



For the moments that matter most



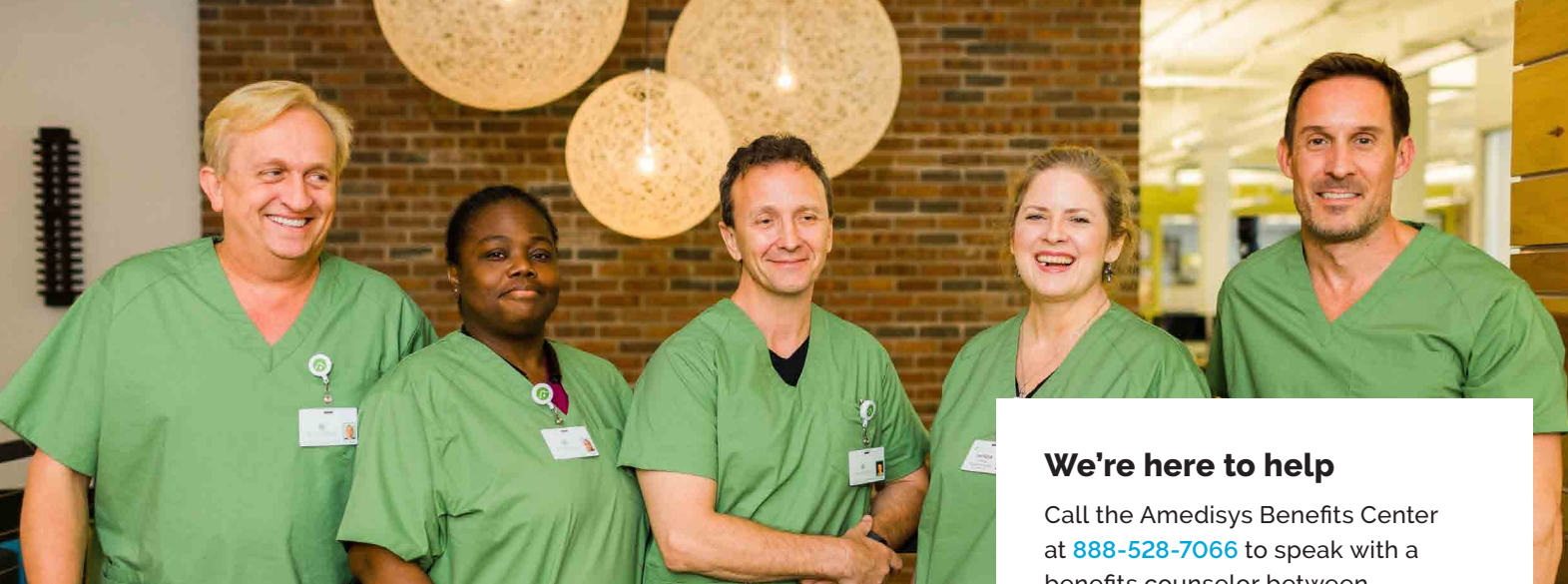
**Physical health
and wellbeing**



**Financial
security**



**Work/life
balance**



We're here to help

Call the Amedisys Benefits Center at [888-528-7066](tel:888-528-7066) to speak with a benefits counselor between 7 a.m. – 7 p.m. CST, Monday – Friday.

Welcome home!

As a caregiver, you understand better than anyone that our work isn't just a job; it's a higher calling. We're honored to have you join our team of 20,000+ caregivers across the country. Amedisys was built on the idea and promise of caring for others and that begins with how we care for you—our team members.

We know benefits are important, so we provide programs that support your wellbeing and honor the moments that matter most. That's why our benefits include:

- FREE preventive care, screenings and maintenance medications to keep you healthy,
- FREE 24/7 care team support from Included Health to connect you with the best care available,
- FREE one-on-one health coaching for weight loss, mental health and financial wellness,
- Two weeks of paid leave for parent-child bonding,
- Two weeks of paid leave for family caregiving needs,
- And so much more...

We also provide all team members with 24/7 access to LifeWorks counselors for just about anything, including five free counseling sessions for any topic every year.

We're glad you joined our mission to enable our patients to maintain a sense of independence, quality of life, and dignity every day. We look forward to supporting you and growing together.

Welcome home!

Your benefits at Amedisys

Choose your benefits



Medical Plans



Flexible Spending
Accounts



Dental



Vision



Additional Life
Insurance



Disability Insurance



Accident Insurance



Critical Illness
Insurance

Available if you enroll in medical



Personal 24/7
Care Team



Wellness Rewards



Health Savings
Accounts



Telehealth

Available to you anytime



Employee Assistance
Program



Employee Stock
Purchase Plan



Perks at Work
Discounts



Leave of Absence



401(k) Retirement
Savings



Paid Time Off



Tuition
Reimbursement



Basic Life Insurance

Enrollment and eligibility

Don't miss your opportunity to make sure you have the benefits you need for this year.



Here are the basics:

Benefits Effective Date
1st of the month after hire date

Enrollment Deadline:
20th of the month after hire date

You may enroll in Amedisys benefits:

- When you join us as a new hire;
- When you become benefits-eligible;
- When you join us from an acquisition;
- During the annual Open Enrollment period; or
- If you have a qualifying life event.

New hire team members

As a new hire, your benefits are effective the first of the month after your hire date, and you must enroll no later than 20 days after your benefits effective date. For example, if you are hired on February 11, your benefits are effective on March 1, and you have until March 20 to complete your enrollment.

When can you change your benefits?

Certain life events may let you change your benefits during the year—generally within 31 days of the event. The benefits changes you make must be related to your life event.

These life events include:

- Change in marital status;
- Birth, adoption or placement for adoption of a child;
- Death of a dependent; and/or
- Change in your work status or your spouse's work status that affects benefits eligibility.

Newly benefits-eligible

If you transfer from an ineligible work status (e.g. PRN employee) to a benefits-eligible status (e.g. full-time), your benefits are effective the first of the month after the effective date of your status change. You must enroll no later than 20 days after your benefits effective date. For example, if your status change to full-time is effective on April 18, your benefits are effective on May 1, and you have until May 20 to complete your enrollment.

New team members from acquisitions

If you joined Amedisys through an acquisition, please refer to the transition communications you received for your specific coverage effective date and enrollment deadline for your Amedisys benefits. Contact the Amedisys Benefit Center at 888-528-7066 to confirm your benefits eligibility and enrollment period.

Annual Open Enrollment

An Open Enrollment period is held each fall so you can elect and/or change your benefits. The elections you make will be effective on January 1 of the following year.

Who is eligible?

You are eligible to enroll in Amedisys health insurance benefits if you are classified as a full-time, Baylor, PCL part-time, or other part-time eligible employee who is regularly scheduled to work at least 30 hours per week. (Note: Employees classified as other part-time eligible are not eligible to enroll in life or disability insurance benefits.)

You may also choose to enroll the following dependents:

- Your legal spouse;
- Your children under the age of 26; and/or
- Your children over age 26 who are not able to support themselves due to a physical or mental disability.

We will ask for copies of documents—such as a birth certificate or a marriage license—to verify that any newly enrolled dependents meet our eligibility requirements. This allows us to continue to provide all eligible employees and their dependents with comprehensive and competitive coverage. You do not need these documents to complete your enrollment, but please make sure you have copies readily available. Verification requests are done on a quarterly basis for all newly enrolled dependents.

Three ways to enroll

1. Online 24/7

Whenever it's convenient for you, log in to the People Portal at people.amedisys.com, select the My Benefits tab and click on the Benefits Enrollment link. Follow the prompts to make your elections.

2. With a benefits counselor

Go to cleartrackhr.as.me/Amedisys or scan the QR code below to schedule your appointment. A benefits counselor will call you at your scheduled time. Appointments available on a first-come, first-served basis.



Scan to schedule your appointment with a benefits counselor.

