

2023 Benefits Summary

Mass General Brigham Fellows





We support our employees in many ways, including through our competitive program of health and welfare, retirement and voluntary benefits for employees and their families.

Mass General Brigham wants to inform you on the comprehensive benefit package offered and we look forward to working with you.

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Enrollment and eligibility



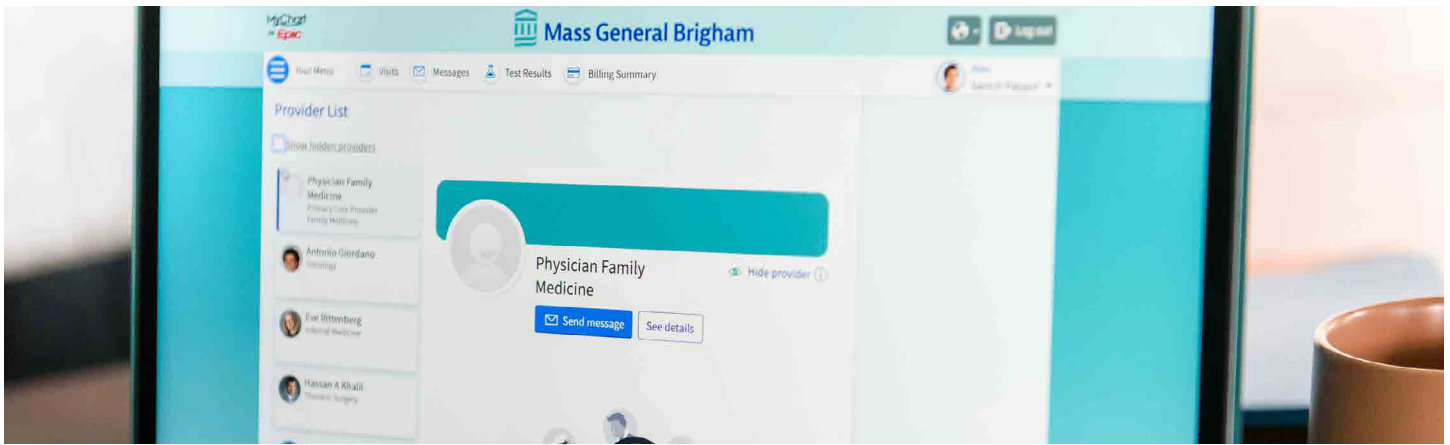
To have coverage, you must enroll for benefits within 30 days of your hire date. If you enroll within this time, your benefits will be effective as of your date of hire. Medical/dental/vision plans may be elected for employee only, employee and legal spouse*, employee and children (who are under the age of 26, or children over the age of 26 if the child is deemed disabled), or family. Monthly-paid residents scheduled to work at least 87 hours per month at a standard hospital salary for at least \$10,000 annually with an appointment at a sponsoring institution are eligible for benefits. You may be asked to provide dependent eligibility verification documents such as a marriage certificate, birth/adoption certificates or legal guardianship court paperwork. Please note that if you do not enroll within 30 days of your benefits eligibility date, you will automatically be enrolled in the Select health plan for yourself only and will have to wait until the next annual Open Enrollment period to change your coverage (unless you experience a qualifying life event).

* Mass General Brigham does not cover former spouses or domestic partners.

Qualifying life event

Outside of your new hire and Open Enrollment in the fall, the only other time you can make changes to your benefits is within 30 days of a qualifying life event.* Examples of a qualifying life event include marriage, divorce or the birth or adoption of a child. If you have a qualifying life event, you have 30 days from the event to make changes in employee self service. Your benefit change must be consistent with your change of status. If you have a baby, for example, you may change your medical coverage level from employee to employee and family within 30 days of your child's birth.

* Retirement plan and RMSA contributions can be updated at any time throughout the year.



