

2022 My Choice Rewards Highlights



all for you



GET READY TO ENROLL: NOV. 8 - NOV. 22, 2021

YOUR OPEN ENROLLMENT RESOURCES

This document provides an overview of your benefit choices and what's new for 2022. Comprehensive benefit details appear in the **2022 My Choice Rewards Benefits Guide**, one of the many resources available on <https://mychoicerewards.hfhs.org>. Log in for details about your benefit options and to get help from Alex, an interactive decision-making tool that lets you compare your options and decide what's best for you and your family.

Review your 2021 benefit elections, even if you don't plan to make changes for 2022.

Here's why:

- If you want to participate in the Health Savings Account (HSA) and/or Flexible Spending Accounts (FSAs) in 2022, you must re-enroll.
- If you cover your spouse on a Henry Ford medical plan, you must complete an online Spouse Verification Form every year, or you will be assessed a surcharge.

IMPORTANT:

If you do not enroll by Nov. 22, 2021, your elections for 2021 will carry over into 2022 – with the exception of the HSA and FSAs.

Step 1: Learn What's New

Although the world has changed, our commitment to providing safe, effective and reliable care has never waived. You have continued to show up for our patients and communities, providing compassion, innovation, respect and results in everything that you do. From the bottom of our hearts, we thank you.

*As you care for others, we continue to care for and show up for you. Our **My Choice Rewards Benefit Program** is one of the ways Henry Ford Health System (HFHS) supports you. Where we've made changes, we've done it with you in mind. We know when you are well supported, you do and feel better, and you bring your best to the communities we serve. We are pleased to offer enhancements for 2022 to better meet the unique needs of our diverse HFHS community.*

BETTER PEDIATRIC COVERAGE UNDER THE HFHS ADVANTAGE TIERED ACCESS PLAN

Helping you get the care you need at the lowest price is always our top priority. We're excited to announce that beginning January 1, 2022, **all pediatric medical care will be covered at the Tier 1 coverage level under the HFHS Advantage Tiered Access Plan** for dependents 18 years or younger. This means, even if you receive care at a Tier 2 provider, you will only pay Tier 1 cost sharing.*

Remember, with the CDHP Comprehensive HFHS Preferred Network plan, you have the flexibility to use the broader network of HAP-affiliated providers if you require pediatric care or routine OB/GYN services.

*Pediatric prescriptions filled outside of HFHS pharmacies will be covered at the Tier 2 level.

INTRODUCING OVIA: SUPPORT FOR YOUR FAMILY PLANNING NEEDS

We're proud to partner with Ovia Health to provide personalized maternity and family support for growing families. Wherever you are on your parenthood journey, Ovia Health can help, with access to three apps:

- **Ovia fertility** for health tracking and starting a family
- **Ovia pregnancy** for a happy, healthy pregnancy
- **Ovia parenting** for those early years of parenting

Download the **app** that is right for you and select "I have Ovia Health as a benefit."

OPTION TO SELL BACK COMBINED TIME OFF (CTO)

We believe when you take time off, you return refreshed and more engaged in your work, and we encourage you to take the time you need. However, we want to provide additional flexibility and choice in how you use your time. Therefore, we are offering employees the opportunity to sell back CTO they otherwise may not use. Here's how it works:

- Non-management employees can sell back a minimum of 20 hours and up to a maximum of 80 hours of CTO time accrued in 2022.
- Employees must have a minimum of 80 hours in their current CTO bank as of the pay period ending Saturday, October 23, 2021, in order to sell back any CTO.
- CTO sell back checks will be issued in one payment on the Friday, November 11, 2022, paycheck.

To participate in the CTO Sell Back Program, you must make the election during Open Enrollment, but the payout date will be approximately one year later in 2022. This is an irrevocable election and cannot be modified or canceled after the Open Enrollment window closes.

INCREASED ALLOWANCE FOR FRAMES AND CONTACT LENSES

Starting Jan. 1, 2022, vision coverage will be provided through Henry Ford OptimEyes and HAP's network provider, EyeMed, with an increased allowance of \$130 for frames or contact lenses, plus a discount on your costs over \$130. Remember: all medical plan options include vision coverage, but employees who do not select medical coverage through HFHS can elect the HAP Standalone Vision Plan, which includes the same great allowance and discounts.