3. Through the Amedisys Benefits Center

Call the Amedisys Benefits Center at 888-528-7066 to enroll over the phone with a benefits counselor from 7 a.m. – 7 p.m. CST, Monday – Friday.

Resources to help you choose

- **PLANselect** (myplanselect.com, use Amedisys for user name and password)
- **Amedisys Benefits Resources** (amedisys.com/benefits)

BENEFITS CHECKLIST

- ✓ Think about your needs for 2023.
- ✓ Review your medical plan options on the next page. We give you four plans to choose from so you can pick the one that will support you best.
- ✓ Gather the social security numbers and birth dates for any dependents you need to add to your benefits.
- ✓ Enroll in your benefits no later than 20 days after your benefits effective date.



Physical health and wellbeing

IN THIS SECTION

Included Health

Your medical plan options

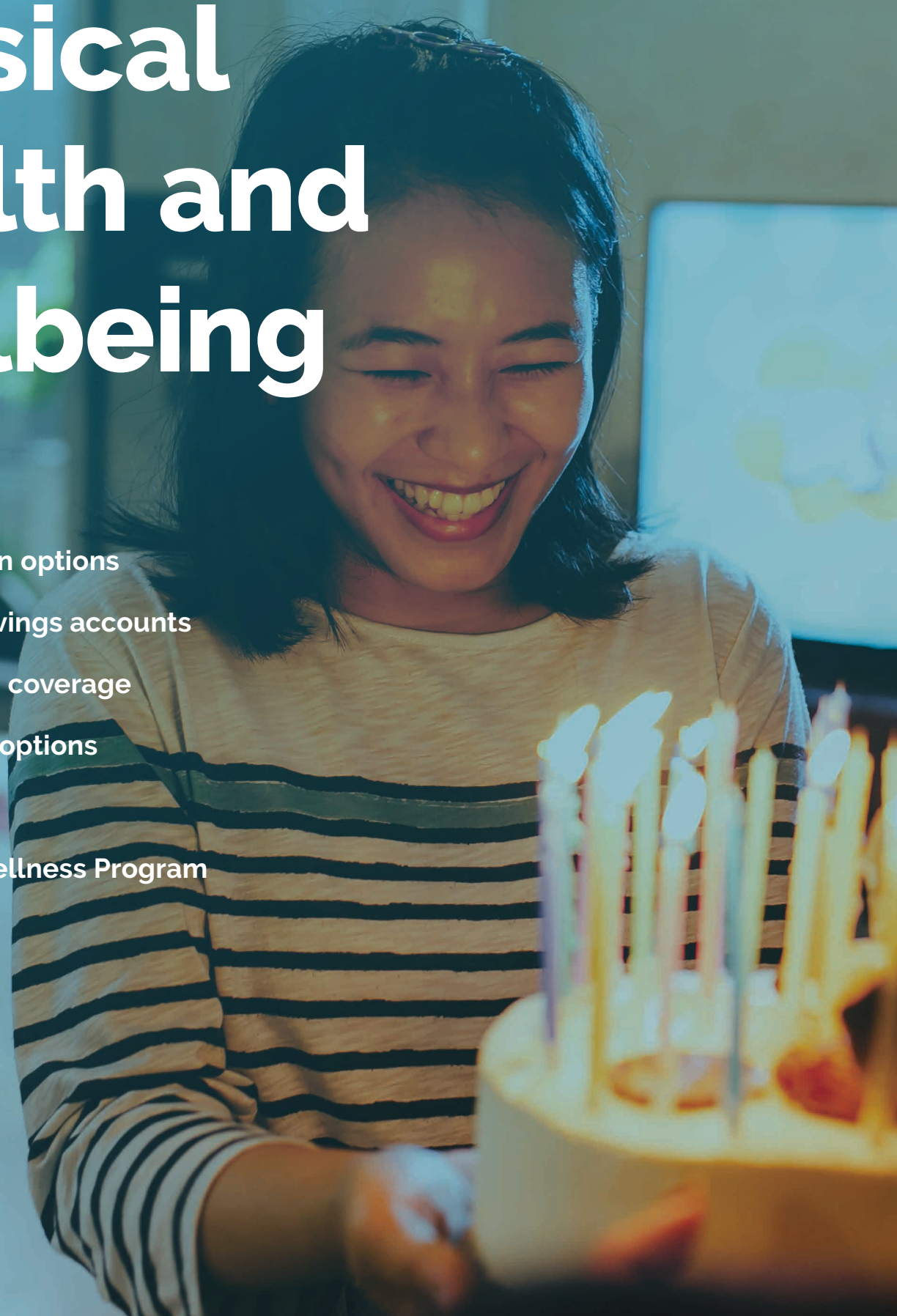
Spending and savings accounts

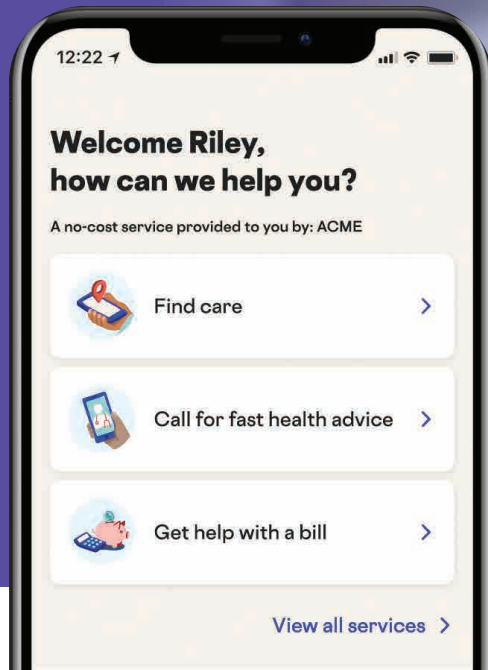
Prescription drug coverage

Your dental plan options

Vision coverage

The Amedisys Wellness Program





Scan to download the app
includedhealth.com/amedisys
855-429-7330

Let Included Health help!

Don't waste time and money with the wrong health plan! Just a few minutes with Included Health can help you decide on the right plan... and more!

Think of Included Health as your 24/7 health and benefits concierge. From enrollment questions to health and benefits help throughout the year, the team at Included Health is here to help you:

Understand your benefits

- Confirm your benefits coverage, explain your options, and coordinate complex issues between your insurance and doctor.
- Help you stay up-to-date on preventive tests.
- Schedule appointments.
- Coordinate the transfer of medical records.

Manage your health

- Get answers about symptoms, a health condition and treatment options.
- Receive support for chronic conditions, pregnancy, lifestyle improvement, care coordination and more.

Find care

- Get virtual urgent, physical or mental healthcare services whenever you need them.
- Find a primary care doctor or specialist who meets your personal preferences.
- Get expert second opinions for any diagnosis or treatment recommendation.

Save money on healthcare costs

- Compare the prices of in-network providers and help you find high-quality care at the right price.
- Locate the lowest-cost prescription drug options.

Get assistance with the claims process

- Review your bills, confirm coverage and ensure you're not being overcharged.
- Make sure everything is resolved between your insurance and healthcare provider.

Two PPO medical plans

You have the choice of two PPO plans through Highmark Blue Cross Blue Shield. Preventive care is covered at 100 percent in both plans, and you will save more money if you get in-network care.

PPO PREMIER PLAN

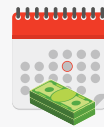


MORE COMES OUT OF YOUR PAYCHECK



BUT YOU PAY LESS FOR CARE

PPO VALUE PLAN



LESS COMES OUT OF YOUR PAYCHECK



BUT YOU PAY MORE FOR CARE

Your cost per paycheck

	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$51.80	\$103.60
EMPLOYEE + SPOUSE	\$171.54	\$343.08
EMPLOYEE + CHILD(REN)	\$112.25	\$224.49
EMPLOYEE + FAMILY	\$231.99	\$463.98

Your cost per paycheck

	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$41.88	\$83.77
EMPLOYEE + SPOUSE	\$148.74	\$297.48
EMPLOYEE + CHILD(REN)	\$94.40	\$188.80
EMPLOYEE + FAMILY	\$201.25	\$402.50

Security

Flexibility

Support

When it comes to your health insurance, we know you want choice and affordability. That's why we offer both PPO and HSA options!