Medical plans administered by Mass General Brigham Health Plan

Mass General Brigham offers two health plans, the Select and Plus plans, administered by Mass General Brigham Health Plan. The Select and Plus health plans use the UnitedHealthcare Options PPO Network for nationwide coverage. When you or your dependents need access to care outside Massachusetts, New Hampshire and Rhode Island, you will have access to more than 1 million providers and 5,200 hospitals nationwide. In New Hampshire and Rhode Island, the UnitedHealthcare Options PPO Network supplements the Mass General Brigham Health Plan network. You pay less when you see providers in the Tier 1 network.

Regardless of which plan you choose, you do not need to obtain referrals to see a specialist and your plan does not require you to have a primary care physician, but we encourage you to have one.

The plans: Select and Plus

- 1** The **Select plan** is a tiered plan that offers low-cost, high-quality care from providers within the Mass General Brigham community (Tier 1). The plan also gives you the choice of seeking care from in-network providers outside of Mass General Brigham (Tier 2). These in-network providers will have a higher cost share than those within the Mass General Brigham community. The Select plan offers lower per-paycheck premium deductions than the Plus plan. Employee only coverage under the Select plan is 100% subsidized by Mass General Brigham and there is no paycheck deduction for the cost of coverage.
- 2** The **Plus plan** offers the same comprehensive coverage as the Select plan but also provides coverage for providers outside the Mass General Brigham Health Plan network. An out-of-network provider does not have a contractual agreement with Mass General Brigham Health Plan. Your per-paycheck costs are higher with Plus than with Select.

You may want to consider the **Select plan** if you mostly see providers in the Tier 1 network. Several services do not have tiered coverage, including speech therapy, mental health services, substance use disorder treatment, chiropractic services, physical and occupational therapy. This means you will pay the Tier 1 cost sharing if you see a network provider.

You may want to consider the **Plus plan** if you and your adult family members use mostly non-Mass General Brigham providers in the Tier 2 network, or you use out-of-network providers.

* Tiering does not apply for employees who live out-of-area, so Tier 1 cost-sharing applies to all services delivered by a network provider (Tier 1 or Tier 2).

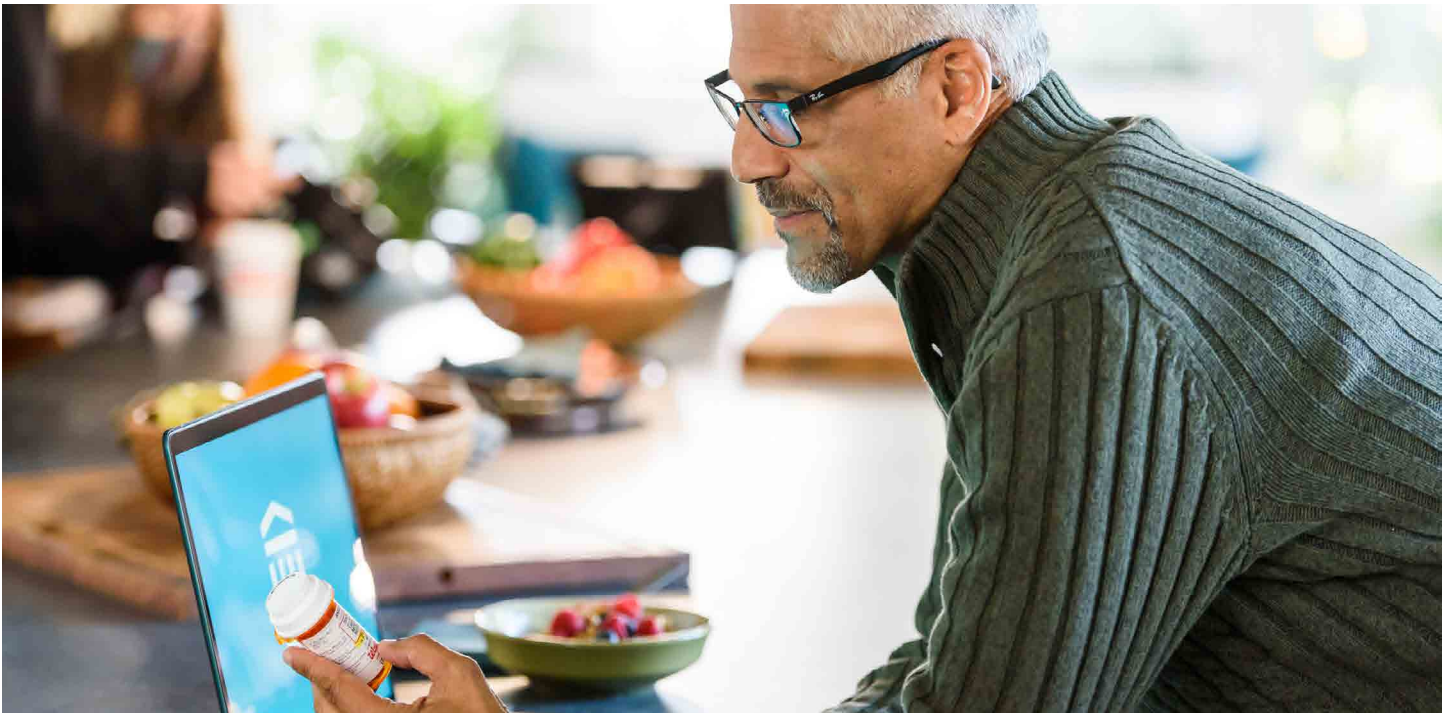
You can search the [provider directory](#) to see if your physicians are within the Mass General Brigham Health Plan network, without having to log in to the Mass General Brigham Health Plan [website](#).

