible, then 10% Coinsurance	Deductible, then 25% Coinsurance	Deductible, then 10% Coinsurance
Tier 4 - Specialty generics	\$100 (30-day limit)	Not Covered	\$100 (30-day limit)	Deductible, then 10% Coinsurance	Not Covered	Deductible, then 10% Coinsurance
Tier 5 - Specialty Preferred Brands	\$150 (30-day limit)	Not Covered	\$150 (30-day limit)	Deductible, then 10% Coinsurance	Not Covered	Deductible, then 10% Coinsurance
Tier 6 - Specialty Non-Preferred Brands	\$400 (30-day limit)	Not Covered	\$400 (30-day limit)	Deductible, then 10% Coinsurance	Not Covered	Deductible, then 10% Coinsurance
OOP Maximum per Claim	N/A	\$250	N/A	N/A	N/A	N/A

Dental benefits

The dental plan is administered by Cigna and offers in-network and out-of-network coverage. Preventive care is covered at 100%, basic care at 80% and major restorative services at 50%. Orthodontia is covered at 50% for children and adults and provides a lifetime orthodontia maximum of \$1,500 per covered patient.

Vision benefits

The vision plan is administered by VSP and covers annual eye exams, lenses and frames or contact lenses in lieu of eyeglasses. Many in-network services are covered in full or require a copay, and a plan allowance is associated with many out-of-network services. Discounts are available on laser vision correction, additional glasses and sunglasses and lens enhancements.

Flexible spending accounts

Flexible spending accounts (FSAs), administered by WEX, allow you to set aside pre-tax money to pay for eligible out-of-pocket healthcare or dependent care expenses. The healthcare FSA allows you to set aside up to \$3,050* for eligible expenses, and the dependent care FSA allows you to set aside up to \$5,000* (\$2,500* if married and filing separately) for child care or adult dependent care expenses. Be sure to calculate your expenses conservatively. FSA account balances do not carry over from year to year. Due to IRS regulations any unused portion of the money left over in your account after the claim submission deadline at the end of the year will be forfeited.

* The IRS sets pre-tax limits for healthcare and dependent care FSAs annually. 2025 limits have not been set as of the date of this publication. 2024 limits are shown for planning purposes. Visit IRS.gov for the latest rates.

Accident insurance

Accident insurance pays a benefit directly to you if you or an eligible dependent suffer a covered injury. This benefit can help cover out-of-pocket expenses related to these injuries, such as hospitalization, physical therapy, transportation and more. There are no health questions or physical exams required. Coverage is portable, and you can take your policy with you if you change jobs or retire. You pay the full cost of coverage through payroll deductions.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Critical illness insurance

Critical illness insurance reduces the financial impact of a major illness, such as a heart attack, stroke or cancer. The policy pays a lump sum benefit directly to you once you or a covered family member is diagnosed with a covered condition. You choose the benefit amount when you enroll. Coverage is portable, and you can take your policy with you if you change jobs or retire. You pay the full cost of coverage through payroll deductions.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Hospital care plan

Hospital care coverage provides a fixed benefit when a covered person incurs a hospital stay due to a covered injury or illness. You can use the money however you would like to help pay for expenses such as child care, travel or other out-of-pocket expenses. As with Accident and Critical Illness coverage, this coverage is portable, meaning you can take your policy with you if you change jobs or retire. You pay the full cost of coverage through payroll deductions.

Life Insurance

Basic life

Novant Health provides 1.5x your base pay in basic life insurance, at no cost to you, up to a maximum coverage amount of \$1,000,000. Enrollment is automatic, but you should enter beneficiary information into Infor.

Supplemental life

You may choose to purchase supplemental life and accidental death and dismemberment (AD&D) insurance in addition to the company-paid life insurance benefit. Supplemental life insurance can be purchased in the following increments up to the maximum amount of \$1,000,000:

- 1x base pay
- 2x base pay
- 3x base pay
- 4x base pay
- 5x base pay

Dependent life insurance coverage options for your spouse and children are also available.

If you choose to enroll in supplemental life insurance after your initial eligibility period has closed, the supplemental life insurance election will not be valid until you have submitted the Hartford EOI application and received approval.

Accidental death and dismemberment coverage is available as employee-only or family coverage. Spouses over the age of 70 years old are not eligible for AD&D coverage. Coverage options range from \$25,000 to \$500,000.