Turn the page to review the coverage details for each medical plan and for help deciding which one is best for you.

Two HSA medical plans

You can choose from two HSA plans through Highmark Blue Cross Blue Shield that give you more control over your healthcare spending and a great way to save for the future. Preventive care is covered at 100 percent in both plans.

HSA PREMIER PLAN

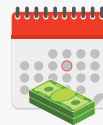


MORE COMES OUT OF YOUR PAYCHECK



BUT YOU PAY LESS FOR CARE

HSA VALUE PLAN



LESS COMES OUT OF YOUR PAYCHECK



BUT YOU PAY MORE FOR CARE

Your cost per paycheck

	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$27.82	\$55.64
EMPLOYEE + SPOUSE	\$104.30	\$208.60
EMPLOYEE + CHILD(REN)	\$64.70	\$129.40
EMPLOYEE + FAMILY	\$141.18	\$282.36

Your cost per paycheck

	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$17.30	\$34.59
EMPLOYEE + SPOUSE	\$80.09	\$160.18
EMPLOYEE + CHILD(REN)	\$45.75	\$91.51
EMPLOYEE + FAMILY	\$108.55	\$217.09

FREE healthcare services and support with every plan:

- Annual wellbeing visits
- 24/7 Included Health support
- Preventive cancer screenings
- Second opinions from experts
- Select maintenance medications
- Immunizations, vaccines and flu shots
- 1-on-1 coaching to lose weight, quit tobacco, change habits and support your mental health

Save your health, save your money!

If you have used tobacco within the past six months, you will pay a **tobacco surcharge of \$50 per month** if you enroll in an Amedisys medical plan. You can avoid this surcharge by successfully completing the Amedisys tobacco cessation program available at no cost to you. After you enroll, login to amedisys.com/wellness to get started.

Your medical plans compared

Think about your family's medical needs and which plan can best support you.



PPO PREMIER

ANNUAL DEDUCTIBLE

- \$750 per person
- \$1,500 per family, max

COINSURANCE

20% after deductible is met

ANNUAL OUT-OF-POCKET MAXIMUM

- \$3,000 per person
- \$6,000 per family, max

You pay this much for services:

OFFICE VISIT

- Primary care physician: \$25
- Specialist: \$45

TELEMEDICINE

- General care: \$10
- Dermatology: \$10
- Therapist (25 min.): \$25

URGENT CARE OR EMERGENCY ROOM VISIT

- Urgent care: \$50
- Emergency room: \$250 (waived if admitted)

PPO VALUE

ANNUAL DEDUCTIBLE

- \$1,500 per person
- \$3,000 per family, max

COINSURANCE

20% after deductible is met

ANNUAL OUT-OF-POCKET MAXIMUM

- \$4,000 per person
- \$8,000 per family, max

You pay this much for services:

OFFICE VISIT

- Primary care physician: \$50
- Specialist: \$90

TELEMEDICINE

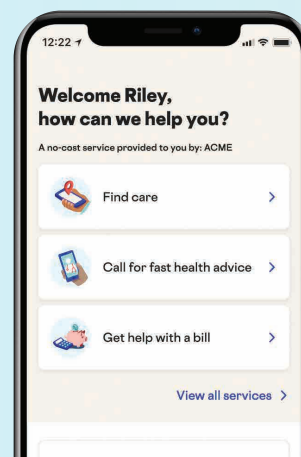
- General care: \$20
- Dermatology: \$20
- Therapist (25 min.): \$50

URGENT CARE OR EMERGENCY ROOM VISIT

- Urgent care: \$100
- Emergency room: \$250 (waived if admitted)

Telemedicine and second opinion services

Getting virtual care is easy! Anyone enrolled in a health plan can use the Included Health app to get general health, dermatology and mental health telemedicine care, in addition to 24/7 support from your personal care team.



Scan to download the app
includedhealth.com/amedisys
 855-429-7330

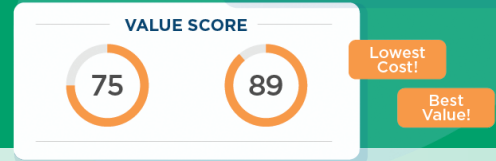
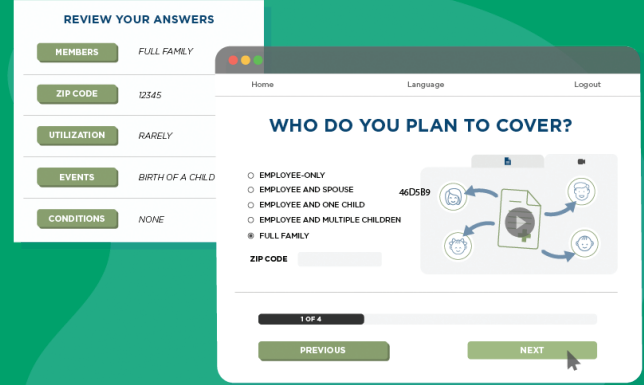
Need help deciding?

Answer a few questions and PLANselect will provide a recommendation.



Scan to use PLANselect or visit myplanselect.com (username and password: Amedisys)

Prefer to talk? Call the Amedisys Benefits Center at 888-528-7066 to learn about your plan options.



HSA PREMIER
ANNUAL DEDUCTIBLE <ul style="list-style-type: none"> Employee-only coverage: \$2,000 Family coverage: \$4,000
YOUR REDUCED DEDUCTIBLE AFTER THE AMEDISYS HSA CONTRIBUTIONS <ul style="list-style-type: none"> Employee-only coverage: \$1,300 Family coverage: \$2,800
COINSURANCE 20% after deductible is met
ANNUAL OUT-OF-POCKET MAXIMUM <ul style="list-style-type: none"> \$6,000 per person \$12,000 per family, max
You pay this much for services:
OFFICE VISIT 20% after deductible is met
TELEMEDICINE <ul style="list-style-type: none"> General care: \$45 (\$9 after deductible) Dermatology: \$45 (\$9 after deductible) Therapist (25 min.): \$70 (\$14 after deductible)
URGENT CARE OR EMERGENCY ROOM VISIT 20% after deductible is met

HSA VALUE
ANNUAL DEDUCTIBLE <ul style="list-style-type: none"> Employee-only coverage: \$4,000 Family coverage: \$8,000
YOUR REDUCED DEDUCTIBLE AFTER THE AMEDISYS HSA CONTRIBUTIONS <ul style="list-style-type: none"> Employee-only coverage: \$3,300 Family coverage: \$6,800
COINSURANCE 20% after deductible is met
ANNUAL OUT-OF-POCKET MAXIMUM <ul style="list-style-type: none"> \$6,750 per person \$13,500 per family, max
You pay this much for services:
OFFICE VISIT 20% after deductible is met
TELEMEDICINE <ul style="list-style-type: none"> General care: \$45 (\$9 after deductible) Dermatology: \$45 (\$9 after deductible) Therapist (25 min.): \$70 (\$14 after deductible)
URGENT CARE OR EMERGENCY ROOM VISIT 20% after deductible is met

All health plans include coverage for:

1. FREE preventive care exams, screenings and maintenance medications
2. Infertility treatment services (up to \$40,000 per lifetime)
3. Physical, speech and occupational therapy visits (up to a combined 90 visits per year)
4. Pediatric and adult hearing aid devices, exams and fittings

Please note:

- The coverage listed for all plans are for IN-NETWORK providers only.
- For out-of-network cost details, refer to the SBC documents online at amedisys.com/benefits.
- All plan deductibles and out-of-pocket max amounts reset every year on January 1.

