2027



Employee Benefits Guide

Broward Health®

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Broward Health is proud to support our employees' overall well-being with a variety of benefit options. This guide offers details on our 2027 offerings for you and your family. For more information, please review this guide or visit employee.BrowardHealth.org and select the Employee Benefits tab.

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See **page 37** for important information concerning Medicare Part D coverage.

In this Guide, we use the term company to refer to Broward Health. This Guide is intended to describe the eligibility requirements, enrollment procedures, and coverage effective dates for the benefits offered by the company. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While this Guide is a tool to answer most of your questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will be used. For more information regarding our benefits plans, please visit: https://employee.browardhealth.org/pages/employee-benefits.

3 Letter From AVP, Total Rewards

Dear Benefits-Eligible Staff,

Welcome to the **2027 Benefits Open Enrollment season!** Each year, Open Enrollment provides an opportunity to review your current benefits, explore new offerings, and make choices that best support you and your family. Our goal is to provide access to high-quality care and valuable resources while making it easier to understand, navigate, and select the benefits that best meet your needs.

Medical Plans – 2027 Highlights

- Employee payroll contributions for the **High Deductible Health Plan, Best Choice, and Open Access Select EPO plans** slightly increase in 2027 to help maintain competitive benefit offerings compared with other Florida health systems.
- Employees can maximize their savings by utilizing **Broward Health providers and facilities**, where costs are generally lower than those associated with the broader Aetna Open Access network.
- **Primary care and specialist visits with Broward Health-employed physicians** will continue to have a **$0 copay** under the **Select EPO and Best Choice plans**.
- **Enhanced employer contributions for the Health Savings Account will be changing to $500 Single and $1,000 Family. The contribution will be spread over the 26 pay periods annually (prorated for new hires and rehires). This is applicable to all employees in the High Deductible Health Plan. All employees enrolled in the HDHP will receive an employer contribution (which replaces seed and reward dollars previously provided).**
- **Nicklaus Children's and their providers are part of the Aetna Broad Network (Tier 2), not the Broward Health network (Tier 1). This means, if you are enrolled in Aetna Best Choice, EPO Select, or HDHP, you can still see your pediatric providers with Nicklaus Children's, your visits will simply be covered at the Tier 2 copay level.**

Best Choice Plan – Important Reminder

Best Choice remains a **restricted network plan** designed to encourage employees to receive care through Broward Health and affiliated providers.

- Care provided outside of the Broward Health network or by non-affiliated providers requires an **exception request to be submitted and approved before services are received**.
- Exception requests must be **resubmitted for review and approval each calendar year**, as prior approvals do not automatically carry forward.
- The **exception form** is available on **MyPlace > Human Resources > Benefits**.

Best Choice Exception Process Reminder

- The enhanced exception process, supported by external clinical partners, will continue in 2027.
- All services requested outside the approved network require prior approval to ensure appropriate care and help avoid unnecessary out-of-pocket expenses.
- To maximize your benefits and reduce costs, employees are encouraged to use Broward Health providers and facilities whenever possible.
- **A list of Broward Health-employed and affiliated physicians is available on MyPlace > Human Resources > Benefits.**

2027 Benefits: New Programs & Updates:

New Pharmacy Vendor: Liviniti prescription benefit plan will replace CVS/Caremark as Broward Health's pharmacy benefit prescription plan vendor for 2027.

All employees and covered dependents will receive **new Liviniti ID cards** after open enrollment.

- Broward Health Outpatient Pharmacies will have the **first opportunity to fill eligible specialty medications**, helping ensure a seamless, convenient, and coordinated pharmacy experience for our employees and their families. This does not apply to retirees and employees living outside of Florida.
- All specialty medications, as well as Ozempic and Mounjaro (maximum 30-day supply), Gemtesa, Opzelura, Repatha, must be filled at the Broward health Medical Center Outpatient Pharmacy as of January 1,2027. (Exception: Retirees and Aetna members living outside of Florida, Broward Health does not have access to the medication).
- Updated Drug Formulary will also be available on the Benefits Page prior to January 1, 2027.
- Employees will still be able to use **other retail pharmacies in the Liviniti pharmacy network**. While the transition is expected to be seamless for most members, certain individuals may experience changes to their pharmacy coverage or prescription process. Those affected will receive additional information and instructions directly.
- All-mail order prescriptions will transition from CVS mail order to **HealthDyne Mail Order**. In addition, Broward Health Medical Center Outpatient pharmacy can fill your mail-order prescriptions within Broward Health. Broward Health Medical Center Outpatient Pharmacy is the preferred pharmacy for mail-order prescriptions within Broward Health.

Broward Health Medical Center Retail Pharmacies

- **Several Convenient Locations:** Fill your prescriptions at Broward Health Outpatient Pharmacies located throughout Broward Health facilities.
- **Quick and Easy:** Enjoy fast, convenient access to your medications, often right where you receive your care.
- **Exceptional Customer Service:** Receive personalized support and service from our pharmacy team.
- **Prescriptions Readily Available:** Make managing and picking up your medications easier and more convenient.
- **A Valuable Employee Benefit:** Take advantage of the convenience and accessibility of using your Broward Health Retail Pharmacies for your prescription needs.
- **Specialty Medications:** Specialty medications will continue to be managed by the **Medication Therapy Management Center at Broward Health Medical Center Outpatient Pharmacy**. Specialty medications will be provided in **30-day supplies only**. To help manage costs, employees are encouraged to review the pharmacy formulary and consider **generic alternatives when available**. For more information, refer to page 15.
- **Manufacturer Assistance Programs for Prescription Drugs:** May help reduce your out-of-pocket costs for select prescriptions

If you have any questions about a specific medication or process; please reach out directly to the dedicated pharmacy benefits team at pharmacybenefits@browardhealth.org

Care.com

This is a new voluntary benefit where enrolled employees can pay for children, pet, and elder care services. Employees can choose and pay for care services that best fit their individual needs. This voluntary benefit offers **greater flexibility, convenience, and support for balancing work and family responsibilities**.

More information is available in the pages ahead. Please take time to review your benefit options carefully and choose the coverage that best meets your needs for 2027.

Sincerely,

Lesly Luithle
AVP, Total Rewards

Genevieve Pickering
Director, Benefits

2027 Employee Benefits Snapshot

Retirement & Financial Wellness

- **Corebridge Financial:** Administrator of Broward Health's 403(b) and 457(b) retirement plans.
- **Manage Your Account:** Create or access your account, update your password, and designate beneficiaries online.
- **Financial Resources:** Take advantage of monthly educational sessions and one-on-one financial counseling through Corebridge.
- **Secure Act 2.0:** Employees ages 60–63 may be eligible for an increased "Super Catch-Up" contribution limit.
- **Traditional vs. Roth:** Consider whether paying taxes now (Roth) or later (Traditional) better aligns with your financial goals.

Retirement Questions? Contact Corebridge Financial or your personal financial advisor. (refer to contact listing for info)

Traditional vs. Roth Retirement Accounts (Quick View)

	TRADITIONAL	ROTH
PAY TAX	Later	Now
GROWTH	Tax-deferred	Tax-free
RETIREMENT WITHDRAWALS	Taxed	Tax-free*
BEST FOR	Lower future tax bracket	Same/higher future bracket
MATCH	Pre-tax default	Not available in 2027 (match is still pre-tax)
CONTACT INFO IN BOOKLET	For retirement questions, speak to Corebridge or your own financial advisor.	

*If IRS rules are met.

Health Benefits

- **Medical:** Choose from three Aetna medical plans, including telemedicine options.
- **Dental & Vision:** Two dental options and one vision option are available through Aetna.
- **Broward Health Providers:** When appropriate, consider using Broward Health physicians and services to help maximize your benefits and manage out-of-pocket costs.
- **FSA & HSA:** Take advantage of tax-advantaged accounts to help manage eligible healthcare expenses. The HSA is available only with the HDHP medical plan.
- **Pharmacy:** Use Broward Health Retail Pharmacies for convenient, personalized service and easy access to your prescriptions.

Wellness, Mental Health & Work-Life Balance

- **Broward Health Gyms:** Enjoy access to convenient, low-cost fitness opportunities and classes at Broward Health Medical Center, Broward Health Coral Springs, and Broward Health Imperial Point.
- **Employee Assistance (EAP):** Broward Health's internal EAP is available at no cost to employees.
- **Aetna EAP:** Provides **four** free outside counseling sessions for eligible employees.
- **Care.com:** A **new voluntary benefit** providing access to childcare and eldercare resources and services, helping employees balance work and family responsibilities.
- **Wellness Programs:** Access nutrition counseling, wellness challenges, and other resources to support your wellbeing at Aetna.com, health and wellness.
- **Employee Health:** Free employee vaccines may include flu, Tdap, MMR, Varicella, and Hepatitis B, based on eligibility and program requirements.
- **Employee Clinic – Minor Care: Employees only** can access minor care at no cost, Monday through Friday, helping you get the care you need when you're feeling under the weather — while saving time and healthcare resources.

Professional Growth

- **Five Star Academy:** Find available learning resources through MyPlace > Human Resources > Department Learning.
- **Learn2Grow Programs:** Build new clinical and non-clinical skills, explore career pathways, and advance your career within Broward Health.
- **Training & Development:** Access workshops, education, career coaching, and professional development opportunities.
- **Tuition Reimbursement:** Use Tuition.io to manage your education benefits and explore affordable education options.

Recognition & Employee Experience

- **Celebrate Your Success:** Employee Experience offers programs and activities designed to recognize employees and strengthen our culture. Recognition programs include the Shining Star Awards, Petal Awards, Brightest Star Awards, and DAISY Awards, among others..
- **Stay Connected:** Check the **Monthly Calendar of HR Events** on **MyPlace** for upcoming recognition events, celebrations, wellness activities, and employee engagement opportunities.

6 Eligibility and Enrollment

Broward Health's benefits are designed to support your unique needs.

Enrolling in Benefits

Benefits-eligible employees and their eligible dependents have **30 days** from their hire, rehire, or transfer date to enroll in benefits. **Employees who do not enroll within 30 days must wait until the next Open Enrollment period unless they experience a Qualifying Life Event.** See the coverage timing table below for information on when each benefit becomes effective.

