

Physician Benefit Summary 2007

*This packet briefly describes insurance plans & other benefits offered by the Medical Group.
Details of specific benefits are available in summary plan descriptions, which always govern.
These plans are subject to change without notice.*

Health Insurance Benefits

To be eligible for health insurance benefits, you must be a full-time/regular Physician (scheduled to work at least 30 hours per week).

As a new hire, insurance benefits are effective on your first day of employment. If your hours are reduced below 30 for any reason, you will be offered COBRA.

Ceridian Self Service

DuPage Medical Group has a self-service tool – **Ceridian Self Service** for employees that provides you with on-line access to valuable confidential human resources and payroll information.

How do I log into Ceridian Self Service?

1. You can access Ceridian Self-Service at:
<https://sourceselfservice2.ceridian.com/dupagemd>
2. You will be prompted to enter your User Name and Password on the login page.
User Name: Will always be the last 5 digits from your ID Number. On your paycheck stub, there is a 10 digit ID number located in the top middle portion of your paycheck. This will never change and will be the same number you will use going forward.
3. **First Login Password:** The last four digits of your social security number
4. **Change Your Password:** Once you have successfully logged into HR Ceridian Self-Service for the first time, you will be required to change your password. Your password must be a minimum of 6 characters and no greater than 20 characters. It must be a combination of numeric and alpha characters, no spaces or apostrophes are allowed e.g. **“martha01”** The system will request that you create a “password reminder”. If it was **marth01**, you could use **“my spouse”** as your reminder.

What do I do after I log in?

After you log in, you will see the Ceridian Self Service Home page with different areas that you can visit.

Medical Insurance:

Humana PPO, Humana High Deductible Health Plan (HDHP) or the Humana HMO Select .

The following summarizes plan coverage:

	PPO	HDHP Plan
Types of treatment	In-Network	In-Network
Deductible	\$500 (individual) \$1,000 (family) Routine to age (18) 100%-no deductible	\$3,000 Aggregate EE Coverage \$6,000 Aggregate for all covered persons in a family
Emergency Room Care	100% after \$75 facility per visit co-pay	N/A
Urgent Care	\$35 facility per visit co-pay 90% after deductible for any additional charges	N/A
Out-of-Pocket Maximum	\$2,000 single \$4,000 family	\$5,000 Aggregate EE Coverage \$10,000 Aggregate All Other Coverage's
Coinsurance	90%/10% - life time max \$5,000,000	90%/10%

	PPO	HSA Plan
Types of treatment	Out-of-Network	Out-of-Network
Deductible	\$500 (individual) \$1,000 (family) Routine to age (18) 70%-after deductible	\$6,000 Aggregate EE Coverage \$12,000 Aggregate for all covered persons in a family
Emergency Room Care	100% after \$75 per visit co-pay	N/A
Urgent Care	70% after deductible for any additional charges	N/A
Out-of-Pocket Maximum	\$4,000 single \$8,000 family	\$10,000 Aggregate EE Coverage \$20,000 Aggregate All Other Coverage's
Coinsurance	70%/30%	60%/40%

HDHP~DMG Contribution

DMG will credit to an HSA account for those participant enrolled in the HDHP Plan in 2007 for single coverage, **\$62.50 a month and \$125.00 monthly for all other coverages** (this premium will be determined on an annual basis). The maximum annual HSA contribution for single coverage is \$2,850.00 and \$5,650.00 for remaining tiers which includes the employer contribution. For those participants who are age 50+ an additional \$800.00 catch up contribution can be made for 20

Humana HMO SECECT:

Humana HMO Select	
Types of treatment	
Deductible	N/A
Doctor Visit	\$25 per visit
Hospital Care	\$250 per inpatient stay
Emergency Room Care	\$100 per visit
Urgent Care	\$50 per visit
Lifetime Maximum	N/A
Out-of-Pocket Maximum	\$1,500/\$3,000

Prescription Drug Program:

When you **enroll in any of the medical plans**, you are automatically covered under the Prescription Drug Program with Humana. When you have your prescriptions filled at a network pharmacy, there are no claim forms to complete. The pharmacy files the claims for you.

Pharmacy:	Humana PPO/HMO	HSA Plan
Co pays Tier 1, 2, 3	\$10/\$30/\$50	\$10/\$30/\$50
Tier 4	25%	

What drugs are covered under this program?

Under the HMO Select plan you must use participating Humana pharmacies only which are CVS Pharmacies formerly known as Osco. The PPO Plan has no requirements for pharmacies.