See the tables below for cost sharing. Please note, this document contains a brief explanation of benefits only.

Plus plan	Tier 1	Tier 2	Out-of-network
Preventive	\$0	\$0	Not covered
Co-payments	PCP/Pediatric \$15 Specialist \$30	PCP \$45 Pediatric \$30 Specialist \$70	Plan pays 70% after deductible
Deductible	\$0	\$1,000/\$2,000	\$2,000/\$4,000
OOP (out-of-pocket max.)	\$2,500/\$5,000	\$4,000/\$8,000	\$5,000/\$10,000
ER co-payment	\$200 (waived if admitted)		
High cost Dx (PET, CT, MRI)	\$50 co-payment	Plan pays 85% after deductible	Plan pays 70% after deductible

Select plan	Tier 1	Tier 2
Preventive	\$0	\$0
Co-payments	PCP/Pediatric \$15 Specialist \$30	PCP \$70 Pediatric \$30 Specialist \$100
Deductible	\$0	\$4,000/\$8,000
OOP (out-of-pocket max.)	\$2,500/\$5,000	\$5,000/\$10,000
ER co-payment	\$200 (waived if admitted)	
High cost Dx (PET, CT, MRI)	\$50 co-payment	Plan pays 70% after deductible






Prescription drugs

When you enroll in a medical plan, your prescription drugs are covered by CVS/Caremark.

Up to a 30-day supply			90-day maintenance drug supply		
\$10 co-pay Generic drugs	\$40 co-pay Preferred brand-name	\$70 co-pay Non-preferred brand-name	\$20 co-pay Generic drugs	\$80 co-pay Preferred brand-name	\$140 co-pay Non-preferred brand-name

Your prescription drug plan includes an out-of-pocket maximum that limits how much you will have to pay in prescription drug co-payments during the calendar year. Your prescription out-of-pocket maximum depends on your level of medical coverage (for example, individual or family) and your salary and is reevaluated each January 1.

	Salary level	Out-of-pocket maximum levels
Annual prescription drug out-of-pocket maximum 	Under \$50,000	\$300 individual coverage/ \$600 for all other levels
	\$50,000 to \$100,000	\$1,000 individual coverage/ \$2,000 for all other levels
	Above \$100,000	\$2,000 individual coverage/ \$4,800 for all other levels

The prescription drug out-of-pocket maximum is embedded for individuals. This means that no one member will pay more than the designated individual amount out-of-pocket.

Dental plans through Delta Dental of MA

We offer two plan choices, Basic or Major. Routine cleanings and diagnostic services are covered 100%. There is an annual benefit maximum per covered person of **\$1,000 for Basic** or **\$2,000 for Major**. The Major Plan also covers a portion of orthodontia. Navigate to the Delta Dental MA website to search the [provider directory](#).