Employees are responsible for reviewing their first paycheck to ensure benefit elections and payroll deductions are correct.

For Benefits Enrollment assistance, please contact the HR Business Center (HRBC) at 954-473-7090. Instructions are noted at the bottom of this page.

Employee payroll deduction rates for medical, dental, and vision plans can be found by visiting employee.BrowardHealth.org and selecting the Employee Benefits tab.

When Does Coverage Start?

New Hire? Enroll Within 30 Days

FIRST OF MONTH FOLLOWING HIRE/ REHIRE/TRANSFER	IMMEDIATELY - NO WAITING PERIOD	AFTER AGE 21 & ONE YEAR
Medical/Dental/ Vision/FSA/HSA/ Life Insurance/ Disability/Other Voluntary Benefits	403(b) Plan	Cash Balance Pension Plan
	457(b) Plan	

*These benefits follow the carrier certificate waiting-period language of end of the month in which active employment begins, simplified here for employee-facing guide language. Supplemental Life may be subject to Evidence of Insurability (EOI) requirements when applicable.

Dependent Eligibility

As a general rule, eligible dependents include your:

- Spouse (Note: Domestic partners are not eligible dependents)
- Children up to age 26 (up to the end of the year the dependent child turns 26)
- Dependents of current dependents (up to 18 months of age)
- Disabled child dependents of any age with supporting medical certification. Please contact your Corporate Benefits Department at 954-473-7371 or 954-473-7234 for more information.

Proper documentation must be provided to the Corporate Benefits Department before the end of the enrollment period for any dependents enrolled in the plans. This includes birth certificates, marriage certificates, and copies of Social Security cards. All documents must be scanned into one file (multiple files not allowed). Should you not be able to provide legal documentation for a dependent, you will need to remove that dependent from your plans. **Failure to provide this documentation will result in loss of coverage for the applicable dependents.**

Elections made upon hire will remain in effect until the next Open Enrollment period, unless you or one of your dependents experience a Qualifying Life Event. If you experience a Qualifying Life Event, such as the birth or adoption of a child, marriage, divorce, and need to make a change to your benefits, you must contact the Corporate Benefits Department within 30 days of the life event at 954-473-7368 or send an email to benefits@browardhealth.org.

How to Enroll

1. Visit employee.BrowardHealth.org and select the Employee Benefits tab.
2. Select the INFOR tab and follow the instructions to access INFOR Go and enroll in your benefits.

If you experience issues or need enrollment assistance, contact the HR Business Center.

Enrollment Website

employee.BrowardHealth.org
Employee Benefits tab

Need Help?

HR Business Center
954-473-7090
HRBC@BrowardHealth.org

7 Out-of-Pocket Costs

Below are types of payments you're responsible for:

Copay

Employees who enroll in the Select EPO and Best Choice are subject to set copays, varying by service and where care is rendered. For specific details about coverage, refer to pages 9-10 in the guidebook.

Coinsurance

Your percentage of the cost of a covered service. Once you have met your annual deductible, coinsurance begins. For specifics on Broward Health's HDHP, refer to page 11 in the guidebook.

Deductible

The amount you must pay for covered services before your insurance begins paying its portion/coinsurance. Each of Broward's plans have varying deductibles. Refer to pages 9-11 for deductible information on Broward Health's plans.

Out-of-Pocket Maximum

Out-of-Pocket Maximum (also known as MOOP): The maximum amount you pay for covered healthcare services during a plan year. This includes deductibles, copayments, and coinsurance, but does not include premiums or services not covered by the plan. Once you reach your MOOP, the plan pays 100% of eligible in-network covered expenses for the remainder of the year.

Employee rates for medical, dental, and vision plans can be found by visiting employee.BrowardHealth.org and selecting the Employee benefits tab.

Common Benefits Terms

Beneficiary - Person who is listed as the recipient of the proceeds from your benefit plans.

Dependent - Your legal spouse and children who are eligible for benefits. Children are covered through the end of the year after turning age 26.

Explanation of Benefits (EOB) - A record that outlines the healthcare services you used, how much you owe, and how much your plan covered. You will receive an EOB for medical and dental services. These can be retrieved from the Aetna website.

Flexible Spending Account (FSA) - An account that allows you to save pre-tax dollars from every paycheck to be used for eligible expenses. You must use the funds or risk losing them.

Health Savings Account (HSA) - If you're enrolled in the high-deductible health plan, an HSA allows you to save tax-free money from each paycheck. Broward Health also contributes to your account. Balances roll over from year to year and never expire. If you change jobs or medical plans, you may also keep this account.

High Deductible Health Plan (HDHP) - A plan with a higher deductible than a traditional medical plan. Your payroll contributions are lower, but you'll pay more out-of-pocket for healthcare services until you meet your deductible. After that, the plan begins sharing the cost of covered care. A high deductible health plan (HDHP) can be combined with a health savings account (HSA), allowing you to pay for certain medical expenses with money free from federal taxes. The IRS has specific deductible and out-of-pocket maximum requirements for an HDHP.

Pre-Tax Deductions - Money that's taken from your gross pay before taxes are calculated, which reduces your taxable wages (this is found through your medical, dental, vision, 403(b), FSA, and HSA accounts).

Post-Tax Deductions - All other voluntary benefits are deducted from your paycheck on a post-tax basis, meaning premiums are taken from your net pay after applicable taxes have been withheld.

8 How to Pick a Plan

Which plan is right for you? Consider any medical needs you foresee for the upcoming plan year, your overall health, and any medications you currently take. Please review the information below to help pick which plan works best for you.

2027 Medical Plans

Aetna Open Access Select "Best Choice" EPO ($)

- Broward Health's self-insured plan.
- Offers **maximum savings** when utilizing Broward Health providers and/or Broward Health facilities and services.
- **This plan is restricted: All services are restricted to Broward Health facilities unless you have a pre-approved exception from the Broward Health Exception Committee prior to services being rendered or in the case of emergencies.**
- **No out-of-network benefits.**

Aetna Open Access Select EPO ($$$)

- Aetna nationwide network offering a broader selection of providers and healthcare facilities, but at a higher cost compared to Broward Health providers.
- Services can be rendered at both Broward Health and non-Broward Health facilities (must be in Aetna's network).
- **No out-of-network benefits.**

Aetna POS II — High Deductible Health Plan ($$$$)

- Aetna nationwide network.
- Offers both in- and out-of-network benefits, with low premiums but **higher out-of-pocket costs.**
- Offers the saving benefits of a Health Savings Account (HSA) with employer contributions and incentives for wellness activities.

2027 Network Tier Levels

Tier 1 (Broward Health Employed & Affiliated Physicians and Facilities) ($)

- Services rendered by a Broward Health employed or affiliated (Broward Health credentialed) physician/providers at Broward Health facilities only.
- These services provide **Maximum Savings** (Broward Health providers) and **Standard Plus Savings** (Affiliated).

Tier 2 (Aetna Network) ($$$)

- All other Aetna Network physicians, facilities, or services.
- These services provide **Standard Savings.**

Tier 3 (Out-of-Network) ($$$$)

- Offers out-of-network physicians, facilities, or services.
- Offered on the Aetna High Deductible Health Plan (HDHP) only.



9 Medical Plan – Aetna Open Access Select Best Choice

The **Aetna Open Access Select Best Choice Plan** is a Broward Health self-insured plan, which offers in-network benefits, providing employees maximum savings when utilizing Broward Health facilities and providers. This is a restricted plan compared to the other medical options. Participants in this plan must utilize Broward Health-employed or affiliated providers and have services rendered at Broward Health facilities ONLY. **Note: Services will be limited to Broward Health employed or affiliated physicians and Broward Health facilities only, except emergencies. IMPORTANT: For services not offered by Broward Health, an approved medical exception will be required PRIOR to services rendered. Medical exceptions do not roll over and MUST be resubmitted for review and approval annually. If an employee obtains services from a non-Broward Health provider or at a non-Broward Health facility, the employee will be responsible for 100% of all charges incurred. The Exception Form can be located on the Employee Benefits Intranet page.**

	TIER 1 (BROWARD HEALTH EMPLOYED & AFFILIATED PHYSICIANS AND FACILITIES)	TIER 2 (OTHER NETWORK PROVIDERS)[2] ALL SERVICES IN THIS TIER REQUIRE AN EXCEPTION	TIER 3 (OUT-OF-NETWORK) BROAD AETNA NETWORK IS NOT INCLUDED IN THIS PLAN
CALENDAR YEAR DEDUCTIBLE (CYD)[1]			
INDIVIDUAL	$500	$3,500	Not covered
FAMILY	$1,000	$7,000	Not covered
MAXIMUM OUT-OF-POCKET (MOOP)[1]			
INDIVIDUAL	$3,000	$7,000	Not covered
FAMILY	$6,000	$14,000	Not covered
PHYSICIAN SERVICES			
PREVENTIVE CARE	No charge		Not covered
VIRTUAL CARE	$20 copay		Not covered
PRIMARY CARE	Broward: $0 copay Affiliated: $20 copay	$75 copay	Not covered
SPECIALIST	Broward: $0 copay Affiliated: $35 copay	$150 copay	Not covered
DIAGNOSTIC SERVICES			
LAB/PATHOLOGY	$5 copay	$5 copay	Not covered
X-RAY	$10 copay	$75 copay	Not covered
ADVANCED IMAGING (MRI/CT/PET)	$10 copay	$150 copay	Not covered
OUTPATIENT SURGERY			
FACILITY	$50 copay	If approved, $750 copay	Not covered
PHYSICIAN SERVICES	No charge	No charge	Not covered
EMERGENCY SERVICES			
EMERGENCY ROOM	$300 copay (waived if admitted; waiver does not apply to observation admissions). No coverage for non-emerg. use		
AMBULANCE	$300 copay (waived if admitted; waiver does not apply to observation admissions). No coverage for non-emerg. use		
URGENT CARE	$20 copay	$20 copay	Not covered
INPATIENT HOSPITAL			
FACILITY	$100 copay	If approved, $1,500 per visit	Not covered
PHYSICIAN SERVICES	No charge	No charge	Not covered
OTHER SERVICES			
ALLERGY TESTING	Broward: $0 copay Affiliated: $35 copay	$150 copay	Not covered
SPINAL MANIPULATION (12 visits/CY)	$25 copay	$45 copay	Not covered
HOME HEALTH CARE (120 visits/CY)	No charge	No charge	Not covered
REHABILITATION (PT)	$5 copay	$10 copay	Not covered
SKILLED NURSING CARE (30 days/CY max)	$100 copay	$100 copay	Not covered
DURABLE MEDICAL EQUIPMENT	$25 copay	$25 copay	Not covered
HOSPICE SERVICES	No charge	10%, no deductible applies	Not covered
MENTAL HEALTH/BEHAVIOR HEALTH/SUBSTANCE ABUSE			
INPATIENT	$100 copay	$100 copay	Not covered
OUTPATIENT	No charge	No charge	Not covered

Benefit coverage for Infusion Therapy, Diabetic Supplies, and Prosthetics can be found in the Benefits at a Glance (available on the internal Benefits page).