VERIFY YOUR DEPENDENTS

HFHS will conduct a dependent eligibility audit in 2022. You will be asked to provide supporting documents for your eligible dependents (e.g., marriage licenses, birth certificates). Use this Open Enrollment as your opportunity to review your current dependents and determine if there is anyone you need to add or remove.

REDUCED URGENT CARE COPAY

We are reducing the HAP urgent care copay from \$50 to \$35. Urgent care can be great for non-life-threatening conditions such as broken bones and sprains, fever, vomiting, flu-like symptoms and more. These symptoms can be evaluated somewhere other than an emergency room, saving you time and money, without compromising the care you receive. Remember: If it is a true emergency, don't wait – get to the ER.

CERTAIN SPECIALTY MEDICATIONS WITH SAVEONSP FREE OF CHARGE

We are implementing a copay assistance program called SaveOnSP to help HAP members with the cost of their speciality medications and adherence to their treatment plans. Under this program, drug manufacturers will cover all or some of the member cost-sharing for certain medications. For specialty medication noted on the SaveOnSP Drug List, you can receive your regular supply free of charge (\$0). Your prescriptions will continue to be filled through your regular specialty pharmacy. For more information call 1-800-683-1074. To view a list of eligible specialty medications click [here](#).

NEW HEARING NETWORK FOR HAP MEMBERS

Beginning January 1, 2022, the HAP Hearing network will be NationsHearing. NationsHearing can help HAP members save thousands of dollars on hearing aids. Plus, they will guide you through getting tested for hearing loss and selecting the hearing aid that works best for you.

UPDATES TO BCBSM PLAN DESIGN

To ensure consistency across all plans, we have made a number of changes to the BCBSM plan design. See below and refer to the MCR Benefits Guide for more detailed information.

- Deductible - \$600/\$1,200 single/family
- Emergency Room Copay - \$200
- Primary Care Office Visit Copay - \$25
- Specialty Care Office Visit Copay - \$40
- Urgent Care Copay - \$40
- Prescriptions Copays for generic/preferred brand/non-preferred brand - \$15/\$35/\$60 (non-System Pharmacy)

NEW INSURANCE CARDS

Due to plan design changes, everyone enrolled in an HFHS medical plan will receive new insurance cards for 2022.

ENHANCED COVERAGE FOR CANADIAN EMPLOYEES

We are making several enhancements to the benefits available to our Canadian colleagues. This includes:

- A new dental plan accepted by most Canadian providers
- Increased vision coverage
- Enhanced paramedical limits
- More dollars toward the medical benefits that are less commonly covered by public health plans but most used by HFHS employees

COVID-19 RESOURCES FOR YOU

As you continue to support our community through the COVID-19 pandemic, remember you have resources to help you get the care you need, when you need it.

With telemedicine and virtual care, you have access to:

- On-demand, cost-effective visits with health care professionals by phone or video conference – 24 hours a day, 7 days a week, from the convenience of your home.
- Affordable, quality care for non-urgent conditions like sinus infections, sore throats and ear infections.

You also have access to free and confidential resources available through Henry Ford ENHANCE to help you balance your competing priorities and deal with challenging situations. ENHANCE can help with:

- Depression/anxiety
- Stress management
- Finding a healthy work/life balance
- Conflict resolution
- Relationship building skills

You may also talk with your leader or take advantage of additional resources we have in place to support you.

You can [learn more here](#).

CONTRIBUTION CHANGES

Payroll contributions are increasing across most plans and coverage levels.

However, there is no change to your dental plan contributions. Remember, you'll pay:

- **Higher payroll contributions in 2022** if you did not complete the wellness requirements by the March 31 and July 31, 2021 deadlines. See [page 11](#) for details.
- **A spouse surcharge of \$46.15** pre-tax per pay period if you cover a spouse who has the option to receive medical coverage through a non-HFHS employer.

Refer to the contribution table below for 2022 rates.

HIGHLY COMPENSATED EMPLOYEES

Highly compensated employees continue to pay more for their medical coverage. A highly compensated employee earns a base annual salary of \$275,000 or more and has a 60% higher contribution than other employees.