\$aving and \$pending

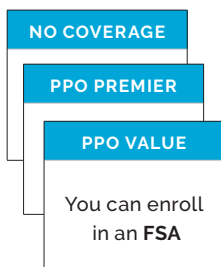
Pay for eligible expenses using an FSA or an HSA.



Flexible Spending Accounts (FSAs)

A Flexible Spending Account allows you to set aside pre-tax funds from your paycheck to pay for eligible expenses (as determined by the IRS) during the year. FSAs reduce your taxable income since your contributions are subtracted from your gross pay.

Any unused money remaining in your account(s) will be forfeited, so plan your contributions carefully. This is known as the “use it or lose it” rule, and it is governed by IRS regulations.



If you enroll in a PPO medical plan or decline medical coverage, you can enroll in a Healthcare Flexible Spending Account to pay for eligible healthcare expenses.

How it works

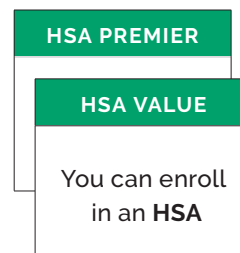
1. Enroll in a PPO medical plan or decline coverage.
2. Choose how much you want to contribute for the year. Your amount will be divided evenly from your remaining 2023 paychecks.
3. Pay for eligible healthcare expenses with your Optum debit card.
4. Spend your FSA money through March 15, 2024, and submit any receipts by June 30, 2024.

Bonus: Amedisys also offers a Dependent Care FSA. Use your Dependent Care FSA dollars to pay for daycare elder care expenses and more. It doesn't matter which medical plan you choose, you can still contribute to a Dependent Care FSA to save on daycare expenses.

Health Savings Account (HSA)

A Health Savings Account is a powerful tool that allows you to pay for qualified health expenses (as determined by the IRS) during the year. **The money in your HSA is yours to keep and use forever**, even if you leave the company or are no longer enrolled in the HSA plan.

You can change your HSA contribution amounts any time during the year for any reason. However, you must actively enroll in and contribute to your HSA to receive the company's HSA contribution every quarter.









If you enroll in an HSA medical plan, you must actively enroll in the Health Savings Account (HSA) every year to pay for eligible healthcare expenses.

How it works

1. Enroll in an HSA medical plan.
2. Choose how much you want to contribute for the year. Your election will be divided evenly from your remaining 2023 paychecks on a pre-tax basis.
3. Get company contributions to your HSA every quarter you contribute.
4. Pay for eligible healthcare expenses tax-free with your Optum debit card.
5. Let your unused money roll over year to year and invest it for more tax-free growth.
6. Retire with more savings! Continue to use your HSA to pay for healthcare expenses, tax-free OR use the money for any purpose after age 65 and pay regular income tax (like a retirement account).

Bonus: Amedisys will add money to your account each quarter during the year.

HSA vs. FSA—which one is right for me?

FSA	VS.	HSA
<p>Amedisys</p>	<p> Who owns the account?</p>	<p>You</p>
<p>You can participate in the Healthcare FSA if:</p> <ul style="list-style-type: none"> • You enroll in the PPO Premier or PPO Value medical plan or decline medical coverage; or • You enroll in the HSA Premier or HSA Value plan AND you do not contribute to a Health Savings Account. <p>You can participate in the Dependent Care FSA if:</p> <ul style="list-style-type: none"> • You have children under age 13 or adult dependents that you claim on your tax return. 	<p> Eligibility You cannot contribute to both a Healthcare FSA and an HSA at the same time.</p>	<p>You can contribute to an HSA if:</p> <ul style="list-style-type: none"> • You enroll in the HSA Premier or HSA Value plan AND • You are not covered by any Medicare part or any other health insurance coverage. <p>Note: If you have an HSA already, you can continue to spend and use your HSA balance from prior years even if you enroll in a PPO medical plan for 2023. You just won't be able to contribute any new money to an HSA in 2023.</p>
<p>You can contribute to your FSA up to these limits:</p> <ul style="list-style-type: none"> • Healthcare FSA: \$2,850 • Dependent Care FSA: \$2,500 for individuals or married couples filing separately or \$5,000 for married couples filing jointly. 	<p> How much can you contribute?</p>	<p>Both Amedisys and you can contribute up to these limits:</p> <ul style="list-style-type: none"> • Single coverage: \$3,850 • Family coverage: \$7,750 • Catch-up contribution for employees age 55+: \$1,000
<p>None</p>	<p> Investment Options</p>	<p>Several investment options are available when your balance reaches \$1,000.</p>
<p>No. You forfeit any FSA funds that aren't used by the deadline.</p>	<p> Do unused funds roll over next year?</p>	<p>Yes, the money in your HSA is always yours to keep—even if you leave Amedisys.</p>
<p>You can use your Healthcare FSA to pay for:</p> <ul style="list-style-type: none"> • Medical expenses • Dental expenses • Vision expenses • Prescriptions • Some over-the-counter items <p>You can use your Dependent Care FSA to pay for eligible child daycare or elder care expenses so you (and your spouse, if married) can work.</p>	<p> Eligible Expenses For a detailed list of eligible healthcare expenses, see IRS Publication 502.</p>	<p>You can use your HSA to pay for:</p> <ul style="list-style-type: none"> • Medical expenses • Dental expenses • Vision expenses • Prescriptions • Some over-the-counter items • Long-term care insurance premiums • COBRA insurance premiums

Prescription drugs

Your medical plan includes prescription drug coverage through CVS Caremark.



PPO PREMIER

ANNUAL DEDUCTIBLE

None

OUT-OF-POCKET MAXIMUM

Combined with medical

You pay this much for prescription drugs:

**MAINTENANCE DRUGS AND ANNUAL FLU SHOT
FREE!**

RETAIL PRESCRIPTION DRUGS (30-DAY SUPPLY)

- Generic: \$10
- Brand name: \$40

MAIL ORDER PRESCRIPTION DRUGS (90-DAY SUPPLY)

- Generic: \$20
- Brand name: \$80

SPECIALTY DRUGS

30% or FREE with PrudentRx enrollment

PPO VALUE

ANNUAL DEDUCTIBLE

None

OUT-OF-POCKET MAXIMUM

Combined with medical

You pay this much for prescription drugs:

**MAINTENANCE DRUGS AND ANNUAL FLU SHOT
FREE!**

RETAIL PRESCRIPTION DRUGS (30-DAY SUPPLY)

- Generic: \$20
- Brand name: \$80

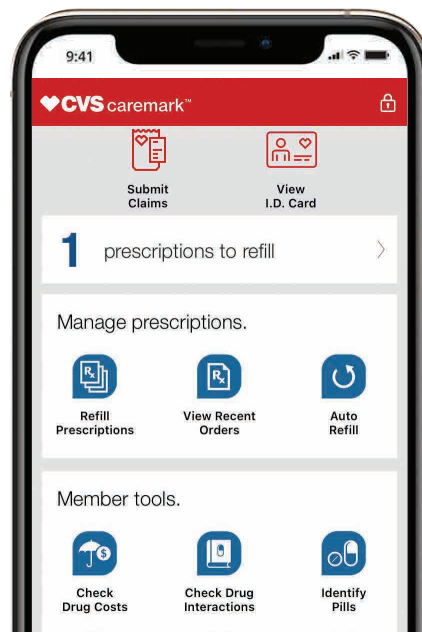
MAIL ORDER PRESCRIPTION DRUGS (90-DAY SUPPLY)

- Generic: \$40
- Brand name: \$160

SPECIALTY DRUGS

30% or FREE with PrudentRx enrollment

Please review the covered drug lists at amedisys.com/benefits or call CVS Caremark to confirm drug coverage, as formulary updates are made every quarter.