See the table below for dental benefits:

Dental plans	Basic plan	Major plan
Calendar year maximum	\$1,000 per member	\$2,000 per member
Calendar year deductible	\$50/\$100	\$25/\$50
Diagnostic: Oral exam – twice per calendar year. Panoramic or full mouth x-rays – once per 60 months Single tooth x-ray – as needed	100% coverage	100% coverage
Preventive: Teeth cleaning – twice per calendar year Fluoride treatments – twice per calendar year for members under the age of 19 Sealants – unrestored permanent molars, every 4 years per tooth for members through age 15.	100% coverage	100% coverage
Basic restorative: Oral Surgery Periodontics Endodontics Prosthetic maintenance Emergency dental care	50% coverage	80% coverage
Prosthodontics: Dentures Bridges Implants Major restorative: crowns or onlays cast posts, buildups	50% coverage	50% coverage
Orthodontics (any age)	Not a covered benefit	50% coverage; \$2,000 per person lifetime maximum

Vision insurance through Davis Vision

To see if your eye doctor is part of the Davis Vision network, go to the Davis Vision website to search the [provider directory](#).

See the table below for Mass General Brigham's vision benefits through Davis Vision:

Benefit	Frequency once every –	In-network co-pay	In-network coverage
Eye examination	Calendar year	\$10	Covered in full. Includes dilation when professionally indicated.
Lenses (for glasses)	Calendar year	\$0	Clear plastic lenses in single vision, bifocal, trifocal, or lenticular prescription. Covered in full.
Frames	Calendar year	\$0	<p>Covered in full frames: Any fashion or designer level frame from Davis Vision's Collection (retail value, up to \$160)</p> <p>OR, Frame allowance: \$125 allowance toward any frame from provider plus 20% off the balance.</p>
Contact lens evaluation, fitting and follow up care	Calendar year	\$0	<p>Davis Vision Collection contacts: Covered in Full</p> <p>Non-Collection contacts: N/A</p>
Contact lenses (in lieu of eyeglasses)	Calendar year	\$25	<p>Covered in full contacts: From Davis Vision's Collection, after co-pay, up to:</p> <p>Planned Replacement – Two boxes/multi packs</p> <p>Disposable – Four boxes/multi packs</p> <p>OR, contact lens allowance – \$125 allowance toward any contacts from providers' supply plus 15% off balance. No co-pay required.</p> <p>OR, visually required contacts – covered in full with prior approval.</p>

Healthcare and dependent care flexible spending accounts (FSA)

Mass General Brigham offers its employees both a healthcare FSA and a dependent care FSA through HealthEquity/WageWorks.

A **healthcare FSA** is an account you put pre-tax money into that you use to pay for certain out-of-pocket healthcare costs, such as co-payments, deductible, coinsurance, vision care expenses and dental expenses. The maximum you can put into your FSA for 2023 is \$3,050. You will be issued a debit card from HealthEquity/WageWorks that you can use at your local pharmacy or doctor's office. The amount that you elect to go into your FSA will be frontloaded, meaning you will have access to the full amount up front.

A **dependent care FSA** is an account you put pre-tax money into that you use to pay for eligible child and elder care (day care) expenses. The maximum amount you can put into the dependent care FSA for 2023 is \$5,000.

	Healthcare FSA	Dependent care FSA
Max contribution for 2023	\$3,050	\$5,000
Funds available immediately	✓	
Pre-tax	✓	✓
Use it or lose it	✓	✓
Have until March of the following year to submit claims	✓	✓

Contribute



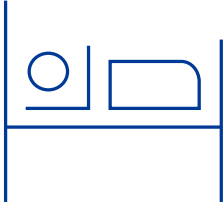
Use it or lose it



Submit claims

Protecting you and your family

Disability insurance



The **salary continuation plan** provides you with income replacement when you are unable to work due to a serious illness or injury. Our salary continuation plan runs for up to 12 weeks.

Long-term disability (LTD) is an insurance policy that provides you with income replacement if you are unable to return to work after salary continuation.

See the table below for coverage and buy-up options.