2022 EMPLOYEE CONTRIBUTIONS PER PAY - IF YOU COMPLETED WELLNESS REQUIREMENTS IN 2021

STATUS	Medical Plan Coverage Levels	HFHS Advantage Tiered Access Plan	CDHP Basic Full HAP*	CDHP Comprehensive HFHS Preferred Network**	CDHP Comprehensive Full HAP**	BCBSM Community Blue PPO	Manulife (Canadian)
Full Time	Employee	\$64.53	\$30.84	\$41.41	\$91.69	\$343.85	\$11.24
	Employee + Spouse	\$175.74	\$87.88	\$99.83	\$232.93	\$833.18	\$27.23
	Employee + Child(ren)	\$144.50	\$72.25	\$87.55	\$191.52	\$685.06	\$27.23
	Family	\$214.80	\$107.40	\$122.01	\$284.69	\$1,018.33	\$27.23
Part Time	Employee	\$98.49	\$51.39	\$70.99	\$121.27	\$396.75	\$11.24
	Employee + Spouse	\$252.16	\$134.13	\$166.38	\$299.48	\$952.20	\$27.23
	Employee + Child(ren)	\$207.33	\$110.28	\$142.27	\$246.24	\$782.92	\$27.23
	Family	\$308.19	\$163.93	\$203.35	\$366.03	\$1,163.80	\$27.23
Highly Compensated (\$275,000)	Employee	\$103.24	\$49.33	\$66.25	\$146.71	\$529.00	\$11.24
	Employee + Spouse	\$281.20	\$140.60	\$159.72	\$372.69	\$1,190.25	\$27.23
	Employee + Child(ren)	\$231.20	\$115.61	\$140.08	\$306.43	\$978.65	\$27.23
	Family	\$343.68	\$171.85	\$195.22	\$455.51	\$1,454.76	\$27.23
Sponsored Dependent Cost	With Medicare	\$312.80	N/A	N/A	N/A	N/A	N/A
	Without Medicare	\$391.00	\$132.36	\$235.00	\$447.62	\$463.36	N/A

Note: Vision is included in the contributions above.

* Plan has deductibles of \$4,500 / \$9,000 that must be paid by you before benefits are paid by the plan (including prescription drugs).

** Plans have deductibles of \$1,400 / \$2,800 that must be paid by you before benefits are paid by the plan (including prescription drugs).



Step 2: Explore Your Benefits

Here's an overview of the benefit programs and choices available to you during open enrollment.

BENEFIT		ABOUT YOUR OPTIONS	
HEALTH CARE	Medical, including Vision	Coverage options for a broad range of medical services and prescription drugs, including: <ul style="list-style-type: none"> • The HFHS Advantage Tiered Access Plan – an EPA plan • Three Consumer Driven Health Plan (CDHP) options, with a Health Savings Account (HSA) • Blue Cross Blue Shield of Michigan (BCBSM) Community Blue PPO • Manulife for Canadian employees 	
	Dental	Coverage options for a broad range of dental services and procedures, including preventive care: <ul style="list-style-type: none"> • Delta Basic • Delta Comprehensive, with higher coverage for basic services and orthodontic coverage • Manulife for Canadian employees 	
	Standalone Vision	Vision coverage for an annual eye exam and eyewear, such as glasses or contact lenses, for employees who opt out of HFHS medical coverage.	
TAX-SAVING ACCOUNTS	Health Savings Account (HSA)	When you choose a CDHP medical plan, the HSA provides you a triple-tax advantage: <ul style="list-style-type: none"> • Contributions are tax free • Investment/interest earnings grow tax free • Paying for eligible expenses is tax free 	
	Health Care Flexible Spending Account (FSA)	Allows you to reimburse yourself for eligible health care expenses with pre-tax dollars. You cannot participate in both the HSA and health care FSA.	
	Dependent Care Flexible Spending Account	Allows you to reimburse yourself and save money by using pre-tax dollars to pay for eligible child or elder-care expenses if your spouse also works or goes to school full-time.	
LIFE & DISABILITY	Life	Choose from: <ul style="list-style-type: none"> • Employee term life insurance • Dependent term life insurance • Accidental death and dismemberment (AD&D) 	
	Disability	Long-term disability (LTD)	
VOLUNTARY BENEFITS		Choose from the following during open enrollment: <ul style="list-style-type: none"> • Supplemental coverage that works with your medical plan to reduce your out-of-pocket costs for certain medical needs, including critical illness insurance, accident insurance and hospital indemnity insurance • Group legal insurance • Identity theft insurance 	Choose from the following any time during the year: <ul style="list-style-type: none"> • Auto/home insurance • Pet insurance • Purchasing Power

