



## APPENDIX

**Below is a list of documents and helpful information included in this section:**

- A. CorePlus Benefits One Pager
- B. Newly Benefit Eligible Enrollment Schedule
- C. Sample Confirmation Letter
- D. Sample Missed Deduction Letter
- E. Sample Ineligible Letter
- F. Sample ULOA Letter
- G. Sample Claim Form



# HCA CorePlus Benefits Program Overview

**CorePlusBenefits** is the voluntary benefits program created for employees of HCA-affiliated facilities. Each month, new employees who become benefit eligible are given an opportunity to enroll in CorePlus Benefits plans.

The four plans that currently make up the CorePlus Benefits offering are designed to give employees choices, options and convenience as they customize their total benefit package. All premiums are set on an after-tax basis, and are paid through convenient payroll deduction. The plans on the HCA CorePlus Benefits Program are:

**Universal Life Insurance with Accelerated Death Benefit Rider for Long-Term Care Benefits From Transamerica.** This universal life insurance plan combines permanent and portable life insurance protection with the potential to grow cash value. This insurance stays with the employee even if they change jobs or terminate employment. The new long-term care benefit is an important new tool to help you plan ahead for the cost of long-term health care in the future. *(This plan is underwritten by Transamerica Occidental Life Insurance Company, Home Office, Cedar Rapids, IA. Permanent coverage requires timely payments of premiums. Fluctuations in interest rate or policy changes may require the payment of additional premiums to keep the policy in force.)*

**Short-Term Disability from Transamerica.** IncomeSelect is a short-term disability insurance policy that helps protect employees from loss of income if they are temporarily disabled because of a non-work related injury. The plan replaces up to 60 percent of an employees income (maximum monthly benefit of \$2,500) if they are out of work due to a covered illness or injury. *(This plan is underwritten by Transamerica Life Insurance Company, Home Office Cedar Rapids, IA)*

**Legal Benefit with Identity Theft Protection from Legal Access Plans, LLC.** This network provides access to free and low-cost legal and financial services. Hundreds of legal services are readily available to you and your extended family-at no cost or significant savings-from participating attorneys across the country. The HCA CorePlus Care for Your Credit Plan offers employees and their families an Identity Theft Prevention Solutions benefit that provides assistance—along with many resources-to protect you against the crime of Identity Theft. Membership in the Family Legal Protection Plan is only \$3.69 per pay period (quoted on a bi-weekly pay period).

**Long-Term Care Insurance from MetLife.** The Long-Term Care Insurance Plan from MetLife is designed to help you protect your assets by providing coverage for the high costs of long-term care. Long-Term Care includes the many services needed when you or a loved one can no longer perform everyday activities –like dressing, eating and bathing–due to an accident, illness or even the natural aging process. You can receive care in a variety of places, including: your home, an assisted living facility, or a nursing home. You and your loved ones can protect yourself today with long-term care protection. To enroll in this plan call toll-free 1-800-438-6388. This number is different than the number you call for the other CorePlus Benefit Plans.