Disability

Short-term disability

Novant Health offers short-term disability coverage, which pays a benefit of 60% of your base pay, up to \$2,500 per week.

While short-term disability coverage is voluntary, you will be defaulted to the plan that pays 60% of pay after 30 days. You can use open enrollment to change to the 15-day plan or opt out of short-term disability coverage altogether. If you opt out, future elections will require evidence of insurability and you will be subject to approval or denial by the carrier.

Team members pay the full cost of short-term disability with after-tax dollars so that the benefit is received tax-free should you need it. If you choose to enroll in short-term disability coverage after your initial eligibility period has closed, the short-term disability election will not be valid until you have submitted the Hartford EOI application and received approval.

Long-term disability

Novant Health provides long-term disability coverage at no cost to you. The plan pays a benefit of 60% of your base pay after a 90-day waiting period, with a maximum benefit of \$15,000 per month.

MetLife legal plan

Whether it's a planned event like buying a home or preparing a will, or an unexpected problem like a speeding ticket, most of us need legal counsel at some point, and quality legal assistance can be expensive. It can also be hard to know how to find an attorney you trust. With MetLife Legal Plans, you can have a team of top attorneys ready to help you take care of life's planned and unplanned legal events.

Time off

Paid Time Off (PTO)

The purpose of PTO is to provide team members with flexible paid time off from work that can be used for needs such as vacations, personal or family illness, holidays, doctor appointments, school, volunteerism and other activities of your choice. You earn PTO based on your years of service with Novant Health.

NOVANT HEALTH PTO SCHEDULE 2025				
Years of Service	Months of Service	Annual Accrual (Days)	Bi-Weekly Accrual (Hours)*	Hourly Accrual Rate
Less than 1	0-11	Will vary	8.00	0.100000
1 but less than 2	12-23	29	8.92	0.111538
2 but less than 5	24-59	31	9.54	0.119231
5 but less than 15	60-179	34	10.47	0.130875
15+	180+	39	12.00	0.150000

* Accrual is based on a 40-hour work week.

Paid leaves of absence

Novant Health provides benefits-eligible team members who have been employed for at least 12 months and have worked 1,250 hours during the prior 12 months with the following paid leaves of absence:

- **Parental leave** — Eligible team members are provided with four weeks of paid parental leave at 100% of base pay to allow for the care and well-being of their newborn or adopted child.
- **Caregiver leave** — Eligible team members may take one week of paid leave at 100% of base pay to care for a parent, spouse or child under age 18 experiencing a serious health condition as defined by the Family and Medical Leave Act.
- **Bereavement leave** — Eligible team members may take paid leave when you experience the loss of a loved one.

40 hours	Current spouse and child (including pregnancy loss and stepchild)
24 hours	Father, mother, father-in-law*, mother-in-law*, brother or sister, step-parent, step-sibling, legal guardian, grandparent* and grandchild*
8 hours	Brother-in-law, sister-in-law, son-in-law and daughter-in law

* Coverage expanded to 24 hours effective Jan. 1, 2025.

Military leave supplemental pay benefit

Novant Health is proud of team members who make personal and professional sacrifices to serve in the U.S. Armed Forces or National Guard. These team members may be activated to support national and international military operations, and when their military pay is less than the base hourly rate of pay at Novant Health, it can be a hardship on the team member and family. Therefore, Novant Health provides supplemental pay equal to the difference between compensation (excluding payments for room and board) for military duty and the team member's base hourly rate of pay. Military pay supplements will be reviewed annually.

Caregiver support program

Family First connects you with accredited care experts who take a comprehensive approach to solving all the challenges that arise when you need to find facilities, in-home care or resources for people in your care.

Connect with a personal care expert and manage your care plan using the Family First Digital Care Hub. Visit Family First online at care.family-first.com or call **1-800-214-5410**.

2025 well-being programs

At Novant Health, our patients' well-being depends upon your well-being. All team members are encouraged to participate in our well-being activities and all benefits-eligible team members have the opportunity to earn incentives, including team members who are not enrolled in a Novant Health medical plan.