The benefits offered under My Choice Rewards are designed to conform to Section 125 of the Internal Revenue Code, and as such may provide significant tax advantages to you as well as Henry Ford Health System. To maintain its tax-qualified status, HFHS must adhere to the regulations established by the IRS. These requirements will be summarized in the appropriate sections of this guide. This guide is intended to summarize the key features of each benefit offered under My Choice Rewards. You are encouraged to consult with your financial planner or tax advisor before making your benefit selections. HFHS reserves the right to modify or discontinue any of its benefits at any time.

MEDICAL PLAN OPTIONS SNAPSHOT

The chart below provides a snapshot of how coverage compares under each medical plan.

	HFHS ADVANTAGE TIERED ACCESS PLAN		CDHP BASIC FULL HAP	CDHP COMPREHENSIVE HFHS PREFERRED NETWORK	CDHP COMPREHENSIVE FULL HAP	BCBSM COMMUNITY BLUE PPO
	TIER 1	TIER 2				
Deductible (Employee Only / Family)	\$250 / \$500	\$1,250 / \$2,500	\$4,500 / \$9,000	\$1,400 / \$2,800*		\$600 / \$1,200**
Coinsurance	None	30%	20%	None		20%
Out-of-pocket maximum (Employee Only / Family)	\$6,850 / \$13,700		\$6,000 / \$12,000 Not to exceed \$6,000 for any one person	\$6,550 / \$13,100 Not to exceed \$6,550 for any one person		\$6,850 / \$13,700
HSA money from HFHS (Employee Only / Family)	N/A		\$250 / \$500 base HFHS funding, plus \$250 / \$500 for completing wellness requirements			N/A
Primary care / specialist	\$20 / \$40 copay	\$40 / \$80 copay	\$20 copay*** / \$40 copay***			\$25 / \$40
Urgent care	\$35 copay		\$35 copay***			\$40 copay
Emergency room****	\$200 copay		\$150 copay***			\$200 copay

* These deductible amounts reflect the IRS requirements for 2022

** Facility services waived if service is performed in physician's office and for covered inpatient and outpatient facility services provided at HFHS facilities

*** After deductible

**** Waived if admitted

NOTE: Canadian employees will continue to have access to the Manulife plan, including enhanced medical, dental and vision coverage.

Family amounts in the table above apply for all coverage levels except Employee Only.

HERE'S A SNAPSHOT OF HOW EACH MEDICAL PLAN OPTION WORKS.

HFHS ADVANTAGE TIERED ACCESS PLAN (EPA)	THREE CDHP OPTIONS	BCBSM COMMUNITY BLUE PPO
HOW IT WORKS	HOW THEY WORK	HOW IT WORKS
<p>This HAP EPA plan provides you access to two network tiers:</p> <ul style="list-style-type: none"> • Tier 1 has a specific network of HFHS and other providers with lower deductibles and copays. Employees may choose from Henry Ford-affiliated physicians who participate in the Henry Ford Physician Network (HFPN), the Jackson Health Network and Genesys. The HFPN includes Henry Ford Medical Group, hospital-employed physicians and some private practice physicians on staff at Henry Ford facilities. • Tier 2 has a broader network of HAP providers and facilities, but also comes with a higher deductible and copays. • Some services, may not be available in Tier 1. These services are available in Tier 2 at higher copays, deductibles and coinsurance. • All pediatric medical care will be covered at Tier 1 level (for dependent children 18 years old and younger). Pediatric prescriptions filled outside of HFHS pharmacies will be covered at the Tier 2 level. 	<p>HFHS offers three Consumer Driven Health Plans (CDHPs):</p> <ul style="list-style-type: none"> • CDHP Basic Full HAP – Catastrophic coverage for worst-case scenarios, like serious accidents/illness, with a high deductible and access to the broader network of HAP-affiliated providers. • CDHP Comprehensive Full HAP – Coverage for everyday needs, with a lower deductible than the CDHP Basic plan and access to the broader network of HAP-affiliated providers. You will pay more in payroll contributions compared to the other two CDHPs and the HFHS Advantage Tiered Access Plan. • CDHP Comprehensive HFHS Preferred Network – Coverage for everyday needs, with the same deductible as the CDHP Comprehensive Full HAP plan – but you must use HFHS Preferred Network providers. You will pay less in payroll contributions for this plan option. 	<p>The PPO plan provides you the broadest network of providers. It also costs you the most per pay period.</p>



HERE'S A SNAPSHOT OF WHAT TO CONSIDER WHEN DETERMINING WHICH OPTION IS BEST FOR YOU.