## Key Numbers and Web site Addresses

**Enrollment Line:** 1-800-520-1553

**PolicyHolder Services:** 1-877-650-4251

**Enrollment Information:** [www.coreplusbenefits.com](http://www.coreplusbenefits.com)



**APPENDIX B**

***CorePlus Benefits Newly Benefit Eligible Enrollments  
2005 Schedule***

<b>2005 Newly Benefit Eligible</b>	<b>February</b>	<b>March</b>	<b>April</b>	<b>May</b>	<b>June</b>	<b>July</b>	<b>August</b>	<b>September</b>	<b>October</b>	<b>November</b>	<b>December</b>
<i><b>Cut-off EE Hire Date</b></i>	Prior to 1/1/2005	Prior to 2/1/2005	Prior to 3/1/2005	Prior to 4/1/2005	Prior to 5/1/2005	Prior to 6/1/2005	Prior to 7/1/2005	Prior to 8/1/2005	Prior to 9/1/2005	Prior to 10/1/2005	Prior to 11/1/2005
<i><b>Cut-off Date for entering EE in system</b></i>	1/12/2005	2/9/2005	3/9/2005	4/13/2005	5/11/2005	6/8/2005	7/13/2005	8/10/2005	9/7/2005	10/12/2005	11/9/2005
<i><b>Intro Letter Hits</b></i>	2/2/2005	3/2/2005	3/30/2005	4/27/2005	6/1/2005	6/29/2005	7/27/2005	8/31/2005	9/28/2005	11/2/2005	11/13/2005
<i><b>Enrollment Guide Hits</b></i>	2/7/2005	3/7/2005	4/4/2005	5/2/2005	6/6/2005	7/5//2005	8/1//2005	9/5/2005	10/3/2005	11/7/2005	12/5/2005
<b>Enrollment Begins</b>	2/7/2005	3/7//2005	4/4/2005	5/2/2005	6/6/2005	7/5/2005	8/1/2005	9/5/2005	10/3/2005	11/7/2005	12/5/2005
<i><b>Follow-up Post Card Hits</b></i>	2/14/2005	3/14/2005	4/11/2005	5/9/2005	6/13/2005	7/11/2005	8/1/2005	9/12/2005	10/10/2005	11/14/2005	12/12/2005
<b>Final Letter Hits</b>	2/17/2005	3/17/2005	4/14/2005	5/12/2005	6/16/2005	7/14/2005	8/11/2005	9/15/2005	10/13/2005	11/17/2005	12/15/2005
<b>Enrollment Ends</b>	2/19/2005	3/19/2005	4/16/2005	5/14/2005	6/18/2005	7/16/2005	8/13/2005	9/17/2005	10/15//2005	11/19/2005	12/17/2005
<i><b>Payroll Deduction Begins and Effective Date of Coverage</b></i>	4/1/2005	5/1/2005	6/1/2005	7/1/2005	8/1/2005	9/1/2005	10/1/2005	11/1/2005	12/1/2005	1/1/2006	2/1/2006

## ***CorePlus Benefits Newly Benefit Eligible Enrollments 2006 Schedule***

<b>2006 Newly Benefit Eligible</b>	<b>January</b>	<b>February</b>	<b>March</b>	<b>April</b>	<b>May</b>	<b>June</b>	<b>July</b>	<b>August</b>	<b>September</b>	<b>October</b>	<b>November</b>	<b>December</b>
<b><i>Cut-off EE Hire Date</i></b>	Prior to 12/1/2005	Prior to 1/1/2006	Prior to 2/1/2006	Prior to 3/1/2006	Prior to 4/1/2006	Prior to 5/1/2006	Prior to 6/1/2006	Prior to 7/1/2006	Prior to 8/1/2006	Prior to 9/1/2006	Prior to 10/1/2006	Prior to 11/1/2006
<b><i>Cut-off Date for entering EE in system</i></b>	12/7/2005	1/11/2006	2/8/2006	3/8/2006	4/12/2006	5/10/2006	6/7/2006	7/12/2006	8/9/2006	9/13/2006	10/11/2006	11/8/2006
<b><i>Intro Letter Hits</i></b>	12/28/06	2/1/06	3/1/06	3/29/06	4/26/06	5/31/06	6/28/06	8/2/06	8/30/06	9/27/06	11/1/06	11/29/2006
<b><i>Enrollment Guide Hits</i></b>	1/2/06	2/6/06	3/6/06	4/3/06	5/1/06	6/5/06	7/3/06	8/7/06	9/4/06	10/2/06	11/6/06	12/4/2006
<b><i>Enrollment Begins</i></b>	1/2/06	2/6/06	3/6/06	4/3/06	5/1/06	6/5/06	7/3/06	8/7/06	9/4/06	10/2/06	11/6/06	12/4/2006
<b><i>Follow-up Post Card Hits</i></b>	1/9/06	2/13/06	3/13/06	4/10/06	5/8/06	6/12/06	7/10/06	8/14/06	9/11/06	10/9/06	11/13/06	12/11/2006
<b><i>Final Letter Hits</i></b>	1/12/06	2/16/06	3/16/06	4/13/06	5/11/06	6/15/06	7/13/06	8/17/06	9/14/06	10/12/06	11/16/06	12/14/2006
<b><i>Enrollment Ends</i></b>	1/14/06	2/18/06	3/18/06	4/15/06	5/13/06	6/17/06	7/15/06	8/19/06	9/16/06	10/14/06	11/18/06	12/16/2006
<b><i>Payroll Deduction Begins and Effective Date of Coverage</i></b>	3/1/06	4/1/06	5/1/06	6/1/06	7/1/06	8/1/06	9/1/06	10/1/06	11/1/06	12/1/06	1/1/07	2/1/07