***Employee pays after calendar year deductible is met.**

[1]Tier 1 CYD and MOOP will cross apply with Tier 2.

[2]Services will be limited to Broward Health employed or affiliated physicians and Broward Health facilities only, except emergencies.

10 Medical Plan – Aetna Open Access Select EPO

The **Aetna Open Access Select EPO Plan** offers only in-network benefits. Out-of-network benefits are not available under this plan. The Select EPO plan offers employees the flexibility of a large/nationwide network of facilities and providers. If an employee utilizes a provider/facility out of this network, the employee will be responsible for 100% of all charges incurred.

	TIER 1 (BROWARD HEALTH EMPLOYED & AFFILIATED PHYSICIANS AND FACILITIES)	TIER 2 (AETNA NETWORK PROVIDERS)	TIER 3 (OUT-OF-NETWORK)
CALENDAR YEAR DEDUCTIBLE (CYD)[1]			
INDIVIDUAL	$500	$3,500	Not covered
FAMILY	$1,000	$7,000	Not covered
MAXIMUM OUT-OF-POCKET (MOOP)[1]			
INDIVIDUAL	$3,000	$7,000	Not covered
FAMILY	$6,000	$14,000	Not covered
PHYSICIAN SERVICES			
PREVENTIVE CARE	No charge		Not covered
VIRTUAL CARE	$20 copay		Not covered
PRIMARY CARE	Broward: $0 copay Affiliated: $20 copay	$75 copay	Not covered
SPECIALIST	Broward: $0 copay Affiliated: $35 copay	$150 copay	Not covered
DIAGNOSTIC SERVICES			
LAB/PATHOLOGY	$5 copay	$5 copay	Not covered
X-RAY	$10 copay	$75 copay	Not covered
ADVANCED IMAGING (MRI/CT/PET)	$10 copay	$150 copay	Not covered
OUTPATIENT SURGERY			
FACILITY	$50 copay	$750 copay	Not covered
PHYSICIAN SERVICES	No charge	No charge	Not covered
EMERGENCY SERVICES			
EMERGENCY ROOM	$300 copay (waived if admitted:waiver does not apply to observation admissions). No coverage for non-emerg. use		
AMBULANCE	$300 copay (waived if admitted:waiver does not apply to observation admissions). No coverage for non-emerg. use		
URGENT CARE	$20 copay	$20 copay	Not covered
INPATIENT HOSPITAL			
FACILITY	$100 copay	$1,500 per visit	Not covered
PHYSICIAN SERVICES	No charge	No charge	Not covered
OTHER SERVICES			
ALLERGY TESTING	Broward: $0 copay Affiliated: $35 copay	$150 copay	Not covered
SPINAL MANIPULATION (12 visits/CY)	$25 copay	$45 copay	Not covered
HOME HEALTH CARE (120 visits/CY)	No charge	No charge	Not covered
REHABILITATION (PT)	$5 copay	$10 copay	Not covered
SKILLED NURSING CARE (30 days/CY max)	$100 copay	$100 copay	Not covered
DURABLE MEDICAL EQUIPMENT	$25 copay	$25 copay	Not covered
HOSPICE SERVICES	No charge	10%, no deductible applies	Not covered
MENTAL HEALTH/BEHAVIOR HEALTH/SUBSTANCE ABUSE			
INPATIENT	$100 copay	$1,500 copay	Not covered
OUTPATIENT	No charge	No charge	Not covered

Benefit coverage for Infusion Therapy, Diabetic Supplies, and Prosthetics can be found in the Benefits at a Glance (available on the internal Benefits page).

*__Employee pays after calendar year deductible is met.__

[1]Tier 1 CYD and MOOP will cross apply with Tier 2.

11 Medical Plan – Aetna Choice POS II HDHP

The Aetna High Deductible Health plan offers in- and out-of-network benefits through Aetna's nationwide network. This plan requires the annual deductible to be met before services are covered, except for preventive care. Once maximum out-of-pocket expenses have been met, services will be covered at 100% for the remainder of the plan year. A tax-free Health Savings Account (HSA) will be created for all employees enrolled in this plan, and employees will be eligible for employer contributions to be deposited into their HSA. Detailed information regarding the Health Savings Account and eligibility for initial and annual contributions is outlined on page "HSA vs. FSA Comparison | 2027" on page 23.

	TIER 1 (BROWARD HEALTH EMPLOYED & AFFILIATED PHYSICIANS AND FACILITIES)	TIER 2 (AETNA OPEN ACCESS NETWORK)	TIER 3 (OUT-OF-NETWORK)
CALENDAR YEAR DEDUCTIBLE (CYD)[1]			
INDIVIDUAL	$1,750	$3,500	$5,000
FAMILY	$3,500	$7,000	$10,000
MAXIMUM OUT-OF-POCKET (MOOP)[1]			
INDIVIDUAL	$4,000	$5,500	$10,000
FAMILY	$8,000	$11,000	$20,000
PHYSICIAN SERVICES			
PREVENTIVE CARE	No charge		50% *
VIRTUAL CARE	20% *		
PRIMARY CARE	20% *	30% *	50% *
SPECIALIST	20% *	30% *	50% *
DIAGNOSTIC SERVICES			
LAB/PATHOLOGY	20% *	30% *	50% *
X-RAY	20% *	30% *	50% *
ADVANCED IMAGING (MRI/CT/PET)	20% *	30% *	50% *
OUTPATIENT SURGERY			
FACILITY	20% *	30% *	50% *
PHYSICIAN SERVICES	20% *	30% *	50% *
EMERGENCY SERVICES			
EMERGENCY ROOM	20%* (waived if admitted: this does not apply to observation admissions). No coverage for non-emerg.use		
AMBULANCE	20%* (waived if admitted: this does not apply to observation admissions). No coverage for non-emerg. use		
URGENT CARE	20% *		50% *
INPATIENT HOSPITAL			
FACILITY	20% *	30% *	50% *
PHYSICIAN SERVICES	20% *	30% *	50% *
OTHER SERVICES			
ALLERGY TESTING	20% *	30% *	50% *
SPINAL MANIPULATION (12 visits/CY)	20% *	30% *	50% *
HOME HEALTH CARE (120 visits/CY)	20% *	30% *	50% *
REHABILITATION (PT)	20% *	30% *	50% *
SKILLED NURSING CARE (30 days/CY max)	20% *	30% *	50% *
DURABLE MEDICAL EQUIPMENT	20% *	30% *	50% *
HOSPICE SERVICES	20% *	30% *	50% *
MENTAL HEALTH/BEHAVIOR HEALTH/SUBSTANCE ABUSE			
INPATIENT	20% *	30% *	50% *
OUTPATIENT	0%, after CYD	0%, after CYD	50% *

Benefit coverage for Infusion Therapy, Diabetic Supplies, and Prosthetics can be found in the Benefits at a Glance (available on the internal Benefits page).

***Employee pays after calendar year deductible is met.**

[1]Tier 1 CYD and MOOP will cross apply with Tier 2 and Tier 3.

12 Broward Health Urgent Care Center

We're Here When You Need Us

You don't have to drive and wait hours at a hospital to get medical attention. The Broward Health Urgent Care team is standing by ready to assist you and your family when you need immediate attention at a lower cost. Located in Weston, our pediatric and adult urgent care center provides fast, convenient care for minor injuries and illnesses.

We Are Open Daily

- Backed by Broward Health hospitals
- Open 7 days a week
- Board-certified physicians and nurse practitioners
- X-ray capabilities
- Urgent care pricing, NOT hospital pricing
- Seamless transition to Broward Health ERs if needed
- No appointment needed

For more information, visit BrowardHealth.org/Urgent Care
Hours: 8am-8pm, Monday-Friday
8am-4:30pm, Saturday-Sunday

Broward Health Weston
2300 N. Commerce Parkway, Weston, FL 33326
954-217-3200

In essence, an urgent care center is considered a middle ground between a traditional hospital's emergency room and a doctor's office. See below to help when you're not sure whether to seek treatment at an urgent care center or at a hospital's emergency room. For a life-threatening emergency, call 911 or go to the nearest emergency room.

Preventive & Care Management Support

Aetna One® Choice

When to Use

- Managing a chronic or complex health condition
- Looking for help understanding benefits or care options
- Needing support after a new diagnosis or health change

How Aetna Can Help

- One-on-one support from an Aetna clinical nurse
- Personalized care plan based on your health goals
- Access to resources for cancer, maternity, and back/joint care

Get Started

- Visit Aetna.com to log in to your member website or use the Aetna Health app.

Urgent Care Center ($)

Copay is $20 unless enrolled in the HDHP.

When to Use

You need care quickly, but it is not a true emergency. Urgent care centers offer treatment for non-life-threatening injuries or illnesses.

Types of Care*

- Strains, sprains
- Minor broken bones (e.g., finger)
- Minor infections
- Minor burns

Costs and Time Considerations**

- Copay and/or coinsurance usually higher than an office visit
- Walk-in patients welcome, but urgency determines order seen and wait time
- All urgent care centers are covered as a Tier 1 benefit

*This is a sample list of services and may not be all inclusive.
**Costs and time information represent averages only and are not tied to a specific condition or treatment.

Emergency Rooms ($$$)

$300 ER copay for Best Choice and Select EPO plan

When to Use

You need immediate treatment for a serious, life-threatening condition. If a situation seems life threatening, call 911 or your local emergency number right away.