Insurance	Coverage
Salary continuation	<ul style="list-style-type: none">• You are enrolled automatically in a salary continuation program. If you are unable to work as a result of illness or injury, this will provide you with 12 weeks of salary continuation.• There is no cost to you for this coverage.
Long-term disability	<ul style="list-style-type: none">• You automatically receive coverage equal to 60% of your base pay. There is no cost to you for this coverage.• Benefits continue while you remain disabled or until age 65; if you are 60 or older when you become disabled, benefits continue for up to five years until age 70, but not less than one year.• Your employer paid core LTD benefit is taxable income.

Life/AD&D insurance – Basic and Supplemental



Life insurance protects your family from the potentially devastating financial losses that could result if something happened to you. Mass General Brigham provides its employees with basic life and AD&D insurance and also offers supplemental insurance.

See the below table for coverage:

Insurance	Coverage	Cost
Basic life and AD&D	<ul style="list-style-type: none">You are enrolled automatically in coverage equal to 1x your annual salary (\$500,000 maximum in each program) or may choose to enroll in \$50,000.Amounts in excess of \$50,000 are subject to imputed income according to IRS rules.Benefit coverage reductions may apply after age 65.	No cost to you
Supplemental life and/or AD&D insurance	<ul style="list-style-type: none">You may elect up to 8x your annual salary (maximum of \$2 million). Newly-eligible employees can elect up to 4x base salary, up to \$800,000, without providing proof of good health.	Varies based on age and coverage
Spouse term life and/or AD&D insurance	<ul style="list-style-type: none">You can purchase spouse term life insurance and/or AD&D coverage up to \$200,000.Election amounts over \$50,000 will require proof of good health.	Varies based on age and coverage
Child term life and/or AD&D insurance	<ul style="list-style-type: none">You can purchase child term life insurance and/or AD&D insurance up to \$20,000.Proof of good health is not required.	\$0.189 per \$1,000 of coverage

Business travel accident insurance

You are enrolled automatically in coverage equal to 5x your annual salary (\$2 million maximum).

Planning for your future

Mass General Brigham wants to help you prepare for your future by offering a 403(b) Retirement Savings Plan and a Retiree Medical Savings Account.

403(b) Retirement Savings Plan

The **403(b) Retirement Savings Plan** (also known as the 403(b) Plan), allows you to supplement your retirement income while enjoying tax-deferred savings. You are eligible to make employee contributions immediately upon hire. You are also eligible for a 2% employer non-elective contribution if you are age 21 and scheduled 20 or more standard hours per week.

403(b) Retirement Savings Plan facts

- ✓ You may change your deferral rate at any time of the year.
- ✓ You do not need to make voluntary contributions to the 403(b) Plan to receive the employer non-elective contribution.
- ✓ You may choose Traditional (pre-tax) and/or Roth (after-tax) contributions.
- ✓ You are always immediately vested in your contributions. You will be vested in your employer non-elective contributions after completing three years of service (years in which you are paid at least 1,000 hours).
- ✓ You elect how your account is invested by choosing from a wide range of investments available through Fidelity and TIAA. If you do not make an investment election when you enroll, your account will be invested automatically in the Vanguard Target Retirement Date Fund closest to the year in which you turn 65.

Retiree Medical Savings Account (RMSA)

With the rising cost of health care, it is more important than ever to save for medical expenses you will incur in retirement.

The **Retiree Medical Savings Account (RMSA)** allows you to set aside money to draw on for qualifying medical expenses after retirement and may make you (and your dependents) eligible to receive group medical coverage once you retire.

RMSA facts

- ✓ Benefits-eligible employees age 50 or older can save for retirement medical expenses by contributing up to \$4,500/year towards a RMSA.
- ✓ During Open Enrollment, you can enroll in a RMSA via employee self service. Once you begin, you may suspend your contributions at any time for any reason. To make a change, please contact the [HR Support Center](#).
- ✓ When you contribute to the RMSA, your employer provides a match of 50% of the first \$1,000 you contribute, up to \$500 a year and \$7,500 over the course of your employment.
- ✓ You earn interest on your account balance. Interest grows tax-free on your entire account and is credited as of the end of each calendar year based on your opening balance at the beginning of that calendar year.
- ✓ Vesting for the employer match contribution requires 5 years of vesting service under the retirement program and termination after attaining age 55. If you are vested, you may qualify for an employer-sponsored group medical plan when you retire.