HFHS ADVANTAGE TIERED ACCESS PLAN (EPA)	THREE CDHP OPTIONS	BCBSM COMMUNITY BLUE PPO
<ul style="list-style-type: none"> • With Tier 1 providers and facilities, you'll enjoy lower costs when you go to the doctor. • In Tier 1, you will get high-quality, coordinated care through Henry Ford providers and facilities. Refer to the 2022 My Choice Rewards Benefits Guide for details. • Tier 2 still provides market-competitive coverage, and allows you the flexibility to go to some providers outside of Henry Ford. • If you use both tiers, you are required to meet the deductible maximums of both. • If you plan to use only Henry Ford providers and facilities, this plan has the lowest deductibles. • Some services, may not be available through Tier 1. If you need those services, you will need to use Tier 2 providers and pay higher deductibles and copays. • If you think you'll use several non-Henry Ford providers, you may want to consider the CDHP plan options. • You can pay for eligible health care expenses using the health care FSA, but the "use it or lose it" rule applies. • You cannot enroll in the HSA. • Employees and their family members enrolled in the HFHS Advantage Tiered Access option who have a cancer diagnosis within the past three years are eligible for integrative medicine benefits (Tier 1 only). • For family coverage, all family members work together to meet the family deductible amount. However, the most any one person in the family will pay before the benefits are triggered for that individual is \$250 (the individual deductible limit). Once the remaining family members collectively meet the additional \$250 deductible, benefits are triggered for all covered family members. 	<ul style="list-style-type: none"> • Pay as you go. Generally, you'll have lower paycheck contributions and pay only for the health care services you use. • Preventive care is covered at 100% and the deductible does not apply. • You'll have a higher deductible and higher cost when you receive care, including prescription drugs, until your deductible is met. Prescription drugs count toward the deductible. Once you reach the out-of-pocket maximum, other services during the year are covered in full. • You can save tax free with an HSA. Pay for eligible health care expenses and watch your account grow – through contributions from you and/or HFHS, interest and investment returns – tax free. Plus, the HSA is yours to keep and your funds roll over each year, including into retirement. • If you and your spouse complete the Thrive Rewards requirements, HFHS will deposit up to \$500 (employee only) and up to \$1,000 (all other coverage levels) in your HSA. See page 11 to learn more. • You will need to select a HFHS primary care physician under the CDHP Comprehensive HFHS Preferred Network plan. • Under the CDHP Comprehensive HFHS Preferred Network plan, you can have the flexibility to use the broader network of HAP-affiliated providers if you require pediatric care or routine OB/GYN services. • Employees and their family members enrolled in the CDHP Comprehensive HFHS Preferred Network option who have a cancer diagnosis within the past three years are eligible for integrative medicine benefits. <p>For family coverage in the CDHP Plans, all family members work together to meet the deductible. Here's how it works for the specific plans:</p> <ul style="list-style-type: none"> • CDHP Comprehensive HFHS Preferred Network and Full HAP Plans: When one individual or all family members collectively meet the \$2,800 deductible, benefits are triggered for all covered family members. • CDHP Basic Full HAP Plan: The most any one person in the family will pay toward the deductible is \$6,000 (due to the individual out-of-pocket limit). Once a family member meets this amount, benefits are triggered for that family member. Once the family collectively meets the \$9,000 deductible, benefits are triggered for all covered family members. 	<ul style="list-style-type: none"> • You'll pay up front (with larger payroll contributions), but you'll pay less when you receive care. • You can pay for eligible health care expenses using the health care FSA, but the "use it or lose it" rule applies. • You cannot enroll in the HSA.



The HFHS Advantage Tiered Access Plan Provides You Access To Two Network Tiers

TIER 1*

Tier 1 has a network of HFHS and other providers and offers lower deductibles and copays. Choose from Henry Ford-affiliated physicians that participate in:

- The Henry Ford Physician Network (HFPN), including Henry Ford Medical Group, hospital-employed physicians and some private practice physicians on staff at Henry Ford facilities
- The Jackson Health Network
- Genesys

These are known as Henry Ford-affiliated providers and facilities.