Types of Care*

- Heavy bleeding
- Chest pain
- Major burns
- Severe head injury

Costs and Time Considerations**

- Often requires a much higher copay and/or coinsurance
- Open 24/7, but waiting periods may be longer because patients with life-threatening emergencies will be treated first
- Ambulance charges, if applicable, will be separate and may not be in-network

*This is a sample list of services and may not be all inclusive.
**Costs and time information represent averages only and are not tied to a specific condition or treatment.

New Freestanding Emergency Rooms

Broward Health's new Freestanding Emergency Rooms (FSERs) in Lighthouse Point and Sunrise provide emergency medical care 24/7. Please note that these locations function as Emergency Rooms, not Urgent Care centers. Visits will be subject to the plan's **$300 ER copay** for Best Choice and Select EPO plan. Note: No coverage for non-emergency use.



Broward Health Sunrise ER

9001 W. Oakland Park Blvd, Sunrise, FL 33351

This emergency department is a part of Broward Health Medical Center

Phone: 954-217-6600



Broward Health Lighthouse Point ER

5360 N. Federal Hwy, Lighthouse Point, FL 33064

This emergency department is a part of Broward Health North

Phone: 954-202-4300

14 Virtual Care

When you're under the weather, there's no place like home, and if you're busy with work and family, scheduling an in-person doctor's appointment can be a pain. Virtual Care is a convenient and easy way to connect with a U.S. board-certified doctor on your time.

CVS.com/virtual-care

Broward Health provides a virtual medicine benefit for you and your dependents. Virtual Care offers access to U.S. board-certified doctors **24 hours a day, 7 days a week** through the convenience of online video, telephone, or mobile app visits. It's an affordable option for quality medical care.

- Talk to a doctor anytime, anywhere.
- Receive quality care via phone, video, or mobile app.
- Prompt treatment, talk to a doctor in minutes.
- A network of doctors that can treat every member of the family.
- Prescriptions sent to pharmacy of choice if medically necessary.
- Virtual care is less expensive than the ER or urgent care — your cost is never more than a doctor visit!

Get the Care You Need

Virtual Care doctors can treat many non-emergency medical conditions, including:

- Cold & flu symptoms
- Allergies
- Pink eye
- Respiratory infection
- Sinus problems
- Skin problems
- And more!



15 2027 Prescription Drug Benefits

If you enroll in a **Broward Health medical plan through Aetna**, you will automatically be enrolled in the **Liviniti Prescription Benefit Plan**. There is no separate enrollment required. The cost of prescription coverage is **included in your medical plan cost share**.

New for 2027: Specialty Medications

Specialty Medication Requirements

- **Specialty medications:** For **Florida residents**, the **Broward Health Medical Center Outpatient Pharmacy** is the designated Broward Health location for specialty medications.
- Aetna members who **reside outside Florida**, or whose medication is not available through a Broward Health Medical Center outpatient pharmacy, may continue to use an appropriate specialty pharmacy. Contact **Liviniti Customer Service at 833-929-8221** for assistance.
- **Home or office delivery of your specialty medications is available upon request:**
  - This delivery option offers added convenience for employees who prefer not to pick up prescriptions in person.
- Employees will receive additional information after Open Enrollment. The Broward Health Pharmacy team will also reach out to help with the transition and make transferring prescriptions as easy as possible.
- **Need to transfer a prescription?** Contact your doctor's office and request that a new prescription be sent to the **Broward Health Medical Center outpatient pharmacy**.
- **Specialty medications** are used to treat complex, serious, or long-term conditions and may require special handling, monitoring, or additional support. *Examples may include certain medications used to treat cancer, multiple sclerosis, rheumatoid arthritis, and rare diseases.*

New for 2027: For Florida residents, certain clinically managed medications will now be required to be filled at **ANY Broward Health Pharmacy** rather than external retail pharmacies.

- **IMPORTANT TO NOTE:** Employees taking any of these medications below will receive transition support from the Broward Health Pharmacy team

This includes, but is not limited to:

- Mounjaro **(maximum 30-day supply)**
- Ozempic **(maximum 30-day supply)**
- Repatha
- Opzelura
- Gemtesa

Take advantage of Prescription Delivery Services:

- Have the above medications delivered directly to your home
- Enjoy secure, reliable, and confidential service
- Receive support with refill coordination
- Reduce trips to the pharmacy
- Maintain timely access to your prescriptions

Delivery service is available within the state of Florida only.

Why Is Broward Health Moving Specialty and Other Medications In-House?

Because Broward Health is self-insured, Broward Health pays the cost of medications covered by the health plan. By moving eligible medications in-house, Broward Health can leverage its purchasing power, pharmacy resources, and position as a healthcare provider to obtain certain medications at a lower cost.

This allows Broward Health to:

- Lower specialty medication costs to the health plan
- Keep savings within the plan rather than paying higher costs to external specialty pharmacies
- Improve coordination and support through Broward Health's pharmacy team
- Help manage the overall cost of benefits for both Broward Health and employees

Bottom line: This change allows Broward Health to use its resources more effectively to lower prescription costs and support a more sustainable health plan for employees and their dependents.

Non-Specialty Medications

Liviniti provides access to a broad network of pharmacies for non-specialty medications.

- You may continue to use local retail pharmacies in the Liviniti pharmacy network.
- To determine whether your pharmacy participates in the network, use the **Liviniti Member Portal or mobile app or call 833-929-8221**.
- All mail-order prescriptions will transition to HealthDyne Mail Order. To discuss your mail-order prescription with HealthDyne, you can call 855-722-9384 or visit liviniti.healthdyne.com. In addition, you can fill any of your prescriptions at the Broward Health Pharmacies.

Maintenance Medications

Maintenance medications are prescriptions taken regularly to manage an ongoing or chronic health condition, such as high blood pressure, diabetes, asthma, or high cholesterol.

- Maintenance medications may be filled at a **Broward Health Pharmacy** or another **Liviniti network pharmacy**.
- The first **two fills** may be filled for a **30-day supply**.
- After the **first two 30-day fills**, maintenance medications must be filled as a **90-day supply**.
- **Save with mail order:** You pay a **reduced cost** for a 90-day supply, which is less than paying for three separate 30-day fills.



2027 Prescription Costs and Copays

The chart below outlines prescription costs and copays for the 2027 medical plans.

Note: Choosing a brand name medication when a generic equivalent is available will result in a higher out of pocket cost.

Understanding Your Prescription Drug Costs

Broward Health wants to make it easy to understand your prescription costs and identify opportunities to save.

- **Choose generic when appropriate:** When a generic medication is available, you will pay the **lower of the generic copay or the medication's actual price**.
- **Use 90-day supplies and mail order:** You pay a **reduced cost** for a 90-day supply, which is less than paying for three separate 30-day fills.

BENEFIT	SELECT EPO & BEST CHOICE COPAY		HDHP COINSURANCE
BROWARD HEALTH PHARMACIES			
	30-DAY (RETAIL)	90-DAY & MAIL ORDER	30-DAY (RETAIL)/90-DAY & MAIL ORDER
GENERIC	Up to $10	Up to $25	20%*
PREFERRED BRAND	$30	$75	20%*
NON-PREFERRED BRAND	$50	$125	20%*
SPECIALTY 30-day supply only	$50 copay		20%*
LIVINITI NETWORK			
	30-DAY (RETAIL)	90-DAY & MAIL ORDER	30-DAY (RETAIL)/90-DAY & MAIL ORDER
GENERIC	Up to $10	Up to $25	30%*
PREFERRED BRAND	$40	$100	30%*
NON-PREFERRED BRAND	$60	$150	30%*
SPECIALTY 30-day supply only	$50 copay		30%*
OUT-OF-NETWORK			
OUT-OF-NETWORK SCRIPTS	Not covered		50%*

*Member pays after deductible

- **Brand-name medications may cost more:** If you or your doctor choose a brand-name medication when an equivalent generic is available, you may pay a higher out-of-pocket cost.
- **Check the 2027 Broward Health Formulary (found on the next page):** The formulary is effective **January 1, 2027**, and includes four categories: **Generic, Preferred Brand, Non-Preferred, and Specialty**.
- **Mail-Order Prescriptions:** All mail-order prescriptions will transition to **HealthDyne Mail Order**. To discuss your mail-order prescription with **HealthDyne**, you can call 855-722-9384 or visit liviniti.healthdyne.com.
- **Questions about specialty medications?** Contact the Broward Health Pharmacy team at **954-468-8082**.
- NOTE: Non-specialty medications may be filled at any pharmacy within the network (for example, Walgreens, Publix, Walmart, or CVS). All specialty medications must be filled at a Broward Health Retail Pharmacy.

Take Your Pharmacy Benefits With You (App will be available January 1, 2027)

Download the **free Liviniti mobile app** beginning January 1, 2027 from your smartphone's app store. The app provides the same helpful features and information available through the Liviniti Member Portal, including access to **your pharmacy benefits and formulary information**. Member chat via the mobile app is available Monday–Friday from 9am-10pm EST.

Android

Apple

Scan the QR code starting January 1, 2027

Download the Liviniti mobile app from the Apple App Store or Google Play Store.

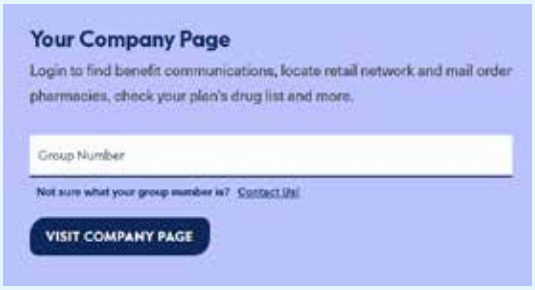
Access the Liviniti Formulary (Available to members today)

Your Prescription Benefits, Made Simple

Broward Health will offer a **customized prescription formulary through Liviniti** for specialty and non-specialty medications. The formulary is designed to help employees access appropriate medications while managing prescription drug costs.

Scan the QR Code for Liviniti Formulary

Scan the QR code to access Broward Health's Liviniti pharmacy benefits page, including formulary search, pharmacy resources, and network pharmacy search. You may also access the same information through the Liviniti Member Center at https://liviniti.com/members using Group Number/Name: BROWARD.



Broward Health Pharmacy Locations

Broward Health Outpatient Pharmacies provide personalized pharmacy services to employees and covered dependents.