2025 WELL-BEING PROGRAM INCENTIVE STRUCTURE		
Participant	Incentive Cap	Incentive Format
Novant Health Premier Plan, Cigna Standard Plan and Cigna Premium Plan — enrolled team member	\$900	HRA, through MotivateMe platform*
Novant Health Premier Plan, Cigna Standard Plan and Cigna Premium Plan — enrolled spouse (Includes spouses employed and not employed by Novant Health)	\$275	HRA, through MotivateMe platform**
HDHP-enrolled team member	\$250	Rewards/points, through the Novant Health well-being portal
HDHP-enrolled spouse, spouses not employed by Novant Health	Not eligible	N/A
Non-enrolled benefits-eligible team member and Novant Health-employed spouse enrolled as a dependent on the High Deductible Health Plan	\$100	Rewards/points, through the Novant Health well-being portal

* Team members enrolled in the Premier, Standard or Premium medical plans will be eligible to utilize the MotivateMe platform and access living healthy incentive opportunities through the well-being portal.

** Novant Health employed team member spouses who are enrolled as a dependent in the Premier, Standard or Premium medical plan will have access to the well-being portal.

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

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-890-5420.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-890-5420.

Visit I-Connect to learn more about the Novant Health well-being portal, including instructions on how to access and how to earn rewards.

Novant Health Retirement Plus Plan

Your benefits package at Novant Health includes the Novant Health Retirement Plus Plan. Fidelity Investments provides recordkeeping services for the Plan. You can contact them for assistance or with any questions.

Newly hired team members will be automatically enrolled in the Plan at a pre-tax contribution rate of 4% of your gross pay. Your contributions will be directed to a State Street Target Retirement Fund** based on your date of birth unless you direct otherwise. You have 90 days in which to opt out of the Plan by contacting Fidelity and changing your deferral rate to 0%. If you opt out within 90 days, any contributions, adjusted for market gains and losses while deferred to the Plan, can be requested to be returned to you.

Retirement plan elections should rollover from 2024 to 2025; however, team members are encouraged to log into their Fidelity account to confirm.

You can access your account at Fidelity by logging on to Fidelity NetBenefits® at netbenefits.com/NovantHealth. Click *Register* at the top of the screen to establish your username and password.



Screenshots are for illustrative purposes.

Screenshots are for illustrative purposes.

* To make a contribution election that is different than the automatic enrollment contribution rate of 4% of your gross pay, contribution rate changes must be entered into Fidelity NetBenefits. Contact the Fidelity Retirement Service Center at 800-343-0860 if you have questions, or if you require additional information.

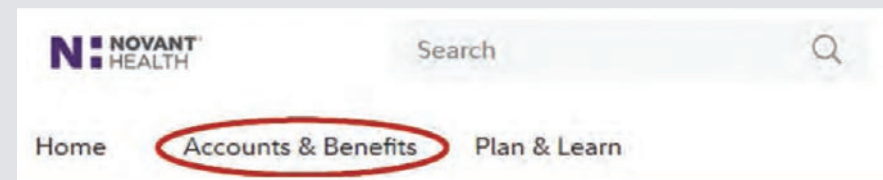
** Target Date Funds are an asset mix of stocks, bonds and other investments that automatically becomes more conservative as the fund approaches its target retirement date and beyond. Principal invested is not guaranteed.

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If you already have other accounts with Fidelity, you can use your existing log in information to access your Novant Health account. After logging in, choose Accounts & Benefits from the ribbon at the top and select Manage Contributions. Select your Plan and change your deferral rate to 0% if you do not wish to participate in the Plan.



You can also contact the Fidelity Retirement Service Center at **800-343-0860**. Service Representatives are available from 8:30 a.m. to midnight ET Monday through Friday, except for New York Stock Exchange holidays excluding Good Friday.

While you are not required to participate in the Plan, we hope you will choose to remain enrolled and take an active role in your retirement planning.

Here are some features of the Plan:

Contributions: You can contribute 1 to 60% of your salary on a pre-tax and/or Roth basis to the Plan in 0.1% increments.

Novant Health contributes to your retirement through a dollar-for-dollar match of the first 6% you contribute to the Tax Deferred Savings Plan of Novant Health. Newly eligible team members will be eligible for the matching contribution on their date of hire. The match is contributed to the Savings and Supplemental Retirement Plan of Novant Health. We encourage you to contact Fidelity and consider increasing your contribution rate to 6% to take full advantage of the matching contribution.

Vesting: When you are "vested" in your savings, it effectively means the money is yours to keep. You are always 100% vested in your contributions to the Plan. The matching contribution is vested after three years of service. You earn one year of vesting service for each calendar year in which you are paid for at least 1,000 hours.