Scan to download
the CVS Caremark
app



HSA PREMIER
ANNUAL DEDUCTIBLE Combined with medical
OUT-OF-POCKET MAXIMUM Combined with medical
You pay this much for prescription drugs:
MAINTENANCE DRUGS AND ANNUAL FLU SHOT FREE!
RETAIL PRESCRIPTION DRUGS (30-DAY SUPPLY) 20% after deductible is met
MAIL ORDER PRESCRIPTION DRUGS (90-DAY SUPPLY) 20% after deductible is met
SPECIALTY DRUGS 20% after deductible is met

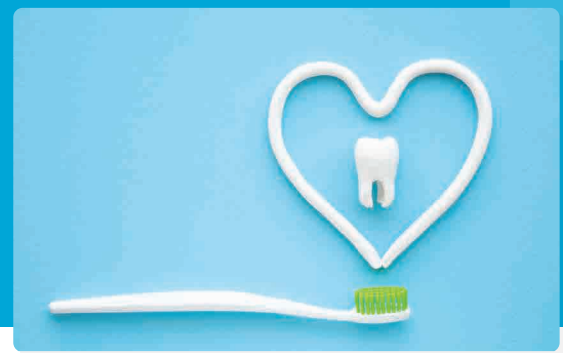
HSA VALUE
ANNUAL DEDUCTIBLE Combined with medical
OUT-OF-POCKET MAXIMUM Combined with medical
You pay this much for prescription drugs:
MAINTENANCE DRUGS AND ANNUAL FLU SHOT FREE!
RETAIL PRESCRIPTION DRUGS (30-DAY SUPPLY) 20% after deductible is met
MAIL ORDER PRESCRIPTION DRUGS (90-DAY SUPPLY) 20% after deductible is met
SPECIALTY DRUGS 20% after deductible is met

A prescription for savings

- **Tell your doctor you are concerned about cost.** Some doctors can look up your cost and find cheaper options during your appointment. Confirm your doctor prescribes the generic version, if available.
- **Review the FREE preventive drug list** to manage high blood pressure, high cholesterol, diabetes and other conditions. Log in to your account at caremark.com or call CVS Caremark at **866-842-5181** for details.
- **Stay at home and save!** Use the CVS Mail Order Pharmacy to save money with 90-day supplies for your regular prescriptions. You can call CVS to opt out if you want to pick up 30-day supplies at your local pharmacy, but you may pay more.
- **Go shopping!** Check prices online with the Check Drug Cost tool at caremark.com. You can also use manufacturer copay coupons or financial assistance programs. Any financial assistance amounts will not count towards your deductible or out-of-pocket maximum for the year.
- **Ask your pharmacist for their best price.** Some pharmacies at grocery stores offer common drugs for FREE or very low copays. These prices may not be displayed online and may change over time, so shop around!

Dental

You can choose from two dental plans through Cigna.



DENTAL PPO VALUE		
IN-NETWORK (TOTAL CIGNA DPPO)		
ANNUAL DEDUCTIBLE Single: \$75/Family: \$225		
ANNUAL MAXIMUM BENEFIT (per person) \$1,000		
You pay this much for services:		
PREVENTIVE CARE (cleanings, exams, X-rays) FREE! Plan pays 100%		
BASIC RESTORATIVE (fillings, extractions, oral surgery) 20% after deductible		
MAJOR RESTORATIVE (crowns, periodontics, endodontics, implants, bridges, dentures) 50% after deductible		
ORTHODONTIA (for children up to age 21) Not Covered		
LIFETIME ORTHODONTIA MAXIMUM (per child) N/A		
Your cost per paycheck		
	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$6.03	\$12.06
EMPLOYEE + SPOUSE	\$11.45	\$22.90
EMPLOYEE + CHILD(REN)	\$13.36	\$26.71
EMPLOYEE + FAMILY	\$19.32	\$38.64

DENTAL PPO PREMIER		
IN-NETWORK (TOTAL CIGNA DPPO)		
ANNUAL DEDUCTIBLE Single: \$50/Family: \$150		
ANNUAL MAXIMUM BENEFIT (per person) \$1,500		
You pay this much for services:		
PREVENTIVE CARE (cleanings, exams, X-rays) FREE! Plan pays 100%		
BASIC RESTORATIVE (fillings, extractions, oral surgery) 20% after deductible		
MAJOR RESTORATIVE (crowns, periodontics, endodontics, implants, bridges, dentures) 50% after deductible		
ORTHODONTIA (for children up to age 21) 50%. Must be enrolled for 12 months.		
LIFETIME ORTHODONTIA MAXIMUM (per child) \$1,500		
Your cost per paycheck		
	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$7.74	\$15.47
EMPLOYEE + SPOUSE	\$14.66	\$29.31
EMPLOYEE + CHILD(REN)	\$17.13	\$34.26
EMPLOYEE + FAMILY	\$24.77	\$49.54

Why spend more?

You can save up to 40 percent by using an **in-network** dentist. You can search for in-network dentists before your benefits become active by visiting [cigna.com](https://www.cigna.com). When prompted to select a plan, choose "Total Cigna DPPO."

Generally, members who receive **out-of-network** care end up being balance-billed by the non-participating dentist for the difference between what Cigna reimburses and what the dentist actually charges.

Vision

Consider vision coverage through VSP.



VSP CHOICE NETWORK PLAN

You pay this much for services:

WELL VISION EYE EXAM (once per calendar year)

\$20

PRESCRIPTION GLASSES

\$20

FRAMES (every other calendar year)

- \$0 for frames up to \$150 (or \$170 for featured brands)
- 20% off any amount over your allowance
- \$0 for frames up to \$80 purchased at Costco or Walmart

LENSES (every calendar year)

\$0. The prescription glasses copay includes single, lined bifocal and lined trifocal lenses. Polycarbonate lenses are covered for dependent children.

LENS ENHANCEMENTS (every calendar year)

- \$0 for scratch-resistant coating
- \$55 for standard progressive lenses
- \$95 – \$105 for premium progressive lenses
- \$150 – \$175 for custom progressive lenses

ELECTIVE CONTACTS IN LIEU OF GLASSES (once per calendar year)

- \$0 for contacts and contact lens exam (fitting and evaluation) up to \$130
- 15% off a contact lens exam (fitting and evaluation)

DIABETIC EYECARE PLUS PROGRAM (as needed)

- \$20. Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.

EXTRA SAVINGS

- Retinal screening: No more than a \$39 copay on routine retinal screening as an enhancement to a well vision exam
- Laser vision correction: Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities

Find an in-network provider to save money

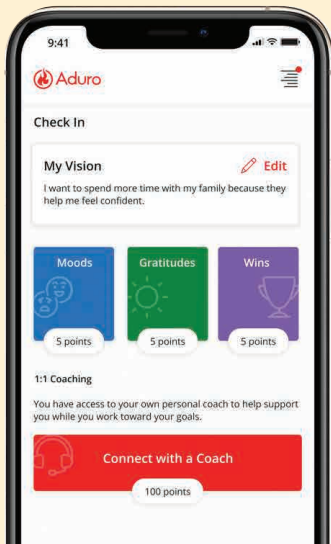
To find a VSP Choice provider, visit [vsp.com](https://www.vsp.com) or call **800-877-7195**. For your convenience, an ID card is not needed to access this plan. Simply identify yourself as a VSP member to your participating provider to access benefits.

Your cost per paycheck

	WEEKLY	BI-WEEKLY
EMPLOYEE ONLY	\$1.37	\$2.74
EMPLOYEE + SPOUSE	\$2.70	\$5.40
EMPLOYEE + CHILD(REN)	\$2.81	\$5.62
EMPLOYEE + FAMILY	\$4.38	\$8.76

The Amedisys Wellness Program

When it comes to wellness, more is always better. The Amedisys Wellness Program is customized to you and makes it easy to improve your wellbeing one small step at a time.



About the program

Manage stress, burnout, sleep, weight and much more with the Amedisys Wellness Program. Sign up and access interactive content, human performance coaching and more.