PHARMACY NAME	ADDRESS	PHONE NUMBER	PHARMACY HOURS
BROWARD HEALTH MEDICAL CENTER OUTPATIENT PHARMACY	1600 South Andrews Avenue, Suite 1403, Fort Lauderdale	954-468-8082	Mon-Fri: 9am-7pm; Sat: 10am-4:30pm; Sun: Closed
BROWARD HEALTH CORA E. BRAYNON FAMILY HEALTH CENTER PHARMACY	200 NW 7th Avenue, Fort Lauderdale	954-759-6627	Mon-Fri: 8:30am-6:30pm; Sat-Sun: Closed
BROWARD HEALTH CORAL SPRINGS OUTPATIENT PHARMACY	3000 Coral Hills Drive, Coral Springs	954-346-4272	Mon-Fri: 9:30am-6pm; Sat-Sun: Closed
BROWARD HEALTH ANNIE L. WEAVER HEALTH CENTER PHARMACY	2011 NW 3rd Avenue, Fort Lauderdale	954-786-5910	Mon-Tue/Thu-Fri: 8:30am-4:30pm; Wed: 8:30am-8pm; Sat-Sun: Closed
BROWARD HEALTH NORTH OUTPATIENT PHARMACY	201 East Sample Road, Deerfield Beach	954-786-6802	Mon-Fri: 9am-6:30pm; Sat-Sun: Closed
BROWARD HEALTH IMPERIAL POINT OUTPATIENT PHARMACY	6401 North Federal Highway, Fort Lauderdale	954-776-8670	Mon-Fri: 9am-5pm; Sat-Sun: Closed
BROWARD HEALTH BERNARD P. ALICKI HEALTH CENTER PHARMACY	1101 West Broward Blvd., Fort Lauderdale	954-463-8119	Mon-Fri: 8:30am-4:30pm; Sat-Sun: Closed

Medication Therapy Management (MTM) Center at Broward Health Medical Center

Broward Health employees and covered dependents have access to the **MTM Center at no additional cost**.

MTM is a pharmacist-led service designed to help you get the most from your medications. The MTM team can:

- Review medications for safety and effectiveness
- Identify potential drug interactions
- Help simplify complex medication regimens
- Answer medication questions
- Work with healthcare providers to help improve treatment outcomes

Consultations are available **by telehealth, phone, or in person**. To reach the Broward Health Medication Therapy Management (MTM) Clinic, call **954-468-8082 and select option 5**.

Save on Certain High-Cost Medications

Manufacturer assistance programs may help reduce out-of-pocket costs for certain **high-cost specialty and non-specialty medications**.

These programs may provide discounts or coupons that reduce the amount you pay when you fill a prescription.

Important: Amounts paid through a manufacturer coupon **do not count toward your plan deductible or out-of-pocket maximum**. Only the amount you personally pay is applied toward those totals.

Example: If a medication costs $100 and a manufacturer coupon reduces your cost to $25, only the **$25 you pay** will count toward your deductible or out-of-pocket maximum.

Liviniti & Broward Health Pharmacy Contact Information

Liviniti Member Support is available 24/7, 365 days a year.

- **Broward Health Employee Dedicated Line:** 833-929-8221
- **Broward Health Outpatient Pharmacy:** 954-468-8082
- **Liviniti Member Portal:** https://liviniti.com/members/ using Group Number: BROWARD.
- **Liviniti Mobile App:** Available through your smartphone's app store
- **Email:** support@liviniti.com



Frequently Asked Questions With This Pharmacy Transition:

1. **What do I need to do to enroll in the Liviniti prescription plan?**

   Nothing. If you enroll in an Aetna medical plan through Broward Health, you will automatically be enrolled in the Liviniti Prescription Benefit Plan.

2. **I take a specialty medication. What does the 2027 change mean for me?**

   If you live in Florida and take a specialty medication, you will receive a letter after Open Enrollment with additional information and next steps. The pharmacy team will also contact you to help with the transition. This does not apply to retirees and Aetna health members living outside of Florida.

3. **How do I know whether my medication or pharmacy is affected?**

   You will receive information after Open Enrollment if action is required. You can also review the 2027 Broward Health Formulary on the Benefit Page via Intranet or contact Liviniti for assistance.

   Make sure **YOUR HOME ADDRESS** is current in the INFOR system. If uncertain, call the Broward Health HRBC at 954-473-7090, Monday–Friday, 7:30am–6pm.

4. **Can I continue using my local pharmacy?**

   Yes, for non-specialty medications, if the pharmacy participates in the Liviniti pharmacy network.

   For specialty medications, Florida residents must use the BHMC Outpatient Pharmacy. Free home or office delivery is available upon request.

5. **What is a generic (Tier 1) medication?**

   A generic medication has the same active ingredient, strength, dosage form, and therapeutic effect as its brand-name equivalent. Generic medications are generally available at a lower cost and are Tier 1 on the Liviniti formulary.

6. **What is a preferred (Tier 2) brand medication?**

   A preferred brand medication is a brand-name medication selected by the health plan as a preferred option based on factors such as effectiveness and cost. Preferred brand medications are Tier 2 on the Liviniti formulary and generally have a lower copay than non-preferred brands.

7. **What is a non-preferred (Tier 3) brand medication?** A non-preferred brand medication is a brand-name medication that is not on the plan's preferred list. These medications are Tier 3 on the Liviniti formulary and generally have a higher copay.

8. **Can I continue using my local pharmacy for maintenance medications?**
   Yes. Maintenance medications may be filled at a Broward Health Pharmacy or another pharmacy in the Liviniti network. After the **first two 30-day fills**, maintenance medications must be filled as a 90-day supply.

9. **Will my medication be covered under the Liviniti plan?**
   Coverage depends on the 2027 Broward Health Formulary. If a medication you currently take is no longer included on the formulary, you will be notified after Open Enrollment with additional information and next steps.

10. **How do I transfer my prescription to a Broward Health Pharmacy?**
    Contact your doctor's office and ask them to send a new prescription to the Broward Health Medical Center Outpatient Pharmacy.

11. **What if I don't live near a Broward Health Pharmacy?**
    Florida residents can request free home or office delivery of specialty medications. Contact the Broward Health Medical center retail pharmacy at 954-468-8082 for assistance.
    Aetna members who live outside Florida should contact **Liviniti at 833-929-8221** for assistance with specialty medication options.

12. **What is changing for mail-order prescriptions?**
    Beginning January 1, 2027, all mail-order prescriptions will transition to HealthDyne Mail Order. In addition to **HealthDyne Mail Order (# 855-722-9384)**, employees/dependents also have the option to fill their non-speciality prescriptions at **any** Broward Health Outpatient Pharmacy.

21 Dental Benefits

Like brushing and flossing, visiting your dentist is an essential part of your oral health. Broward Health offers affordable plan options from Aetna for routine care and beyond.

Broward Health Offers Two Dental Plan Options

To find network providers near you, visit Aetna.com or call 877-238-6200.

Dental PPO and DMO plans are administered by Aetna. The PPO plan uses in-network and out-of-network providers while the DMO plan uses only in-network providers. The selection of a primary care dentist is encouraged and can be changed at any time. To locate a primary care dentist or find network providers near you, visit Aetna.com or call 877-238-6200.

Dental Plan Summary

This chart summarizes the dental coverage provided by Aetna for 2027.

	AETNA PPO $$	AETNA DMO $
	IN-NETWORK	IN-NETWORK
CALENDAR YEAR DEDUCTIBLE		
INDIVIDUAL	$50	N/A
FAMILY	$150	N/A
CALENDAR YEAR MAXIMUM		
PER PERSON	$1,500	N/A
COVERED SERVICES		
PREVENTIVE SERVICES	Covered in full	$5 office visit copay See Dental Benefits Summary for costs of specific procedures
BASIC SERVICES	80% coinsurance	
MAJOR SERVICES	50% coinsurance	
ORTHODONTICS	50% for you, your spouse, and children until the end of year of their 26th birthday	Screening Exam: $30 Diagnostic Records: $150 Orthodontic Retention: $275
ORTHODONTIC LIFETIME MAXIMUM	$1,500 per person	$1,045 copay per person, per lifetime

Note

In addition to keeping your teeth healthy, regular dental checkups can help dentists spot symptoms of other serious conditions such as osteoporosis, cancer, and diabetes.

22 Vision Benefits

The vision plan provides comprehensive coverage. The Aetna Vision network is contracted through EyeMed Vision Care, LLC. Choose from a large selection of providers as well as your favorite retail chains. To determine if your provider is in network, search www.aetnavision.com.

	AETNA
	IN-NETWORK
EXAMS (ONCE EVERY CALENDAR YEAR)	
COPAY	$15 copay
LENSES	
SINGLE VISION	$25 copay
BIFOCAL	$25 copay
TRIFOCAL	$25 copay
LENTICULAR	$25 copay
CONTACTS (IN LIEU OF LENSES AND FRAMES)	
FITTING AND EVALUATION	Standard exam: covered in full, Premium exam: You pay 90%, less $40
ELECTIVE	$100 allowance, additional 15% off the balance over the allowance
FRAMES (ONCE EVERY TWO CALENDAR YEARS)	
ALLOWANCE	$130 allowance, additional 20% off the balance over the allowance
OTHER SERVICES	
LASER VISION CORRECTION	15% off retail price or 5% off promotional price

NOTE: Under this plan, you may use services of any out-of-network provider; however, your out-of-pocket expenses will be higher than if you elect services from a network provider.



23 HSA vs. FSA Comparison | 2027

Compare these tax-advantaged accounts to choose the best fit for your coverage and expenses.