## **Basic Template for CorePlus Mail to be Received During Each Wave:**

Intro Letter	Hits on the Wednesday before open enrollment
Enrollment Guide	Hits on the first day of open enrollment
Postcard	Hits on the second Monday of open enrollment
Final Letter	Hits on the second Thursday of open enrollment

## **Basic Example of New Hire Enrollment Schedule:**

An employee that was hired August 15<sup>th</sup>, would be included in the October Enrollment.

If that employee enrolled, all deductions would begin with their first paycheck in December and the benefits would be effective 12/1/2005.

# HCA COREPLUS BENEFITS

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<InsertDate>

(First Name) (Last Name)  
 (Address)  
 (City, State Zip)

RE: Confirmation of HCA CorePlus New 2005 Benefits Enrollment Selections

Dear (First Name) (Last Name):

Congratulations on your decision to enroll in HCA CorePlus Benefits. Listed below are the new 2005 plans you have selected and your (**pay check cycle**) premium:

	<u>Selected</u>	<u>(Pay Check Cycle)</u>
Universal Life Insurance	N/A	\$ 0.00
Spouse	N/A	\$ 0.00
Children	N/A	\$ 0.00
Grandchild	N/A	
Short Term Disability	<X**>	\$ 0.00
Legal Benefit	N/A	\$ 0.00
Long Term Care*	N/A	N/A
	Total:	\$00.00

Your payroll deduction will begin with your first paycheck in (**month**).

This confirmation of benefits **only reflects those plans in which you enrolled during the recent 2005 Open Enrollment**. Any plans that you enrolled before this Open Enrollment, will not be reflected in this letter. For example: If you previously had a policy with a payroll deduction amount of \$9.88, and recently added new coverage for a payroll deduction of \$4.94, **only the new payroll deduction** amount would be reflected in this letter.

Should you have any questions, please feel free to call the toll-free HCA CorePlus Benefits Customer Service Line at 1-877-650-4251.

Sincerely,

CorePlus Benefits

\* If you requested information about or enrolled in Long Term Care, you will be receiving the information you requested or confirmation of your benefits directly from the insurance company.

<\*\*Your Short-Term Disability effective date will be <insert date>, provided that you are actively at work on that date >



Cut this card out and keep it with you for when you need help with your HCA CorePlus Benefits!



**HCA CorePlus Benefits  
 PolicyHolder Service Line**

**1-877-650-4251**

**\*\*Keep this number handy if you have questions regarding your HCA CorePlus Benefits.**





## Administrative Communications Summary Appendix D, E, & F

*The following Letters are Samples of Administrative Communications from CorePlus Benefits that PolicyHolders may receive in the mail at their home.*

### **APPENDIX D Letter 1: Missed Deduction Letter**

If an employee misses a partial or whole deduction (for any reason other than ULOA or Status Change) they receive a Missed Deduction letter from our Billing and Deductions Department. This letter itemizes all policies and deductions giving the employee an opportunity to send in the missed premium to ensure that their policies do not lapse.

If an employee receives this letter and has a question, please have them call our Billing and Deductions department directly at 1-877-650-4251 (option 1).