Plus, you can **earn up to \$500** in Wellness Rewards for participating!



Get started today!

Scan to download the app or visit
amedisys.com/wellness

Get 1-on-1 personal coaching

Make positive changes in your life with coaching that fits your schedule to help you reach your goals in any of the following areas:

- Health and fitness
- Money and prosperity
- Growth and development
- Contribution and sustainability

Connect with a coach

1. Log in at amedisys.com/wellness or download the Aduro app and log in.
2. Select the Connect with a Coach option on the home page.
3. Select an appointment date and time, enter your goal or focus area when prompted, and you're all set!

Reverse your type 2 diabetes with Virta

If you, your spouse or other adult dependents have type 2 diabetes, you have free access to Virta.

Virta treatment includes:

- ✓ Medical supervision
- ✓ Personalized treatment plan
- ✓ Biomarker tracking tools and supplies
- ✓ Personal health coach
- ✓ Recipes, food guides and meal plans
- ✓ Private patient community
- ✗ **NO** calorie counting or fasting
- ✗ **NO** required exercise
- ✗ **NO** surgery

Over 120 Amedisys team members have enrolled. They've lost an average of 20 pounds each and cut their medications in half! Find your success—get started at virtahealth.com/join/amedisys.

Earn up to \$500 in Wellness Rewards

The more you do, the more you are rewarded.

QUARTERLY REWARDS

EARN \$50 EVERY QUARTER

Earn quarterly wellness rewards by:

- Choosing activities or challenges to complete during the quarter
- Earning enough points before the end of the quarter

ANNUAL REWARDS

EARN \$300 MORE

Earn more wellness rewards when you:

- Complete your human performance assessment survey with Aduro
- Complete your biometric health screening with Aduro by:
 - Using the LabCorp voucher,
 - Using the at-home test kit, or
 - Having your doctor complete the PCP screening form.

Complete the required activities above by December 31, 2023, to earn the annual wellness rewards!

How to get started:

1. Register at amedisys.com/wellness or download the Aduro app.
2. Earn quarterly rewards by completing activities to earn points every calendar quarter.
3. Earn annual rewards by completing required activities like a biometric health screening before December 31.

Getting your rewards

Your rewards will be deposited in a Wellness Rewards Account with Bank of America. Any quarterly wellness rewards you earn will be available about a month after each calendar quarter ends. Any annual wellness rewards you earn will be available in February 2024.

Spending your rewards

You will receive a debit card that you can use to pay for wellbeing expenses like:

- Gym memberships;
- Fitness classes;
- Exercise equipment;
- Sporting goods;
- Spa and massage services;
- Wellbeing and weight loss app subscriptions;
- Financial/estate planners;
- And more!

More details about your rewards

You cannot use wellness rewards to pay for qualified health expenses like doctor visits or prescriptions. Any wellness reward dollars you spend will be treated as taxable income and required tax withholdings will be applied on your next available paycheck.

You can rollover a balance of up to \$500 in your Wellness Rewards Account to the following year. Any amounts over \$500 will be forfeited after year-end. Be sure to spend your Wellness Rewards to support your wellbeing throughout the year!



Financial security

IN THIS SECTION

The Amedisys Retirement Savings Plan

Life and AD&D insurance

Disability insurance

Additional benefits for financial security



The Amedisys Retirement Savings Plan

We make it easy to start saving with a 401(k) and company matching contributions!



All team members are eligible, so get started now with these five steps

- 1** **Set up your account access.** Go to benefits.ml.com and select the Create your User ID now link. Follow the prompts to get started.
- 2** **Choose how much to save.** Select the Enroll Now or Change Contribution Rate link. You can save up to 75 percent of your pay as pre-tax and/or Roth contributions, up to these limits:
 - Under age 50: \$22,500
 - Age 50+: \$22,500 + \$7,500 catch-up
- 3** **Claim the maximum match.** Try to save at least 6 percent, so you get the full amount of retirement match money from Amedisys. Matching contributions are deposited to your account after each calendar quarter.
- 4** **Choose how to invest your savings.** We offer a variety of investment options, including low-cost target retirement date funds that automatically adjust your investments as you get closer to age 65.
- 5** **Rest assured—you are always 100 percent vested in your own contributions.** Vesting in Amedisys contributions occurs over a five-year period, starting at 25 percent after two years and reaching 100 percent after five years.

Manage your money

Checking your account balance, changing your contributions and selecting investment options is easy.



Scan the QR code, visit benefits.ml.com, download the Benefits OnLine app or call Merrill at [800-228-4015](tel:800-228-4015).

Go online to:

- Change your contribution rate
- Choose how to invest your contributions
- Name your account beneficiary

Three ways to learn more about money

We want you to be empowered when it comes to financial wellness. Use these resources to learn, grow and stretch your savings to meet your financial goals.

- 1. Education center:** Learn from a variety of resources that can help you build a firmer foundation for your financial life.
- 2. Better Money Habits®:** When it comes to your money, a little knowledge can go a long way. Choose a topic and start exploring.
- 3. 401(k) account access guide:** Benefits OnLine is your main resource for managing and monitoring your 401(k) account online. Use this account access guide to help navigate the site.

Life and AD&D insurance

Nobody likes to think about it, but consider what expenses and income needs your dependents would have if something happened to you—especially if you provide most of the income for your family.

What's the difference?

- **Life insurance** pays a benefit in the event of your death.
- **Accidental death and dismemberment (AD&D)** provides you specified benefits for a covered accidental death or bodily injury that directly causes dismemberment (like the loss of a hand, foot or eye).
- When you purchase additional coverage for yourself, your spouse or your children, you automatically receive both life and AD&D coverage with Securian.

We cover the basics

Amedisys provides full-time and Baylor team members with basic life coverage of one times your annual benefits base rate (ABBR), rounded up to the next \$1,000. Amedisys provides you with a minimum of \$50,000 in basic life coverage.

In addition, Amedisys provides \$2,000 in basic life coverage for your legal spouse and eligible children at no cost to you!

Your annual benefits base rate (ABBR)* is:



- **Salaried:** Your annual base salary
- **Hourly:** Your base hourly rate × 40 hours a week × 52 weeks
- **Per visit:** Your weekday per visit rate × 30 visits a week × 52 weeks

*ABBR for social workers is based on 20 visits per week. ABBR for PCL part-time employees is based on 20 hours per week.

Would you like even more protection?

If you are an eligible team member, you may purchase additional group term life and AD&D insurance for yourself and your eligible spouse or child(ren). You must purchase voluntary employee life insurance for yourself if you wish to purchase voluntary life insurance for your spouse.

VOLUNTARY COVERAGE FOR	COVERAGE AVAILABLE	EOI REQUIRED
Employee	Increments of \$10,000 up to \$500,000	Yes, but only for coverage over \$250,000
Spouse	Increments of \$5,000 up to \$250,000	Yes, but only for coverage over \$25,000
Child(ren) (from birth to 26 years old)	\$10,000	No, policy is guaranteed issue.

What is EOI?

If you select more than \$250,000 in employee coverage and/or more than \$25,000 in spouse coverage, you will need to complete the Evidence of Insurability (EOI) process with Securian Financial. It's a simple, secure process that can be completed online. Here's how:

1. You will receive an email and/or letter from Securian about 2 weeks after you enroll.
2. Follow the instructions to setup your LifeBenefits account online.
3. Provide your height and weight and answer three short questions which will determine whether additional medical history is needed.

Coverage and premiums will not be effective until EOI is approved by Securian.



Calculate your life and AD&D insurance cost:



Your coverage amount: \$_____

Divided by 1,000 ($\div 1,000$)

Multiplied by premium rate (see chart): \$_____

= Your monthly cost: \$_____

Name your beneficiaries online

Securian Financial will manage all beneficiaries for your life insurance benefits through Amedisys. Don't forget to name your beneficiary to ensure your benefits are paid as you intend.

