

# 2024 Benefits Guide



Medical City Dallas

Get the most out of your Medical City Dallas Management, Ltd. (MCDML) benefits! This brochure provides an overview of our benefits program. MCDML provides employee coverage for health, dental, life, and dependent life at no cost to the employee, and employees are able to choose vision coverage at a low monthly premium. MCDML benefit plans allow you to choose the options that work best for your own needs—and your pocketbook.

## ELIGIBILITY

If you are a regular, full-time employee scheduled to work at least 30 hours per week, you are eligible for benefits on the first day of the month following 60 days of continuous service.

In most cases, you can also cover your eligible dependents, including your legal spouse, your children under age 26, and your unmarried children of any age who are unable to support themselves because of physical or mental disability.

## WHEN COVERAGE BEGINS

Several weeks before the effective date of a new employee's coverage MCDML sends enrollment forms and Summary Plan Descriptions. The enrollment forms must be completed and returned to MCDML before you will be enrolled in any plan. In the event you do not return the enrollment forms prior to your eligibility date, you will have to wait until the next annual Open Enrollment to enroll in benefits. Should you have a Qualifying Life Event such as getting married, having a baby, or loss of health coverage, you may be eligible to enroll or change coverage.

## HOW TO ENROLL

Please complete the benefit enrollment forms sent to you and return to HR two weeks prior to your eligibility date.

## QUESTIONS

For assistance enrolling or other general benefits questions, contact Debbie Conner (972-566-7840 /[debbieconner@medicalcity.com](mailto:debbieconner@medicalcity.com)).



## MEDICAL COVERAGE

MCDML medical plan is administered by BlueCross BlueShield of Texas.

Information relating to your coverage, claims, and in-network providers can be obtained at [www.bcbstx.com](http://www.bcbstx.com).

BlueCross BlueShield – PPO		
<b>Premium Per Paycheck</b>		
EE Only	\$0.00	
EE + Spouse*	\$385.50	
EE + Child(ren)	\$273.75	
EE + Family	\$575.00	
<b>Provider Availability</b>	In-Network	Out-of-Network
<b>Deductible</b>		
Individual	\$6,650	\$13,300
Family	\$13,300	\$26,000
<b>Annual OOP Maximum</b>		
Individual	\$6,650	Unlimited
Family	\$13,300	Unlimited
<b>Copays/Coinsurance</b>		
<b>Preventive Care</b>	Covered 100%	50% after Deductible
<b>Primary Care</b>	0% after Deductible	50% after Deductible
<b>Specialist</b>	0% after Deductible	50% after Deductible
<b>Diagnostic, X-Ray, Lab Services</b>	0% after Deductible	50% after Deductible
<b>Urgent Care</b>	0% after Deductible	50% after Deductible
<b>ER</b>	0% after Deductible	50% after Deductible
<b>Inpatient Hospital Care</b>	0% after Deductible	50% after Deductible
<b>Outpatient Surgery</b>	0% after Deductible	50% after Deductible
<b>Rx Coverage – Retail (31-day supp.)/Mail Order (90-day supp.)</b>		
Tier 1	0% after Deductible	50% after Deductible
Tier 2	0% after Deductible	50% after Deductible
Tier 3	0% after Deductible	50% after Deductible

**\*Coverage for spouses only applies to currently enrolled Spouses. Any spouse not currently covered is not eligible to enroll.**

## HEALTH REIMBURSEMENT ARRANGEMENT (HRA)

The HRA, funded by MCDML, funds a portion of the medical plan deductible after you have paid the first \$500. The HRA does not assist with expenses on the dental or vision plan. The HRA is administered by TaxSaver.

Individual Coverage		
<b>Total Deductible / Out of Pocket Maximum</b>		
<b>Total: \$6,650</b>		
<b>Employee Pays: \$2,650</b>		
<b>MCDML Pays thru HRA Card: \$4,000</b>		
<b>Employee:</b>	<b>MCDML:</b>	<b>Employee:</b>
<b>Pays First \$500</b>	<b>Pays Next \$4,000 Paid thru HRA Card</b>	<b>Pays last \$2,150</b>

Family Coverage		
<b>Total Deductible / Out of Pocket Maximum</b>		
<b>Total: \$13,300</b>		
<b>Employee Pays: \$6,300</b>		
<b>MCDML Pays: \$7,000</b>		
<b>Employee:</b>	<b>MCDML:</b>	<b>Employee:</b>
<b>Pays First \$500</b>	<b>Pays Next \$7,000 Paid thru HRA Card</b>	<b>Pays last \$5,800</b>

## HRA REIMBURSEMENT PROCESS

Once you have paid \$500 toward your covered medical expenses, you can begin filing for reimbursement through the HRA by following these steps:

1. Log into [www.bcbstx.com](http://www.bcbstx.com) and retrieve your most recent Explanation of Benefits (EOB).
2. Print the EOB. If you are unable to print the EOB, you can print the "Claim Payment Summary".
3. Complete the TaxSaver Request for Reimbursement Form. You can obtain this form by emailing [debbieconner@medicalcity.com](mailto:debbieconner@medicalcity.com).
4. Submit the Request for Reimbursement Form along with the EOB to TaxSaver:
  - Email: [claims@taxsaverplan.com](mailto:claims@taxsaverplan.com)
  - Fax: 214-528-8122
  - Customer Service: 1-800-328-4337