Each Tier is assigned a co-payment, which is determined by the consumer's prescription drug benefit plan.

Level 1: Low cost generic & Brand. Patients need to discuss this option with their Physician. Generic drugs are also included in this classification.

Level 2: High cost generic & brand. Patients need to discuss this option with their Physician. This is the Preferred Option.

Level 3: Higher cost brand. This is the Non-Preferred option.

Level 4: High level/experimental -25% of retail.

Drug list by tier is on-line at www.humana.com & mail order Drugs ar 90 day supply for 2x applicable co-payment.

Medical Premiums

The monthly payroll deduction is the amount that will be deducted pre-tax from your gross compensation. The remaining premium is the additional amount that is added to your paid compensation to determine the total salary paid for compensation purposes.

Type of coverage	Humana HMO Select			Humana PPO			HSA		
	Monthly Payroll	Remaining Premium	Total Premium	Monthly Payroll	Remaining Premium	Total Premium	Monthly Payroll	Remaining Premium	Total Premium
Employee Only	\$ 93.76	\$341.79	\$435.55	\$200.90	\$226.02	\$426.92	\$74.66	\$226.03	\$300.69
Employee + Child(ren)	\$ 162.66	\$652.19	\$814.85	\$234.98	\$563.72	\$798.70	\$ 0.00	\$562.55	\$562.55
Employee + Spouse	\$345.60	\$548.65	\$894.25	\$400.36	\$476.17	\$876.53	\$161.98	\$455.39	\$617.37
Employee + Family	\$440.88	\$987.62	\$1428.50	\$487.60	\$912.30	\$1399.90	\$ 73.68	\$912.30	\$985.98

The maximum annual HSA contribution for single coverage is \$2,850.00 and all others \$5,650.00. For those enrollees who are 50+ an additional \$800.00 catch-up can be elected for 2007.

Dental Insurance Benefits

The Medical Group offers the Humana Dental Care (DHMO) plan. This plan allows you to select a primary care dentist to coordinate your dental care needs. When you have your care performed by a network dentist, you receive substantially higher benefits. If you do not wish to use the DHMO network, you have the option of electing the PPO side of the plan and may select the dentist of your choice.

What are the differences between these coverage's?

	Humana Dental Care (DHMO)	PPO
Deductible Per person Per family	\$0 \$0	\$100/year (individual) \$300/year (family)
Coinsurance Preventive Basic Major	100% Based on fee schedule Based on fee schedule	80% 50% 50%
Orthodontia	\$1,500 for dependents (full time students) up to age 25	50%; \$1,500 lifetime maximum per person
Annual Maximum	None	\$1500/year (per person)
Office Visit Co-Pay	\$6.00	None

Dental Premiums

Type of coverage	Humana Dental Care (DHMO)			PPO		
	Monthly Payroll	Remaining Premium	Total Premium	Monthly Payroll	Remaining Premium	Total Premium
Employee Only	\$ 10.94	\$3.63	\$14.57	\$26.00	\$8.65	\$34.65
Employee + Child(ren)	\$ 19.82	\$6.59	\$26.41	\$60.28	\$20.11	\$80.39
Employee + Spouse	\$ 18.78	\$6.25	\$25.03	\$51.40	\$17.13	\$68.53
Employee + Family	\$29.78	\$9.92	\$39.70	\$75.00	\$24.98	\$99.98

Income Protection

Life Insurance

The Medical Group offers life insurance to all full-time/regular physicians. You will automatically receive 1x annual base pay for life insurance (up to a maximum of \$500,000).

You may purchase additional life insurance for yourself up to four (4) times your benefit pay (this includes your base pay) in increments of 25k. Employees can enroll and receive plan information from Fidelity by going to www.401k.com which can also be accessed through the DMG intranet up to a maximum of \$1,000,000.

During your initial enrollment you can elect up to an additional three times benefit pay in increments of 25k without furnishing evidence of insurability (EOI) as long as your total coverage (including basic coverage) does not exceed 300k. If you want to change your coverage at a future open-enrollment, you will only be allowed to increase your election in increments of 25k additional coverage without providing evidence of insurability. If you do not enroll in additional employee life during your initial enrollment, evidence of insurability will be required for all additional employee life options.

Spouse and Child Life Insurance

New physicians can elect up to 25k of Spouse life and 10k of Child life without EOI if you elect additional employee life. Evidence of Insurability is required if this is **not** your first time electing Spouse/Child life or if your Spouse coverage is over 25k. Additional employee life is still required to apply for Spouse/Child coverage. Spouse and Child life cannot exceed 50% of the total employee life amount.