COMPARISON POINT	HEALTH SAVINGS ACCOUNT (HSA)	FLEXIBLE SPENDING ACCOUNTS (FSA)
PLAN COMPATIBILITY	Aetna High Deductible Health Plan (HDHP) only.	Healthcare FSA: Qualified medical expenses. Dependent Care FSA: **Available even without medical plan enrollment.**
2027 ANNUAL CONTRIBUTION LIMIT	Employee: $4,500 Family: $9,000 Age 55+ catch-up: $1,000 Limits include any employer contribution.	Healthcare FSA: Up to $3,400. Dependent Care FSA: Up to $7,500, or $3,750 if married filing separately. 2026 FSA limits shown. 2027 limits pending IRS.
EMPLOYER CONTRIBUTION/FUNDING	Flat contribution amount: $500 Employee Only $1,000 Family (includes employee + spouse/employee + child)	None.
HOW FUNDS CAN BE USED	Qualified medical expenses, including doctor visits, hospital services, and eligible out-of-pocket costs.	Healthcare FSA: Deductibles, copays, coinsurance, personal protective equipment, and over-the-counter medications. Dependent Care FSA: Eligible daycare, nursery school, elder care, before/after-school care, and day camp. For a complete list of how funds can be used, visit the FSA store at **www.fsastore.com**.
TAX ADVANTAGE	Pre-tax payroll contributions; tax-free growth and withdrawals for qualified medical expenses.	Pre-tax contributions reduce taxable income.
ACCESS TO FUNDS/REIMBURSEMENT	Funds are available anytime for qualified healthcare expenses.	Healthcare FSA: HealthEquity debit card, mobile receipt submission, website, or customer service. Dependent Care FSA: Reimbursements are limited to deposited funds; no debit card.
ANNUAL ENROLLMENT/RE-ENROLLMENT	Available only with HDHP enrollment; eligible employees may make additional pre-tax contributions biweekly or a lump-sum contribution at anytime.	Re-enroll each plan year; elections do not renew automatically.
CARRYOVER/USE-IT-OR-LOSE-IT RULE	Balances roll over from year to year.	IRS use-it-or-lose-it rule: Unused funds are forfeited at year-end, except up to $680 may carry over.
CHANGING CONTRIBUTIONS DURING THE YEAR	HDHP enrollees change their HSA contribution elections at any time throughout the year, subject to IRS limits.	Changes generally require a Qualifying Life Event, transfer to ineligible status, or employment termination.
PORTABILITY	Employee-owned; keep it when changing jobs or medical plans.	Generally not portable; continuation rules may apply. The guide provides no details.
CONTACT INFORMATION	**Inspira Financial Services** **888-678-8242** **www.inspirafinancial.com**	**HealthEquity (formerly WageWorks)** **877-924-3967** **www.healthequity.com**

24 Accident Insurance

Accident Coverage

You can't always prevent accidents, but you can be prepared for them, including readying for any unexpected expenses. Accident coverage through Voya provides benefits for you and your covered family members for expenses related to an accidental injury that occurs outside of work. Health insurance helps with medical expenses, but this coverage is an additional layer of protection that can help pay deductibles, copays, and even typical day-to-day expenses such as a mortgage or car payment. Benefits are payable to you to use as you wish.

For more information about costs and claims, please call 877-236-7564 or visit www.voya.com/claims. **If an employee receives treatment for an approved injury at a Broward Health facility — including services such as X-rays, surgery, or other eligible treatment — the employee may receive an additional 50% benefit, up to $2,000, for approved conditions. If the employee receives treatment at a non-Broward Health Urgent Care facility or a non-Broward Health hospital, the applicable accident benefits will still be payable; however, the additional 50% benefit will not apply.**

Plan Features

- Guaranteed Acceptance: There are no health questions or physical exams required.
- Family Coverage: You can elect to cover your spouse and children.
- Portable Coverage: You can take your policy with you if you leave the company or retire (with certain stipulations).
- Sports Accident Benefit: The benefits payable are increased by 25% if a covered dependent is injured while playing an organized sport.
- **Wellness Benefit:** The plan pays a $75 benefit for one covered health screening test per covered member. Covered health screening tests includes diagnostic procedures, routine exams, and immunizations.

Important Note: In order to receive benefits, the insured must sustain an injury due to a covered accident and meet all of the requirements defined for payment under a specific benefit by the policy/plan certificate. Please review the Certificate of Insurance for Accident coverage at employee.BrowardHealth.org and selecting the Employee Benefits tab. **All claims must be reviewed and approved by Voya.**



25 Critical Illness Insurance

Critical Illness Coverage

Critical Illness coverage through **Voya** pays a lump-sum benefit if you are diagnosed with a covered disease or condition. You can use this money however you like. Examples include helping pay for expenses not covered by your medical plan, lost wages, childcare, travel, home healthcare costs, or any of your regular household expenses.

For more information about costs and claims, please call 877-236-7564 or visit www.voya.com/claims.

Plan Features

- Guaranteed Acceptance: There are no health questions or physical exams required.
- Family Coverage: You have the choice of $5,000 – $40,000 (in $5,000 increments) in guaranteed issue coverage. Spouses can be covered at 100% and children at 50% of your elected amount.
- **Wellness Benefit:** The plan pays a $50 benefit for one covered health screening test per covered member. Covered health screening tests include diagnostic procedures, routine exams, immunizations, vaccines, and more.
- The cost of coverage varies depending upon factors such as your age, whether you use tobacco, and the dependent coverage you choose.

Plan Highlights

You may choose a benefit amount from $5,000 to $40,000, in $5,000 increments, for yourself and your spouse (spouse coverage not to exceed 100% of the employee amount). **Important Note:** In order to receive benefits, the insured must meet all of the requirements defined for payment under a specific illness as defined by the policy/plan certificate. Please review the Certificate of coverage for Critical Care Insurance at employee.BrowardHealth.org and selecting the Employee Benefits tab. **All claims must be reviewed and approved by Voya.**



26 Hospital Indemnity Insurance

Hospital Indemnity Coverage

Hospital Indemnity coverage through **Voya** pays you cash benefits directly if you are admitted to the hospital or an Intensive Care Unit (ICU) for a covered stay. You can use the benefits to help pay for your medical expenses such as deductibles and copays, travel cost, food and lodging, or everyday expenses such as groceries and utilities.

The benefits payable also increase by 50% if you are admitted, confined, or receive treatment at a Broward Health facility.

Plan Highlights

- Guaranteed Issue: no health questions or physical exams required.
- Pre-Existing Conditions: This plan does NOT have a pre-existing condition exclusion. Benefits are payable for hospitalizations that occur on or after the effective date of your policy.
- Family Coverage: You can elect to cover your spouse and children.
- **Wellness Benefit:** The plan pays a $50 benefit for one covered health screening test per covered member.

Important Note: These benefits are paid directly to the insured following a hospitalization that meets the criteria for benefit payment. Please review the Certificate of Insurance for Hospital Indemnity at employee.BrowardHealth.org and selecting the Employee Benefits tab. **All claims must be reviewed and approved by Voya.**

BENEFITS	AMOUNT
HOSPITAL DAILY CONFINEMENT BENEFIT	$200 per day (1x per day, up to 30 days beginning on day 2)
HOSPITAL INTENSIVE CARE UNIT BENEFIT	$400 per day (1x per day, up to 30 days)
HOSPITAL ADMISSION BENEFIT	$1,200 (1 per coverage year)
NURSERY ADMISSION BENEFIT*	$1,200 (1 benefit per newborn)
NURSERY CONFINEMENT BENEFIT*	$200 (per day up to 30 days)
WELLNESS CARE	$50 (1 benefit per coverage year)

*Eligible for this benefit if enrolled in Family or Child coverage.
Note: This list is a summary. Please refer to plan documents for a comprehensive list of covered benefits.



27 Life Insurance and AD&D Insurance

Basic Life and Accidental Death & Dismemberment Insurance

Broward Health provides employees with Basic Life and Accidental Death and Dismemberment (AD&D) insurance (at no cost to the employee) as part of your basic coverage through **Voya Financial**, which guarantees that your spouse or other designated survivor(s) continue to receive benefits after your passing.

Your Basic Life and AD&D insurance benefit is equal to your base annual salary rounded up to the nearest $1,000, up to a maximum of $500,000.

Supplemental Term Life Insurance

You may wish for extra coverage for more peace of mind. Eligible employees may purchase additional Supplemental Term Life insurance. Premiums are paid through payroll deductions.

SUPPLEMENTAL EMPLOYEE LIFE	
COVERAGE AMOUNT	$10,000 increments
WHO PAYS	Employee
MAXIMUM BENEFIT	$1,000,000 (with medical screening for over $500,000)
EVIDENCE OF INSURABILITY (EOI) REQUIRED	Employees currently enrolled can increase by up to $40,000 without EOI, provided their total coverage remains at or below $500,000. Employees electing for the first time during annual enrollment are subject to EOI. For amounts above $500,000, EOI is required.
SUPPLEMENTAL SPOUSE LIFE	
COVERAGE AMOUNT	$5,000 increments
WHO PAYS	Employee
MAXIMUM BENEFIT	$250,000 or up to 100% of the employee's combined basic and Supplemental Life amount (with medical screening for over $100,000)
EVIDENCE OF INSURABILITY (EOI) REQUIRED	Spouses currently enrolled can increase by up to $10,000 without EOI, provided their total coverage remains at or below $100,000. Coverage elected for the first time during annual enrollment are subject to EOI. For amounts above $100,000, EOI is required.
SUPPLEMENTAL CHILD LIFE	
COVERAGE AMOUNT	$10,000 (Not available without purchasing employee or spouse coverage)
WHO PAYS	Employee

Premium rates for the employee and spouse benefits are based on an employee's age and increase at five year intervals.

To view the premium table, visit employee.BrowardHealth.org and select the Employee Benefits tab.

For all Life insurance plans (Basic Term Life & AD&D and Supplemental Term Life), there is a benefit reduction due to age which is applicable to employee and spouse coverage.

- At age 70, the original benefit is reduced to 50%. For example, if an insured is enrolled in $50,000 of coverage and dies at age 70 or older, the benefit will pay $25,000.
- Important! All Supplemental Life premium payments must be up to date. Missed or late payment of premiums will affect payment of benefits to beneficiary(ies).
- For questions, please contact the Benefits Department at 954-473-7373.

28 Disability Insurance

Disability insurance provides income replacement should you become disabled and unable to work due to a non-work related injury or illness.

Voya Financial is the disability vendor and administers the claims. For claims information, please call 877-236-7564.