### **APPENDIX E Letter 2: Status Change / Ineligible Letter**

If an employee has a status change to CorePlus Benefit ineligible, their deductions are stopped and they will receive this letter as notification.

***Ineligibility is defined as one of the following:***

- Employee Terminates employment
- Employee has a status change to PRN
- Employee has a reduction in hours to a norm below 16 hours weekly or 32 hours bi-weekly.

### **APPENDIX F Letter 3: Unpaid Leave Of Absence Letter**

If we receive notification on our weekly change file from HCA that an employee has an employment status change to ULOA (Unpaid Leave of Absence), we will suspend payroll deductions and send a notification to the employee. This notification is to remind the employee that they are still responsible for submitting premium for their CorePlus Benefits while they are not receiving a paycheck from the facility. This letter details the CorePlus policies that are active and the amount due each month during their leave of absence. The employee can send in one check to CorePlus Benefits to cover all policies and we will submit to the appropriate carriers. Employee's that are on a Paid Leave of Absence will not receive this notification. If an employee is on paid leave and does not have enough income to cover their deductions, they will receive a Missed Deduction Letter (Sample Letter #1).

APPENDIX D: Missed Deduction Letter



HCA CorePlus Benefits
VISION FINANCIAL CORPORATION
Anything's Possible ... with Vision

Month xx, 2003

Name
Street Address 1
Street Address 2
City, State Zip Code

Re: CorePlus Benefit Deduction

Employer Account #:

Dear Name:

Our records show your scheduled deduction for CorePlus Benefits for <Month> was \$<ded\_amount>, but only \$ \_\_\_was deducted. This has resulted in a shortage of \$<amount due>. Below is a detailed listing of your coverages and scheduled deductions for this period only.

To prevent your coverage from lapsing please pay \$\_\_\_\_by \_\_\_\_. Send the payment along with the bottom of this letter in the postage paid envelope provided. If the deductions on your earnings statement(s) for <month> do not agree with our records please call the CorePlus PolicyHolder Service line at 1-877-650-4251 and select option 1. The CorePlus representative will be happy to assist you in reviewing your deductions.

If you believe the missed deductions listed below resulted due to a change in facilities/transfer it is important that you call the CorePlus Benefits PolicyHolder Service Line at 1-877-650-4251 and select option 1.

Thank you for participating in the CorePlus Benefits program.

Sincerely,

CorePlus Customer Service

IMPORTANT! Please detach and return this portion with your payment.
Make check or money order payable to: Vision Financial Corporation-Multi Company
Include your account number and name on the front of your check or money order.

Table with 7 columns: BILLING ID, COVERAGE, COVERAGE PROVIDER, SCHEDULED, RECEIVED, BALANCE DUE. It lists 10 rows of billing data and a total row showing a balance due of \$52.00.

VISION FINANCIAL CORPORATION IS THE THIRD PARTY ADMINISTRATOR FOR COREPLUS BENEFITS

C/O: GRANITE BANK.PO BOX 544.KEENE, NH 03431-0544



**HCA CorePlus Benefits**  
 VISION FINANCIAL CORPORATION  
 Anything's Possible ... with Vision

November 14, 2005

«Gender» «Fname» «Lname»  
 «Street1» «Street2»  
 «City», «state» «Zip»

Re: CorePlus Benefit Deduction

Dear «Fname» «Lname»:

The CorePlus Benefit Program recently received information of your employment status change. This letter is notification that your deductions for CorePlus Benefits will be stopped. All CorePlus Benefits are portable (*except for Short-Term Disability*) and can be converted to a **direct bill and mailed to your home**.