Supporting you in other ways

Voluntary benefits

Mass General Brigham is proud to offer a Voluntary Benefits and Discount Program providing access to additional benefits to supplement core health coverage and the option to enroll in additional offerings. The voluntary benefits offered include accident insurance, critical illness insurance, hospital indemnity insurance, legal services, identity theft insurance, auto and home insurance, and pet health insurance. We also offer a discount shopping program with discounts on an array of goods and services, including computers, theme parks, entertainment and travel.

Tuition.io

Mass General Brigham recognizes that many employees are impacted by the financial stress of student debt. For that reason, we have partnered with Tuition.io, a comprehensive education benefits program, to provide access to no cost tools that will help you manage, and over time, eliminate your student debt. Tuition.io's no cost tools include Public Service Loan Forgiveness (PSLF) application support.

Tuition assistance program

All employees who are regularly scheduled to work 20 hours or more per week and who have completed 6 months of continuous service prior to starting a course are eligible for this reimbursement benefit.

The course of study must be skill enhancing and related to a business function at Mass General Brigham. Online courses qualify for reimbursement, provided they are offered through an accredited college or post-secondary program.

Employee Assistance Program (EAP)

The Employee Assistance Program (EAP) is a free and confidential work and life resource that provides short-term counseling, consultation, referral to resources and seminars. The EAP has helped thousands of employees put their problems in perspective and get the help they need to be happy and productive.

Lyra Health

Mass General Brigham Health Plan offers a comprehensive mental health solution in partnership with Lyra Health to promote overall health and well-being. Mass General Brigham residents and their families who are enrolled in the Mass General Brigham Select or Plus employee health plans will have expanded access to high-quality mental health services. Lyra provides secure and confidential access to clinically proven mental health services.

Features of Lyra include:

- Care how and where you need it with a first-available session in three days or less with a licensed mental health clinician by video, messaging or in-person.
- Diverse, multilingual and culturally responsive mental health care providers.
- Access to 24/7 care navigators and concierge services to help find the appropriate mental health care.
- Access to self-guided online programs to securely and confidentially receive evidence-based mental health treatment.

Transportation

Monthly discounted MBTA passes are available through a pre-tax payroll deduction allows you to purchase a T pass at a 50% discounted rate. You pay through a monthly payroll deduction and the cost of the pass is taken on a pre-tax basis up to IRS and Commonwealth of Massachusetts allowable limits.

Child and dependent care

Mass General Brigham operates four onsite childcare centers in partnership with Bright Horizons. Each center offers full-day, year-round childcare for infant, toddler and preschool age children of benefits eligible employees.

Centers are:

- Mass General Hospital Children's Center
- MGH Institute of Health Professions Children's Quarters
- McLean Child Care Center
- Children's Center at Assembly Row

Cost and program information is available upon hire.

Mass General Brigham and Bright Horizons also offer backup child care programs at Massachusetts General Hospital, Brigham and Women's Hospital, and Assembly Row. These backup care centers offer emergency backup child care for infants and children up to 12 years of age for benefits-eligible employees. Our partnership with Bright Horizons offer many options, including in-home backup child care, discounts and preferred enrollment at certain external child care centers, access to a database of sitters, and backup solutions for when your primary child care arrangements fall through. To help you navigate the childcare benefits available to you through Bright Horizons, you can use Family Concierge. Family Concierge provides one on one unlimited support that helps you find and secure customized childcare solutions, educational support, and much more.

Perks program – discounts and more!

The Perks program offers discounts with a variety of local vendors, ranging from cell phone companies, to movie theaters, local attractions and businesses such as:



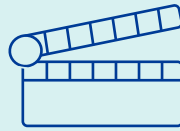
Boat tours



Tickets to Broadway in Boston



Local gyms/studios



Movie tickets



Local museums



AT&T, T-Mobile and Verizon Wireless