## DENTAL COVERAGE

MCDML Dental plan is administered by BlueCross. The plan provides coverage for typical dental expenses, such as cleanings, X-rays, fillings, and orthodontia for children. To find providers in the BlueCare Dental Network, please visit

<http://www.bcbstx.com/onlinedirectory/dental.htm>

Feature	Dental PPO
<b>Deductible</b>	
Individual	\$50
Family	\$150
<b>Preventive</b>	
	100% Deductible Does Not Apply
<b>Basic Services</b>	
	80%
<b>Major Services</b>	
	50%
<b>Orthodontia - Adults &amp; Children (up to age 19)</b>	
	50%
<b>Premium Per Paycheck</b>	
EE Only	\$0.00
EE + Spouse	\$17.05
EE + Child(ren)	\$22.00
Family	\$44.10

## VISION COVERAGE

MCDML Vision plan is administered by MetLife, utilizing the VSP network. The plan covers eye exams, lenses, frames, and contact lenses. To find a VSP network provider, visit [www.metlife.com/vision](http://www.metlife.com/vision).

Feature	In-Network
<b>Exam</b>	\$10
<b>Prescription Glasses</b>	
Single Lenses	\$20
Bifocals - Lined	\$20
Frames	\$25 + \$150 Allowance At Costco: \$85 Allowance after \$25 + 20% savings over allowance
<b>Contacts</b>	
Medically Necessary	Covered in Full
Elective	\$150 Allowance
Contact Lens Exam	Up to \$60
<b>Frequency</b>	
Exam	Once Every 12 Months
Frames	Once Every 12 Months

Lenses	Once Every 12 Months
Contacts	Once Every 12 Months
<b>Premium Per Paycheck</b>	
EE Only	\$4.41
EE + Spouse	\$8.39
EE + Child(ren)	\$8.83
Family	\$12.98

## LIFE INSURANCE AND AD&D COVERAGE

MCDML provides Basic Life and Accidental Death & Dismemberment insurance for employees at no cost. If employees decide to cover their dependents there is an additional cost.

Basic Life and AD&D are administered by The Hartford. Coverage limits are:

Coverage For	Coverage Available
<b>Employee</b>	2x Basic Annual Earnings Up to \$400,000
<b>Spouse</b>	\$5,000
<b>Child</b>	Birth to 6 Months: \$100 6 Months to 26 Years: \$2,000

## DISABILITY COVERAGE

MCDML provides Long-Term Disability (LTD) coverage to keep all or part of your paycheck coming if you cannot work due to a qualifying illness or injury. Participation begins on the first of the month following 60 days of employment. Coverage is administered by The Hartford.

If you remain on disability or are unable to work after a 90-day elimination period, LTD kicks in and will replace up to 60% of your base pay, up to a maximum of \$10,000 per month.



## IMPORTANT CONTACTS

Resource	Phone Number	Website/E-mail
Medical and Prescription BlueCross BlueShield of Texas	800-521-2227	<a href="http://www.bcbstx.com">www.bcbstx.com</a>
Dental BlueCross BlueShield of Texas	800-521-2227	<a href="http://www.bcbstx.com">www.bcbstx.com</a>
Vision MetLife	855-638-3931	<a href="http://www.metlife.com/mybenefits">www.metlife.com/mybenefits</a>
Life Insurance The Hartford	888-563-1124	<a href="http://www.thehartford.com">www.thehartford.com</a>
Disability Coverage The Hartford	888-277-4767	<a href="http://www.thehartford.com">www.thehartford.com</a>
HRA TaxSaver	800-328-4337	<a href="mailto:claims@taxsaverplan.com">claims@taxsaverplan.com</a>

## HOLMES MURPHY BENEFIT ADVOCACY RESOURCE

Holmes Murphy is the Agent that assist MCDML with employee benefits. As an employee of Medical City Dallas Management, you have access to one of Holmes Murphy's Benefits Analyst. Sandie Cooper is available to you and your dependents to help assist you in your benefits related questions. Simply call or email and Sandie will be available to help you with your questions. If she does not have an immediate answer, she will research it and get back to you in a timely manner without you waiting on hold. How easy is that?

Some of these questions you might have include:

- How do I order a new ID card?
- Is my doctor/dentist in the network or out of the network?
- What is my deductible or what does "co-insurance" mean?
- I received a bill from my doctor. Was my claim paid correctly?
- What is an "EOB" and how do I read it?
- I just need to get my teeth cleaned. What is my co-pay?
- How often can I get new eyeglasses/contacts?
- Where can I find a claim form for out-of-pocket payments?



**SANDIE COOPER**  
**BENEFITS ANALYST**  
[scooper@holmesmurphy.com](mailto:scooper@holmesmurphy.com)  
**DIRECT: (214) 706-5453**  
**FAX: (972) 889-7550**

**Available Monday-Friday from 8a-5p CST**

This is a very brief summary of benefits. In the event the wording of this summary causes confusion about how the program operates, the language of the Summary Plan Descriptions (SPDs), legal plan descriptions, and contracts will govern. For more information or benefit details, please refer to your enrollment guide or the SPDs.