Auto Increase Program: An optional program that automatically increases your contribution rate by 1 to 3% on an annual basis. You choose the amount and the date of the increase and can opt out at any time.

Investment Options: The Plan offers a full range of investment options to help you reach your retirement savings goals.

Fidelity BrokerageLink: BrokerageLink® includes investments beyond those in your plan's lineup. You should compare investments and share classes that are available in your plan's lineup with those available through BrokerageLink and determine the available investment and share class that is appropriate for your situation. The plan fiduciary, Novant Health, neither evaluates nor monitors the investments available through BrokerageLink. It is your responsibility to ensure that the investments you select are suitable for your situation, including your goals, time horizon and risk tolerance. Reference the fact sheet and commission schedule for applicable fees and risks.

Online planning tools: Fidelity offers a wide variety of investment analysis and retirement planning tools on NetBenefits®. Click the **Plan & Learn** link at the top left of the NetBenefits homepage and click the **Plan your path to retirement** link to access the Fidelity Planning and Guidance Center.

Before investing in any mutual funds, consider the investment objectives, risks, charges and expenses.

Contact Fidelity for a prospectus or, if available, a summary prospectus containing this information. Read it carefully. Investing involves risk, including risk of loss.

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Other information about your Plan:

Fidelity Workplace Financial Consultants: Fidelity offers one-on-one consultations if you have any questions about retirement planning or would like help determining which investment options may be right for you. You can contact the Fidelity Retirement Planning Team at **800-642-7131** or schedule an appointment online at fidelity.com/reserve. Select **Schedule a time to meet**, enter Novant Health Inc. as the employer name, select **Virtual Appointment** under Appointment Type, choose your preferred date and time, then click **register**.

For help choosing your investments or distribution options that are right for you, call **800-642-7131** to speak with a Fidelity Representative.

Online Beneficiaries Service: It is important to designate your beneficiaries for the Plan. You can designate, review or update your beneficiary elections using Fidelity's secure online election tool located under the Profile link after logging into NetBenefits at netbenefits.com/NovantHealth. You can also contact the Fidelity Retirement Service Center for a beneficiary form at **800-343-0860**.

Loans and withdrawals: Although the Plan is intended for the future, you may borrow from your account for any purpose. Generally, the Plan allows you to borrow up to 50% of your vested account balance. The minimum loan amount is \$1,000 and a loan must not exceed \$50,000. You then pay the money back into your account, plus interest, through deductions from your paycheck. You may have a maximum of one loan at a time.

Withdrawals from the Plan are generally permitted when you terminate your employment, retire, reach age 59½ or become permanently disabled, as defined by your plan.

Rollovers: You are permitted to roll over eligible pre-tax assets from another 401(k), 403(b) plan, 401(a) plan or governmental 457(b) retirement plan. The Plan also accepts rollovers from a conduit IRA. Be sure to consider all your available options and the applicable fees and features of each before moving your retirement assets.

We hope you will take full advantage of the Novant Health Retirement Plus Plan to help you reach your retirement saving goals. If you have any questions about the Plan or need assistance in performing a transaction, please call the Fidelity Retirement Service Center at **800-343-0860**.



YouDecide Team Member Advantages

Voluntary benefit programs



Auto and home insurance

Get the best for less. Side-by-side comparison quoting allows you to compare estimates from top-rated providers and select the one that's best for you.



Nationwide pet insurance

Helps to offset the cost of illnesses, injuries and routine wellness care for your furry family members. Cover yourself from unexpected vet bills and routine care.

Consumer discounts



Access the Team Member Advantages site at youdecide.com/Novant.

Need help? Contact your consumer advisor for support (Monday through Friday, 8 a.m. to 7 p.m. ET) at **800-923-4609** or email advisor@youdecide.com.

Client ID: NOV668



We believe improving your health
is the right thing to do.

We want you to stay healthy so you can enjoy life now and in retirement. We're dedicated to improving your health by giving you a benefit plan that encourages and rewards you for making healthy choices and achieving healthy outcomes.



Note: This guide is intended to summarize the benefits you receive from Novant Health. The actual determination of your benefits is based solely on the plan documents provided by the carrier of each plan. This summary is not legally binding, is not a contract and does not alter any original plan documents.

For additional information, please call Novant Health Human Resources at **800-890-5420**.