To designate your beneficiary online:

1. Visit [LifeBenefits.com](https://www.lifebenefits.com).
2. Enter your user ID, which is "amed" followed by your 8-digit employee ID number.
3. Enter your password, which is your 8-digit date of birth (MMDDYYYY) followed by the last 4 digits of your social security number.

After you log in for the first time, you will be prompted to set a new password for any future return visits to the site. You can use these same credentials to both update your beneficiaries and complete the Evidence of Insurability (EOI) process online, as needed.

EMPLOYEE AND SPOUSE	LIFE AND AD&D PREMIUM RATE
Age	Rate per \$1,000
0 - 24	\$0.07
25 - 29	\$0.08
30 - 34	\$0.10
35 - 39	\$0.11
40 - 44	\$0.12
45 - 49	\$0.18
50 - 54	\$0.27
55 - 59	\$0.45
60 - 64	\$0.68
65 - 69	\$1.29
70+	\$2.08



Scan to learn more about your life insurance options and how much coverage you might need or visit [securian.com/amedisys-life](https://www.securian.com/amedisys-life).

Disability insurance

If you're suddenly unable to earn a paycheck due to illness or an accident, disability insurance provided through Unum can help provide financial security until you can return to work.



You must be an eligible team member and actively at work (not on a leave of absence) to enroll in short-term and long-term disability insurance.

Short-term disability (STD)

You are considered disabled if you have an illness, pregnancy or accidental injury and you are receiving appropriate care and treatment from a doctor on a continuing basis. Your doctor must certify that you are unable to return to work.

The short-term disability plan replaces 60 percent of your pre-disability earnings, also known as your annual benefits base rate (ABBR), up to a maximum benefit of \$2,500 per week for up to 12 weeks for a qualified disability. Benefits begin after you are disabled for seven calendar days.

Important: When you enroll in the short-term disability plan, pre-existing condition limitations will apply. Benefits will not be paid for a claim that is caused by, contributed to or occurs as a result of a pre-existing condition or medical or surgical treatment for that condition for which the date of diagnosis is in the six months prior to and the first 12 months after your coverage effective date.

Calculate your STD cost:



Your ABBR: \$ _____
 Divided by 52 weeks (÷ 52)
 Multiplied by 60% (x 0.6)
 = Weekly STD benefit (max of \$2,500): \$ _____
 Multiplied by STD premium rate (x \$0.0765)
 = **Your monthly STD cost:** \$ _____

Example: If you make \$60,000 per year, you'll pay \$52.96 per month or \$24.44 per bi-weekly paycheck.

Long-term disability (LTD)

The LTD plan replaces 50 percent of your ABBR, up to a maximum benefit of \$10,000 per month, if you remain disabled. There is a 90-day waiting period from your initial date of disability before LTD benefits begin. However, you may be covered by STD (if enrolled) during that time.

Calculate your LTD cost:



Your ABBR: \$ _____
 Divided by 12 months (÷ 12)
 = Monthly ABBR: \$ _____
 Divided by 100 (÷ 100)
 Multiplied by LTD premium rate: _____
 = **Your monthly LTD cost:** \$ _____

For example, if you are age 44 and make \$60,000 annually, you'll pay \$18.48 per month or \$8.53 per bi-weekly paycheck.

EMPLOYEE	LTD PREMIUM RATE
Age	Rate per \$100
0 - 24	\$0.0755
25 - 29	\$0.0905
30 - 34	\$0.1535
35 - 39	\$0.2445
40 - 44	\$0.3695
45 - 49	\$0.4055
50 - 54	\$0.5405
55 - 59	\$0.553
60 - 64	\$0.532
65 - 69	\$0.391
70+	\$0.2245

Additional benefits for financial security



Both critical illness and accident insurance pay a one-time, lump-sum benefit amount that you can use in any way you like.

Critical illness insurance

Critical illnesses can keep you from working and make it difficult to do simple, everyday things. This coverage pays a specified benefit amount if you are diagnosed with a covered disease such as heart attack, stroke, multiple sclerosis, cancer, Parkinson's disease, Alzheimer's disease and many others.

Accident insurance

This insurance through Voya Financial pays you a specified amount for specific injuries resulting from a covered accident. These benefits are in addition to any health insurance benefits you may receive.

ACCIDENT INSURANCE	BENEFIT
Hospital admission	\$1,250
Inpatient surgery	Up to \$1,500
Outpatient surgery	\$300
Ground ambulance	\$400
Coma	\$17,000
Physical therapy	\$270 (six sessions)

Quick Tip

These Voya Financial insurance plans are limited benefit policies and do not replace health or life insurance. However, if you decide to enroll in critical illness or accident insurance, you might be able to choose a less expensive medical plan option. Visit amedisys.com/benefits to learn more about the voluntary benefit plans coverage details, and premium costs per paycheck.

Employee Stock Purchase Plan

All team members are eligible to purchase Amedisys common stock at a 15 percent discount. New enrollments and increases can only be requested during the quarterly enrollment period. Visit computershare.com or call [888-482-3443](tel:888-482-3443) for more information and to enroll.

Perks at Work

We use employee purchasing power to give all employees access to the Amedisys Perks at Work program. This gives you discounts on:

- Movie and theme park tickets
- Dining out
- Hotels
- Pet insurance
- Electronics
- Car-buying
- Travel
- And more!

Activate your Perks at Work account by going to perksatwork.com/login. Use your Amedisys work email address and employee ID number to register for an account if you are a new user.

Banking and investing benefits

Through our partnership with Bank of America and Merrill, you have access to banking and investing opportunities that can help you save money and plan your financial future. These include:

- No-fee banking services for an existing or newly eligible Bank of America personal checking or savings account.
- A special mortgage discount you can use to reduce the rate on a new mortgage or to reduce closing costs.
- Access to investment products.
- Financial education through Bank of America's Better Money Habits® along with goal-setting and personalized advice.

Start enjoying these benefits after you set up your Amedisys paycheck to be directly deposited into your personal checking or savings account at Bank of America. Learn more at promo.bankofamerica.com/BIP/#/amedisys.



Work/life balance

IN THIS SECTION

Employee Assistance Program (EAP)

Time away

Family support



Work/life balance



Employee Assistance Program (EAP)

The Amedisys EAP provides you with access to services designed to support you through key life events and day-to-day needs. Amedisys is proud to offer the EAP to all team members and dependents at no cost. It's easy, free and confidential, too.

- **24/7 support:** Five sessions with experienced clinicians (per occurrence) at no cost to you.
- **Legal resources:** Unlimited phone access and an initial consultation at no charge with a local attorney, and discounts on additional services.
- **Financial resources:** Unlimited phone support for personal finance concerns.
- **Work/life resources:** Information on child care, elder care, adoption, relocation and other needs.
- **Online wills:** Prepare your will online at no charge. Living trusts and final arrangements are also available.
- **Other online resources:** Support for personal or family concerns, helpful planning tools and more.

Get help with all this and more! It's free and completely confidential. Call LifeWorks at [888-267-8126](tel:888-267-8126) or visit login.lifeworks.com and use **Amedisys** for the user name and password.

Time away

Amedisys observes New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and Christmas holidays. Full-time employees receive these as paid holidays, and eligible part-time employees receive four hours of holiday pay for any regularly scheduled work days that fall on one of these holidays. PTO and Holidays for PCL and Contessa employees may vary. Check with your local office for details.

We also offer a generous paid time off program. PTO is accrued based on both years of service and hours worked each week and used for both vacation and sick time.