Optional AD&D Insurance

You may purchase AD&D (Accidental Death and Dismemberment) Insurance to provide payment amounts if you, a spouse or a dependent dies or suffers certain losses as the result of an accident.

Disability Coverage

Short Term Disability

Full-time physicians may purchase a Short-Term Disability (STD) policy. STD provides a benefit equal to 60% of your weekly income up to a maximum of \$1,000 per week if you are unable to work due to a disabling sickness or injury. There is a 30 day elimination period. Physicians pay the full cost for coverage with after-tax dollars. Any STD benefits received from the plan will not be taxed since you are paying the premium.

At your initial enrollment time, there is no pre-existing condition exclusion for Short Term Disability. If you want to enroll during open enrollment, you will be required to complete an EOI to be approved.

There is no pre-existing condition exclusion for STD. You may come back to work part-time while on STD and still receive pro-rated STD pay. Benefits are payable for up to a maximum of nine weeks, which coordinates with the company-paid Long-Term Disability plan.

Long Term Disability

The Medical Group will provide a basic Long-Term Disability (LTD) policy for all full-time physicians. The basic benefit is 60% of your benefit pay up to a maximum of \$10,000 per month. There is a 90-day elimination waiting period before disability benefits are payable. There is also a specialty definition for own occupation to age 65.

Business Travel Accident Insurance

The Medical Group provides Business Travel Accident Insurance, which covers death or other loss while on a business trip or driving from one facility to another. The benefit pays a maximum of \$250,000, with a seat belt maximum of \$25,000.

Reimbursement Accounts

Health Care Reimbursement Account

The Health Care Reimbursement Account is a way for you to pay for unreimbursed medical & dental expenses (e.g. deductibles, co-pays, and vision care) with pre-tax dollars. You must re-enroll every year and designate your contribution during the annual enrollment period. **Once you are enrolled in this plan you may not change your contribution during the year.** You must specify a dollar amount to be deducted before taxes from your gross pay. Your minimum contribution to the account may be as low as \$120; your maximum contribution may be as great as \$3,000. When you incur out-of-pocket health or dental expenses, you may submit a claim form to reimburse yourself for these expenses with the pre-tax dollars you set aside. You must plan carefully; any money remaining in this account at the end of the year will be forfeited if the expense has not been incurred for that year.

Time-Off Benefit

Please refer to your employment contract for these benefits.

Investments

Profit Sharing/401(k) Plan

Physicians can contribute up to a maximum of \$15,500 for 2007. The company will match 50% of your first 6% of contributions. For Participants who are age 50+ can elect to contribute an additional \$5,000.00 for the 2007 catch-up contribution. Physicians can enroll and receive plan information from Fidelity by going to www.401k.com which can also be accessed through the DMG intranet.

Physicians are eligible to participate in the 401(k) employee deferral program on January 1, April 1, July 1 or October 1. Matching employer contributions will apply after the following criteria have been met:

- 1) Been employed at the clinic for one anniversary year
- 2) Worked at least 1,000 hours in that year

The enrollment materials will be mailed to you directly from Fidelity which will be within your first 30 days of employment.

After you satisfy the Plan's eligibility requirements, the Employer may make annual discretionary profit sharing contributions in an amount to be determined at Plan Year-end by the Board of Directors. You must 21 years old, earn at least 1,000 hours of service and be employed as of the last day of the Plan year.

Miscellaneous

Credit Union

Employees and their families are eligible to join the HealthCare Associates Credit Union. Some of the benefits the credit union offers are: free checking, no annual fee VISA cards, free ATM cards, new and used car loans, mortgage loans and home equity loans. For more information call HACU at (630) 505-9390 or 1-800-942-0158.

Child Care

All DuPage Medical Group employees are eligible for childcare discounts of 10% at any Children's World Learning Centers and Childtime Children's Centers. You will need to provide proof of employment (i.e. ID badge, pay stub, etc.) when you enroll your child to receive the discount.

Employee Activities Committee (EAC)

The EAC maintains communication between departments and plan activities, which bring the employees & physicians together. The EAC sponsors the Star Performer Award, the Great America Weekend and also a Kane County

Cougar game. They also sponsor other events such as Lee Denim Day, and the Heart Walk. If you have any questions about the committee and/or activity suggestion please feel free to contact any of the committee members. Committee names and numbers are listed on the EAC bulletin board in all of the facilities.

Questions about your benefit summary should be directed to the Benefits Department.