Lower deductibles and copays



Henry Ford-affiliated providers and facilities

TIER 2

Tier 2 has a broader network of HAP providers and facilities, but also comes with significantly higher deductibles and copays.



Higher deductibles and copays



Broader network of HAP providers and facilities

* Not all services are available in Tier 1. These services would need to be provided under Tier 2 at the Tier 2 cost share.

HOW YOUR HSA WORKS
(AVAILABLE WHEN YOU SELECT A CDHP)

**YOUR ANNUAL
HSA CONTRIBUTIONS**
(Single/Family)



Your contributions



HFHS Wellness Incentive \$250 / \$500



HFHS Contribution \$250 / \$500

Your ANNUAL
CONTRIBUTIONS
are **TAX FREE:**

*Sample Employee
Contribution =
\$2,000 annually*

*Tax Rate of 20%
(20% x \$2,000 = \$400)*

Tax Savings = \$400 annually

MINUS

**YOUR QUALIFIED
MEDICAL
EXPENSES**



HEALTH CARE EXPENSES

(Medical, Pharmacy, Dental, Vision, etc.)



Any **WITHDRAWALS**
you make to pay for
medical expenses
are **TAX FREE.**

EQUALS

**YOUR BALANCE
ROLLS OVER YEAR
AFTER YEAR**



Your HSA account balance
at year end

You can invest part of
your balance, and the
interest/earnings grow
TAX FREE

THRIVE REWARDS OVERVIEW

You and your spouse have access to Thrive Rewards, the wellness program for HFHS employees enrolled in a HAP health plan. This includes all medical plan options provided by HFHS, except the BCBSM Community Blue PPO and Manulife for Canadian employees.

By meeting the wellness requirements, you will pay a lower employee contribution for your medical coverage and/or receive money in your HSA from HFHS (for those enrolled in a CDHP medical plan).

If you and your spouse met the Thrive Rewards requirements by the March 31 and July 31, 2021 deadline dates for 2022 you will receive:

- **An HSA contribution amount from HFHS of \$250 for employee coverage or \$500 for all other coverage levels**, if you are enrolled in a CDHP. This is in addition to the base funding amount from HFHS of \$250 and \$500, respectively, that most CDHP enrollees receive, for the total of \$500 for employee coverage and \$1,000 for all other coverage levels.
- **A savings of \$130 in your payroll contributions annually** for employee coverage (\$5 per pay) **or \$260** for all other coverage levels (\$10 per pay) if you are enrolled in a CDHP.
- **A savings of \$390 in your payroll contributions annually** for employee coverage (\$15 per pay) **or \$780** for all other coverage levels (\$30 per pay) if you are enrolled in the HFHS Advantage Tiered Access Plan.

GUIDELINES FOR HSAs AND FSAs

In 2021, several emergency relief bills and new regulatory guidelines were issued that impacted how HSAs and FSAs can be used:

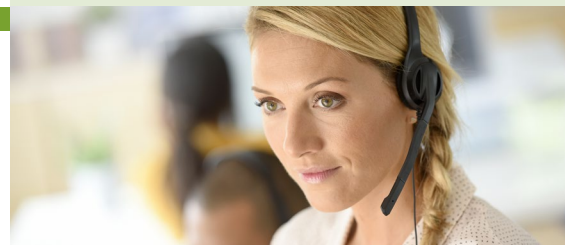
- **Expanded list of qualified medical expenses:** You can now use your HSA and/or FSA to purchase feminine care products, allowing you to save money on taxes for these routine care items.
- **Reimbursement for over-the-counter medications:** You no longer need a doctor's prescription to use HSA and FSA dollars to pay for these everyday expenses. For a list of qualified medical expenses, click [here](#).

In 2022, you can contribute up to \$2,750 in your health care FSA, and up to \$3,650 in your HSA for employee-only coverage or \$7,300 for family coverage. Remember, you cannot participate in both an HSA and a health care FSA. Also, if you contributed to an HSA or an FSA in 2021 and want to continue to do so for 2022, you'll need to re-enroll.