Below is a detailed listing of the coverage(s) that you enrolled in through CorePlus Benefits. You have been paying for these coverage(s) through payroll deduction under “**Core+**” and these deductions will be stopped with your next pay cycle due to your status change. **If you wish to keep the coverage(s) below (except for Short-Term Disability) it is important that you contact the carrier to set-up a direct bill at home.**

**If you feel this letter is in error or if your deductions continue under “Core+”,** please call the CorePlus Policy Holder Helpline at 1-877-650-4251 (Monday-Friday 8am-4:30pm Eastern Standard Time). A CorePlus Benefits Representative will be happy to answer your questions and review our records. Please let us know if we can be of assistance to you. The following options will be available to you when calling the CorePlus Policy Holder Helpline at 1-877-650-4251:

- 1 – Billing and Deductions**
- 2 – Universal Life**
- 3 – Short Term Disability**
- 4 – Legal Coverage**
- 6 –Long Term Care**

Thank you for participating in the CorePlus Benefits program.

Sincerely,

CorePlus Customer Service  
 CorePlus Policy Holder Helpline: 1-877-650-4251

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**HCA CorePlus Benefits Coverage(s) Summary**

<u>BILLING ID</u>	<u>COVERAGE</u>	<u>PROVIDER</u>	<u>SCHEDULED DEDUCTION</u>
«Billing_Id_1»	«coverage_1»	«provider_1»	«scheduled_deduction_1»
«billing_id_2»	«coverage_2»	«provider_2»	«scheduled_deduction_2»
«billing_id_3»	«coverage_3»	«Provider_3»	«scheduled_deduction_3»
«billing_id_4»	«coverage_4»	«Provider_4»	«scheduled_deduction_4»

HCA CorePlus Benefits ▪ One American Center ▪ 3100 West End Avenue, Suite 940 ▪ Nashville, TN 37203 ▪ 1-877-650-4251

Vision Financial Corporation is the Third Party Administrator for HCA CorePlus Benefits



HCA CorePlus Benefits
VISION FINANCIAL CORPORATION
Anything's Possible ... with Vision

<Date>
Name
Street Address 1
Street Address 2
City, State Zip Code

Re: CorePlus Benefit Deduction

Dear Name:

This letter is notification that we recently received information of your employment status change to Unpaid Leave of Absence (LOA). To ensure that your CorePlus Benefits do not lapse it is very important that you continue to pay premiums during this time that deductions cannot be collected through payroll deduction.

Below is a detailed listing of the in force coverage(s) that you have through CorePlus Benefits. You have been paying for these coverage(s) through payroll deduction under "Core+" and these deductions cannot be collected during your Unpaid LOA. It is important that you return the bottom portion of this letter with your payment by <insert deadline for payment to be received>. If you do not pay the amount due by <insert deadline> your CorePlus Benefits will lapse and could terminate due to unpaid premium.

If you feel this letter is in error, please call the CorePlus HelpLine at 1-888-243-8322 (Monday-Friday 8am-4:30pm Central Standard Time), a CorePlus Benefits Representative will be happy to answer your questions and review our records.

Thank you for participating in the CorePlus Benefits program.

Sincerely,

CorePlus Customer Service
CorePlus HelpLine: 1-888-843-8322

HCA CorePlus Benefits Coverage(s) LOA Billing Summary

BILLING ID COVERAGE PROVIDER AMOUNT DUE PAYMENT DUE

HCA CorePlus Benefits
1-888-243-8322

Vision Financial Corporation is the Third Party Administrator for HCA CorePlus Benefits



## **Transamerica Short-Term Disability (STD) Claim Form Instructions**

The following section includes the STD Claim Forms for Transamerica. You may notice that these look different from any that you may have filled-out in the past, that's because Transamerica has revised their claim form to make it easier to read and complete.

The first page is a list of instruction that you may find helpful when completing the form. The second page is the provider list for the employee to complete, and the third page is the actual claim form with a section for HR to fill-out.

You may also download these forms from the CorePlus Benefits HR web Site at [www.coreplusbenefits.com/hr](http://www.coreplusbenefits.com/hr).

From the homepage:

1. Click on Commonly Asked Questions, then
2. On the section for Short-Term Disability.
3. There is a link to download the forms included in the answer to the first question.