Short-Term Disability Insurance

Short-term disability insurance replaces a portion of your income if an injury or illness forces you out of work for an extended period of time. After you are out of work for 18 days, you may receive up to 60% of your weekly pay up to 24 weeks. Please note that the Short-Term Disability plan is voluntary and the premium is 100% paid by the employee through payroll deduction. **Reminder: Staff who elect Short-Term Disability (STD) will be able to supplement their 60% STD benefit with 40% of their Paid Leave (PL) or Sick Leave banks, ensuring their total benefits equal 100%, until Paid Leave (PL) and Sick Leave is depleted. Total benefit cannot exceed 100% of pre-disability earnings.**

Long-Term Disability Insurance

Broward Health also provides long-term disability insurance to protect your finances when your disability continues beyond the period covered by the short-term disability plan. If you are sick and unable to work for more than 180 days, long-term disability pays you up to 60% of your monthly pay.

Broward Health pays half the premium, while you pay the other half. You'll pay a small amount of tax on the premium paid by Broward Health. By paying that small amount of tax, the benefits you receive while disabled won't be taxable to you, making the 60% benefit worth much more when you need it most.

Evidence of insurability (EOI) will be required for those who previously declined coverage, but electing coverage for the first time.

NOTE: There are different plan guidelines for long-term disability benefits for Management and Physicians.

Important! All Short-Term/Long-Term Disability premium payments must be up to date. Missed or late payment of premiums will affect payment of benefits.



29 Retirement Programs

Building a healthy financial future is just as important as taking care of your health needs today. Putting money aside for your future is easy with Broward Health Retirement Programs. With contributions deducted before federal taxes are calculated, there is less of an impact to your take-home pay than you might think.

Cash Balance Pension Plan

The pension is funded by Broward Health and provides a 5% contribution of your base pay each month (up to IRS limits) towards your retirement. Employee contributions are not required.

Eligible employees are automatically enrolled after attaining age 21 and one full year of employment. You are fully vested after five years of eligible service. You cannot make withdrawals or borrow money from your cash balance pension account.

Pension statements are issued annually, and there is no online access to your account.

Star Plus Retirement Plans

The 403(b) Plan

The 403(b) plan allows you to make pre-tax, voluntary contributions toward your retirement at any time. Broward Health provides a matching contribution of up to 2.4% immediately when you contribute up to 5% of your pay.* New hires will be automatically enrolled in the retirement plan at 2%. Employees will have 45 days to opt out.

The 457(b) Plan

If you're contributing the maximum to the 403(b) plan, consider putting additional pre-tax dollars into the 457(b) plan. Create your retirement account online with **Corebridge Financial**.

Corebridge Financial | Plan #: 09091
800-448-2542
https://www.corebridgefinancial.com/rs/bh

Roth 403(b) and 457(b) Plans

The Roth option offers a way to set aside after-tax dollars.

Employees can contribute up to $24,500** (combined pre-tax and Roth contributions) in 2026. If you are age 50 or older, you can contribute $8,000** more, and if you are age 60-63 you can contribute up to $11,250 in catch-up contributions.

Reminder: There are changes based on Secure Act 2.0 IRS regulations. Participants aged 50 or older who earned $150,000** or more in Social Security wages must contribute the catch-up to a Roth account.

***Physician Residents and Pool Employees are not eligible for the employer match contribution and will not be automatically enrolled. Refer to Eligibility & Enrollment section**
**Projected limits subject to change by the IRS.

	PENSION	403(b)	457(b)
ELIGIBILITY	**Waiting Period:** 1 year of continuous benefit eligible FT & PT employment **Example:** Hired 4/15/2026, a year will be 4/15/2027, you will enter the plan 1st of the month following a year of benefits eligible service which will be 5/1/2027.	**Waiting Period:** There is no waiting period for employee enrollment or for employer match, provided the employee holds a full-time or part-time status Broward Health offers employees who were automatically enrolled an automatic escalation contribution for 403(b) starting at 1% the first pay period of each January, until the contribution reaches 10% Employees wishing to discontinue or change their contributions should contact Corebridge Financial or visit the website to review their account	Employee contribution only so you can start any time
VESTED	Vested after 5 years of benefits eligible service in the plan.	Vested in the plan after 5 years of benefits eligible service	100% immediate vesting
CONTRIBUTION	5% of your base pay salary is employer contribution for you (does not include differentials)	Employee 1%, Match 1% Employee 2%, Match 1.35% Employee 3%, Match 1.70% Employee 4%, Match 2.05% Employee 5%, Match 2.40% Employee more than 5%, Match 2.40% **Match Vest after 5 years** Once you receive match, there is a vesting schedule. If you terminate or become ineligible prior to the vesting schedule, you can forfeit all or some of your match: 1 year of Service = 0% 2 years of Service = 25% 3 years of Service = 50% 4 years of Service = 75% 5 years of Service = 100%	

30 Need to File a Leave of Absence Claim?

When caring for yourself or a loved one takes you away from work, you may need to file a Leave of Absence Claim (e.g., FMLA, General Medical, Military, ADA Accommodations Requests etc.)

Voya Financial makes it easy for you to file 24 hours a day, 7 days a week.

To file your claim, go to https://mybenefitshub.voya.com, **or if you don't have Internet access, you can call 833-973-1670 (Monday-Friday, 7am-9pm ET).**

If you have any questions, you may also reach out to Broward Health's Leave Administration Center at 954-473-7701 (Monday thru Friday 8am-4:30pm).

How to Report a Leave of Absence or Disability

Timely reporting of your leave is critical for approval of your claim for leave and/or benefits. It's easy to file a claim **24/7/365** via web or by phone (see Step 2 below). If you expect to be out of work for more than three days/24 hours*, you must take the following steps:

Step 1: Notify your supervisor, and note you **DO NOT** need to discuss private health issues when providing notice.

Step 2: To file your claim directly on the web, visit https://mybenefitshub.voya.com. If you're accessing the web portal for the first time, you will need to set up an account.

*NOTE: Some absences of fewer than 3 days may qualify you for leave, such as recurrences of your own or a family member's chronic or long-term conditions or family military needs.

If you don't have Internet access, you can call **833-973-1670**. Be ready to provide your personal details, job, illness/injury, and provider information.

Within 24 hours of requesting leave, you will receive an Absence Packet explaining what (if any) additional documentation is needed.

Step 3: Submit the requested documentation for claim processing as soon as possible.

NOTE: You may also be required to file a claim for state disability or family leave benefits depending on location. If that applies, specific state information will be in your claim packet.



31 Additional Benefits

Aetna Transform Oncology NEW

Compassionate cancer support resources designed to help you and your family navigate your care journey with confidence. Access guidance on treatment options, benefits, provider support, genetic counseling/testing resources, and personalized navigation during every step of care.

Contact

877-245-1813

Aetna.com → Member Login → Member Resources → Cancer Support Center

Care.com NEW

Access discounted caregiving support through CareBenefits by Care.com. Employees can enroll for a discounted 12-month Care.com Premium Membership ($99 annually) and search for services such as child care, senior care, housekeeping, and pet care. Enrollment details and access information will be provided upon implementation.

Contact Information

Care.com/Benefits.

Pet Insurance

Nationwide pet insurance helps offset eligible veterinary expenses for pets, including certain treatments and surgeries (see brochure for a full list of eligible pets).

Contact

Nationwide Pet Insurance
877-738-7874
PetInsurance.com/BrowardHealth

On-Call Travel Assistance

24/7 travel assistance for employees and eligible dependents when traveling more than 100 miles from home, including help with travel, medical, prescription, and lost-document needs.

Contact

U.S.: 800-456-3893
Worldwide: +1 603-328-1966
imglobal.com/member
Enter referral code: VOYATRAVEL

PerkSpot Employee Discount Program

Employee discounts on travel, hotels, electronics, fitness memberships, wellness products, apparel, home essentials, entertainment, and more.

Contact

browardhealth.perkspot.com

Legal Insurance

MetLife Legal provides access to participating attorneys for wills, family law, consumer protection, real estate matters, and other legal needs.

Contact

MetLife Legal
800-821-6400
members.legalplans.com

Aetna On-Site Benefit Representative

Your onsite Aetna representative is available every Thursday to help with questions about claims, benefits, coverage, eligibility, enrollment, ID cards, and EOBs. They can also assist with finding in-network providers, navigating Aetna resources, and connecting you with care management programs and member support services.

Contact Information

browardhealthrep@aetna.com

Schedule Appointment

browardhealthrep@aetna.com

Midi Health NEW

Midi Health provides expert virtual care for perimenopause and menopause, with personalized care and treatment options for a range of midlife health concerns. Midi is available to members enrolled in an Aetna health medical plan.

Contact

Website: joinmidi.com/aetna

Email: employer@joinmidi.com

Identity Theft Protection

Aetna provides telephonic consultation with an Identity Fraud Specialist for support if an employee becomes a victim of identity fraud.

Contact

Aetna Resources For Living
888-238-6232
resourcesforliving.com

Auto and Home Insurance

Employees may be eligible for discounted auto and homeowners insurance through participating carriers.

Contact

Farmers: 800-438-6381 | myautohome.farmers.com

Liberty Mutual: 800-730-6975 | libertymutual.com

Tuition.io Tuition/Certification Program and College Planning Resources NEW

Eligible employees may receive up to $5,250 tax-free per calendar year for approved tuition and certification expenses, subject to program guidelines.

Tuition.io offers student loan guidance, one-on-one loan coaching, Public Service Loan Forgiveness support, financial wellness tools, college planning resources, and family account access.

Contact

Access Tuition.io resources at benefits.tuition.io/browardhealth using password: BrowardHealth.

Education Assistance

BENEFIT / RESOURCE	GUIDE COPY / NOTES
TUITION REIMBURSEMENT	Broward Health's Tuition/Certification Reimbursement Program provides reimbursement of up to $5,250 tax-free per calendar year for eligible tuition and certification expenses, subject to program guidelines.
LIVE 1:1 LOAN COACHING	Employees can access live, unlimited one-on-one loan coaching via email or scheduled phone conversations.
STUDENT LOAN ASSISTANCE	Tuition.io helps employees navigate student loan debt, understand repayment options, and explore strategies for managing loans.
PUBLIC SERVICE LOAN FORGIVENESS (PSLF)	Tuition.io provides guidance to help employees understand PSLF eligibility and requirements, including qualifying employment, eligible loans, repayment plans, forgiveness tracking, automated reminders, digital PSLF form submissions, and one-on-one loan coaching.
FINANCIAL WELLNESS TOOLS	Access Tuition.io resources at benefits.tuition.io/browardhealth using password: BrowardHealth.
COLLEGE PLANNING	Employees can access resources to estimate college costs and navigate funding options, including student loan options, financial aid, FAFSA, and education path decisions.
FAMILY ACCOUNTS	Family members can create their own accounts with unlimited access to the Financial Wellness Suite. This includes spouses, children, and parents.
HOW TO ACCESS	Log in through the employee portal and connect with Tuition.io. To enroll, visit the employee portal and click "Sign up."