Keep in mind that payroll contributions have increased for 2022. If you completed the Thrive Rewards requirements, you will save the amounts shown to the left.* The amount of wellness incentives is subject to change each year.

* The contribution rates on [page 4](#) include these savings. If you did not meet the 2021 wellness requirements, please refer to the 2022 My Choice Rewards Guide for your 2022 rates.



Not sure if you met the Thrive Rewards requirements in 2021?
Don't worry. Call a HAP Customer Service specialist weekdays between 8 a.m. and 7 p.m., at 800-422-4641.

HFHS is offering webinars to educate employees on the CDHP and Tiered Access medical plans, HSA and FSAs. Make sure to register if you'd like to attend one of the following sessions:

Wednesday, Nov. 3 at 2 p.m. – HFHS: Spending Account or Savings Account – Which is Best for You. Click [here](#) to register.

Monday, Nov. 15 at 10 a.m. – HFHS: Tiered Access and CDHP Plans Education. Click [here](#) to register.

Step 3: Enroll for 2022

Go to Employee Self Service starting Nov. 8, 2021. You can get to Employee Self Service at work, at home or on the go.

START WITH THESE LOG-IN INSTRUCTIONS TO COMPLETE YOUR 2022 ENROLLMENT NOV. 8-22, 2021

- From a Henry Ford device inside the “firewall” – from your desktop computer, for example – go to OneHENRY and click on HR Self Service at the top of the page.
- From any device not on the Henry Ford network, including your mobile phone or home computer, go to HenryFord.com/connect and click on “Log in to Employee Self Service.”
- To log on, enter your corporate ID and password. This is the same as your Employee Self Service login information. If you don't remember your password, click “Forgot Your Password.”

REVIEW YOUR ELECTIONS

- Review your 2021 benefit elections, even if you don't plan to make changes.
- Re-enroll in the HSA and/or FSAs to participate in these savings accounts in 2022. Note: you cannot participate in both the HSA and health care FSA.
- If you cover a spouse on your medical plan, you must complete the online spouse surcharge form.

MAKE YOUR BENEFIT ELECTIONS FOR 2022

- Click on “Benefit Enrollment” on the right side of the page under “Hot Spots” and make your elections for each benefit.
- Update your dependent information. If you add new dependents, upload birth certificates and/or marriage certificates while online.
- After completing your benefit elections, if you are satisfied with your choices, click “Submit.”

CONFIRM YOUR ELECTION WAS RECEIVED

- Record your confirmation number, which verifies you have completed your enrollment and that your benefit elections have been recorded and submitted.
- Review the confirmation statement you receive by email for accuracy and keep it as proof of your enrollment for 2022. Confirmation statements will not be mailed home.
- Update your elections as many times as you want through Nov. 22, 2021. Your last confirmation number and statement during the open enrollment period will apply.
- Go to Employee Self Service/Benefits Home to view and/or print a final confirmation statement beginning the week of Dec. 13, 2021.

A REMINDER ABOUT TWO-STEP VERIFICATION WITH DUO

If you didn't set up two-step verification through Duo Security, you'll have to download the app from the app store to use any HFHS application, including Employee Self Service. Search for Duo Security and install it like any other app. Two-step verification allows HFHS to enhance the security of individuals' accounts by using a secondary device to verify your identity. For questions, call the IT Help desk at 248-853-4900.



Questions or Help

For help enrolling or any questions about your benefits choices after reviewing this document and your 2022 My Choice Rewards Benefits Guide, send an email to openenrollment@hfhs.org or contact Employee Services at **855-874-7100** (available 7:30 a.m. to 4:30 p.m. Monday through Friday).

REMEMBER: You have access to Alex. Alex is an interactive decision-making tool to help you compare benefit options and decide what's best for you and your family. Although Alex will provide recommendations, you will make the decisions about what's best for your situation. Access Alex at HenryFord.com/connect and click on Employee Self Service.



If you do not enroll by Nov. 22, 2021, your elections for 2021 will carry over for 2022, with the exception of the HSA or FSAs.



Every effort has been made to ensure the accuracy and completeness of the benefit descriptions contained within this document. However, in the event of any interpretation, discrepancy, application and/or decision in specific circumstances, the official text or terms of the plan document will govern. This document is not intended to create or to be construed as a contract between Henry Ford Health System (HFHS) and its employees for any matter, including for the provision of benefits described.