Professional Growth

- Five Star Academy: Find available learning resources through MyPlace > Human Resources > Department Learning.
- Broward Health Learn2Grow Programs: Build new clinical and nonclinical skills, explore career pathways, and advance your career within Broward Health.
- Training & Development: Access workshops, education, career coaching, and professional development opportunities.

33 Wellness Programs

Wellness Resources

Broward Health offers a variety of wellness resources to support healthy lifestyles, including nutritional information throughout hospital facilities, wellness centers, fitness programs, and tools designed to help employees achieve their health and wellness goals.

Tobacco Free/Healthy Lifestyle

Employees and spouses who do not use tobacco products may be eligible for discounted medical plan premiums. Smoking cessation resources are also available.

Contact

954-847-4327 (EAP)

Employee Assistance Program (EAP)

Confidential counseling and support services for employees and eligible dependents, including emotional wellbeing, family concerns, legal and financial guidance, work-life resources, and referral services. In addition to Broward Health's EAP, employees may access Aetna Resources For Living.

Contact

Broward Health EAP: 954-847-4327
Aetna Resources For Living: 888-238-6232
Website: ResourcesForLiving.com
Username: BrowardHealth | Password: EAP

Employee Health Clinic Care NEW

Employee Health is excited to introduce Clinic Care — a new service created **exclusively for Broward Health employees** (dependents not included). Get convenient, no-cost evaluation and treatment from a nurse practitioner for common minor health concerns.

Important Note: Clinic Care is available only to Broward Health employees. Spouses and dependents are not eligible.

No Appointment Needed! Visit Clinic Care for:

- Cold, cough, flu-like symptoms
- Conjunctivitis (pink eye)
- Earaches
- Minor rashes and skin irritations
- Seasonal allergies
- Strep throat
- Sinus symptoms
- Sore throat
- Urinary tract infections
- Basic health screenings and tests

Clinic Care is designed to provide quick access to care when you're feeling under the weather. This service offers convenient care for minor health concerns, but does not replace your primary care provider.

Clinic Care is available at:

Employee Health
1700 NW 49th St, Suite 110
Fort Lauderdale, FL
Hours: Monday–Friday, 8am-4pm
Call Employee Health at 954-473-7130

34 Broward Health's Employee Fitness Centers



1	2	3	4
Broward Health Medical Center 1600 S. Andrews Avenue Fort Lauderdale 954-355-5521	**Broward Health Imperial Point** 6401 N Federal Highway Fort Lauderdale 954-776-8830	**Broward Health Coral Springs** 3000 Coral Hills Drive Coral Springs 954-355-5521	**Spectrum** 1800 NW 49th Street Fort Lauderdale 954-355-5521
Hours: Monday-Thursday I 5:45am-9pm Friday I 5:45am-7pm Saturday & Sunday I 8am-4pm	**Hours:** Monday & Wednesday I 7am-7pm Tuesday, Thursday, Friday I 7am-6pm	**Hours:** 24 Hours for employees	**Hours:** HIIT Training Monday & Wednesday I 5:15pm

Employee Rate for 3 Fitness Centers (BHMC, BHIP, BHCS)
$10 NOT including classes (Biweekly payroll deduction)

Employee Rate With Classes — BHMC ONLY
$15 includes classes (Biweekly payroll deduction)
Monthly credit card option $30 — prorate in both options

Nicklaus Childrens Hospital Employee
Pay $20 via credit/debit card annually

GME Resident Rate
Free with registration

BHCS Employee Rate for Fitness Center
$5 (Biweekly)

BHC Spectrum Class
$4 per class via credit/debit card

For more information, scan the code or visit BrowardHealth.org/health-resources/fitness-center.

35 Important Contacts

Auto and Home
Farmers Insurance
800-438-6381
www.myautohome.farmers.com

Liberty Mutual Insurance
800-730-6975
www.libertymutual.com

Broward Health Benefits Department
1700 NW 49th Street, Suite 125
Fort Lauderdale, FL 33309
954-473-7368
employee.browardhealth.org
benefits@browardhealth.org

Credit Union
Broward Health Credit Union
954-625-3660
www.bhcfcu.org

Dental
Aetna Dental
877-238-6200
www.aetna.com

Disability (STD/LTD)
Voya Leave Management
833-973-1670
https://mybenefitshub.voya.com

Employee Assistance Program
Broward Health Employee Assistance (EAP)
954-847-4327
800-343-2186
employee.browardhealth.org/pages/eap

Aetna Resources For Living EAP
888-238-6232, TTY: 711
www.resourcesforliving.com
Username: BrowardHealth
Password: EAP

Employee Health and Clinic Care Center
954-473-7130

Employment Verification
The Work Number
800-367-5690
www.theworknumber.com

Flexible Spending Account
HealthEquity
(formerly WageWorks)
877-924-3967
www.healthequity.com

Health Savings Account
Inspira Financial
888-678-8242
www.inspirafinancial.com

Human Resources Business Center
954-473-7090
HRBC@browardhealth.org

Identity Theft Protection
Aetna
888-238-6232
www.resourcesforliving.com

Leave Management
Voya Leave Management
833-973-1670
https://mybenefitshub.voya.com

Broward Health Leave Administration Center
954-473-7701
leaverequests@browardhealth.org

Legal
MetLife Legal
800-821-6400
www.members.legalplans.com

Life and AD&D
Voya Financial
888-238-4840
www.voya.com/claims

Medical & Oncology Program
Aetna
877-245-1813
www.aetna.com

Pet Insurance
Nationwide Pet Insurance
877-738-7874
www.petinsurance.com/BrowardHealth

Pharmacy
Broward Health Medical Center Outpatient Pharmacy
954-468-8082, option 5

Liviniti
800-710-9341
liviniti.com
support@liviniti.com

HealthDyne Mail Order
855-772-9384
liviniti.healthdyne.com

Voluntary Benefits
(Accident, Critical Illness, Hospital Indemnity)
Voya Financial
877-236-7564
www.voya.com/claims

Telemedicine
CVS Virtual Care
CVS.com/virtual-care

Travel Assistance
Voya Financial
877-236-7564
www.voya.com/claims

Scan or go to employee.BrowardHealth.org.

Retirement
Corebridge Financial (formerly AIG)
Plan #09091 – 403(b)/457(b)
800-448-2542
www.BH.AIGRS.com

Vision
Aetna (EyeMed, LLC)
877-973-3238
www.aetnavision.com

Care.com
CareBenefits
care.com/yourbenefits
Customer Support:
http://help.care.com/

Tuition.io
Microsite:
https://benefits.tuition.io/browardhealth
Password: BrowardHealth

COBRA Administration
iSolved Benefit Services
800-594-6957
crmail@isolvedhcm.com



Required Notices

Important Notice From Broward Health About Your Prescription Drug Coverage and Medicare Under the Aetna Plan(s)

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Broward Health and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

2. Broward Health has determined that the prescription drug coverage offered by the Aetna plan(s) is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage If You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Broward Health coverage may not be affected. For most persons covered under the Plan, the Plan will pay prescription drug benefits first, and Medicare will determine its payments second. For more information about this issue of what program pays first and what program pays second, see the Plan's summary plan description or contact Medicare at the telephone number or web address listed herein.

If you do decide to join a Medicare drug plan and drop your current coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Broward Health and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice or Your Current Prescription Drug Coverage…

Contact the person listed at the end of these notices for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Broward Health changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage…

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227).
  TTY users should call 1-877-486-2048

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Medicare Part D notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	January 1, 2027
Name of Entity/Sender:	Broward Health
Contact—Position/Office:	Human Resources
Address:	1700 NW 49th Street, Suite 125, Room 2131 Fort Lauderdale, FL, 33309
Phone Number:	954-473-7192

Women's Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. For deductibles and coinsurance information applicable to the plan in which you enroll, please refer to the summary plan description. If you would like more information on WHCRA benefits, please contact Human Resources at 954-473-7192.

HIPAA Privacy and Security

The Health Insurance Portability and Accountability Act of 1996 deals with how an employer can enforce eligibility and enrollment for healthcare benefits, as well as ensuring that protected health information which identifies you is kept private. You have the right to inspect and copy protected health information that is maintained by and for the plan for enrollment, payment, claims and case management. If you feel that protected health information about you is incorrect or incomplete, you may ask your benefits administrator to amend the information. For a full copy of the Notice of Privacy Practices, describing how protected health information about you may be used and disclosed and how you can get access to the information, contact Human Resources at 954-473-7192.

HIPAA Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to later enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage).

Loss of eligibility includes but is not limited to:

- Loss of eligibility for coverage as a result of ceasing to meet the plan's eligibility requirements (i.e. legal separation, divorce, cessation of dependent status, death of an employee, termination of employment, reduction in the number of hours of employment);
- Loss of HMO coverage because the person no longer resides or works in the HMO service area and no other coverage option is available through the HMO plan sponsor;
- Elimination of the coverage option a person was enrolled in, and another option is not offered in its place;
- Failing to return from an FMLA leave of absence; and
- Loss of coverage under Medicaid or the Children's Health Insurance Program (CHIP).

Unless the event giving rise to your special enrollment right is a loss of coverage under Medicaid or CHIP, you must request enrollment within 30 days after your or your dependent's(s') other coverage ends (or after the employer that sponsors that coverage stops contributing toward the coverage).

If the event giving rise to your special enrollment right is a loss of coverage under Medicaid or the CHIP, you may request enrollment under this plan within 60 days of the date you or your dependent(s) lose such coverage under Medicaid or CHIP. Similarly, if you or your dependent(s) become eligible for a state-granted premium subsidy towards this plan, you may request enrollment under this plan within 60 days after the date Medicaid or CHIP determine that you or the dependent(s) qualify for the subsidy.

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or obtain more information, contact Human Resources at 954-473-7192.

39 Notes




Broward®
Health