FULL-TIME EMPLOYEES (in Home Health, Hospice and Corporate)	MAXIMUM ANNUAL ACCRUAL (based on working 40 hours per week)
New hires	17 days
5 years of service	22 days
10+ years of service	27 days

ELIGIBLE PART-TIME EMPLOYEES	MAXIMUM ANNUAL ACCRUAL (based on working 20 hours per week)
New hires	8.5 days
5 years of service	11 days
10+ years of service	13.5 days

There's nothing like family

We want to support you in building your family and spending time with your loved ones. That's why you have:

Financial support to build your family

- Coverage for infertility treatment services (lifetime maximum of \$30,000 for medical and \$10,000 for prescriptions) if you are enrolled in an Amedisys medical plan.
- Reimbursement of up to \$10,000 per year (\$40,000 lifetime maximum) for eligible adoption expenses.
- Call the Amedisys Benefits Center at [888-528-7066](tel:888-528-7066) and select the option for benefits questions to learn more about these new benefits.

Valuable time to spend with your family

For new leaves of absence that start on or after January 1, 2023, full-time and Baylor team members receive:

- Two weeks of 100 percent pay for parental bonding leave for both parents and for adoptions. Birthing parents who enroll in STD through Unum for 2023 receive an additional 6-8 weeks of leave at 60 percent pay.
- Two weeks of 100 percent pay for family caregiving to care for an immediate family member with a serious condition as defined by FMLA.

Some things to know:

- Parental bonding and family caregiving leaves must each be taken as one continuous two-week period.
- These leaves run concurrent with any available FMLA leave. You cannot use these leaves to extend your time away from work beyond your available federal, state or local leave benefits.
- The remainder of the FMLA 12-week period is unpaid, but you must use accrued PTO during that time if you are not receiving STD benefits.

Required Notices

HIPAA SPECIAL ENROLLMENT NOTICE

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself or your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage). In addition, if you have a new dependent as result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption or placement for adoption.

Special enrollment rights also may exist in the following circumstances:

- If you or your dependents experience a loss of eligibility for Medicaid or a state Children's Health Insurance Program (CHIP) coverage and you request enrollment within 60 days after that coverage ends; or
- If you or your dependents become eligible for a state premium assistance subsidy through Medicaid or a state CHIP with respect to coverage under this plan and you request enrollment within 60 days after the determination of eligibility for such assistance.

Note: The 60-day period for requesting enrollment applies only in these last two listed circumstances relating to Medicaid and state CHIP. As described above, a 31-day period applies to most special enrollments. To request special enrollment or obtain more information, call the Amedisys Benefits Center at **888-528-7066** or submit an HR Total Rewards Benefits request at <http://helpdesk.amedisys.com>.

NOTICE CONCERNING EMPLOYEE WELLNESS PROGRAM

The Amedisys Wellness Program is a voluntary wellness program available to all employees who are enrolled in one of the Amedisys medical/prescription drug plans. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program, you will be asked to complete a voluntary Health Assessment or "HA," that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes or heart disease). You will also be encouraged to complete a biometric screening, which will include a blood test. You are not required to complete the HA or to participate in the blood test or other medical examinations. However, employees who choose to participate in the wellness program by engaging in various wellness activities may receive a financial incentive and other rewards for making healthy choices.

Although you are not required to participate in the wellness program, only employees who engage in these activities and more will receive the rewards. If you are unable to participate in any of the health-related activities, you may be entitled to a Reasonable Accommodation or an alternative standard. You may request a Reasonable Accommodation or an alternative standard by contacting the Amedisys Benefits Center at **888-528-7066**.

The information from your HA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program. You also are encouraged to share your results or concerns with your own doctor.

PROTECTIONS FROM DISCLOSURE OF MEDICAL INFORMATION

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and Amedisys Holding, LLC ("Amedisys") may use aggregate information it collects to design a program based on identified health risks in the workplace, the wellness program and the program's third-party administrator will never disclose any of your personal information either publicly or to Amedisys, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving a reward. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate. If you have questions or concerns regarding this notice or about protections against discrimination and retaliation, please contact the Amedisys Benefits Center at **888-528-7066**.

SUMMARY OF BENEFITS AND COVERAGE (SBC) DOCUMENTS

Amedisys is required to furnish SBC documents for all medical plan options offered to eligible team members when they first become eligible for benefits and every year during the Open Enrollment period. You can access these SBC documents anytime online by going to amedisys.com/benefits. If you prefer to have a paper copy mailed to you at no charge, please call the Amedisys Benefits Center at **888-528-7066**.

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW YOU MAY OBTAIN A COPY OF THE PLAN'S NOTICE OF PRIVACY PRACTICES, WHICH DESCRIBES THE WAYS THAT THE PLAN USES AND DISCLOSES YOUR PROTECTED HEALTH INFORMATION.

Amedisys Employees Welfare Benefit Plan (the "Plan") provides health benefits to eligible employees of Amedisys Holding, LLC (the "Company") and their eligible dependents as described in the summary plan description(s) for the Plan. The Plan creates, receives, uses, maintains and discloses health information about participating employees and dependents in the course of providing these health benefits. The Plan is required by law to provide notice to participants of the Plan's duties and privacy practices with respect to covered individuals' protected health information and has done so by providing to Plan participants a Notice of Privacy Practices, which describes the ways that the Plan uses and discloses protected health information. You can access the Plan's Notice of Privacy Practices online at amedisys.com/benefits. To receive a paper copy of the Plan's Notice of Privacy Practices, you should call the Amedisys Benefits Center at **888-528-7066** or submit an HR Total Rewards Benefits request at helpdesk.amedisys.com.

WOMEN'S HEALTH AND CANCER RIGHTS ACT

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Therefore, deductibles and coinsurance apply.

If you would like more information on WHCRA benefits, call Highmark BCBS at **866-283-3792** or the Amedisys Benefits Center at **888-528-7066**.

AMEDISYS TOBACCO-USER SURCHARGE & REASONABLE ALTERNATIVE NOTICE

Amedisys Holding, LLC ("Amedisys") cares about your overall health and encourages employees to be tobacco-free by requiring that tobacco users pay more for their medical/prescription drug coverage (\$50 per month or \$600 per year). However, even though you may currently use tobacco products, you might qualify for an opportunity to avoid the Tobacco-User Surcharge by different means.

Amedisys is pleased to offer a Reasonable Alternative if you currently use tobacco and want to start down the path to becoming tobacco-free. The Amedisys Wellness Program powered by Aduro offers the Breathe Easy tobacco cessation program. If you choose to participate in this program and successfully complete the program, then you will no longer be subject to the Tobacco-User Surcharge. You may enroll in this program by contacting Aduro at **855-864-0721** or registering online at amedisys.adurolife.com.

If it is not medically appropriate (as determined by your physician) for you to participate in the Aduro Breathe Easy tobacco cessation program, Amedisys may approve another program that your physician recommends. However, keep in mind that unlike the Aduro Breathe Easy tobacco cessation program, this alternate program may not be free for you. Please contact the Amedisys Benefits Center at **888-528-7066** or submit an HR Total Rewards Benefits request at helpdesk.amedisys.com to discuss in more detail.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office or dial **1-877-KIDS-NOW** or visit insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2022. Contact your state for more information on eligibility.

(See listing of states on next page)

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP) CONTINUED

ALABAMA – Medicaid
Website: myalhipp.com
Phone: 855-692-5447

ALASKA – Medicaid
The AK Health Insurance Premium Payment Program
Website: myakhipp.com
Phone: 866-251-4861
Email: CustomerService@MyAKHIPP.com
Medicaid Eligibility: health.alaska.gov/dpa/Pages/default.aspx

ARKANSAS – Medicaid
Website: myarhipp.com
Phone: 855-MyARHIPP (855-692-7447)

CALIFORNIA – Medicaid
Health Insurance Premium Payment (HIPP) Program: dhcs.ca.gov/hipp
Phone: 916-445-8322
Fax: 916-440-5676
Email: hipp@dhcs.ca.gov

COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)
Health First Colorado Website: healthfirstcolorado.com
Health First Colorado Member Contact Center: 800-221-3943/State Relay 711

CHP+: colorado.gov/pacific/hcpf/child-health-plan-plus
CHP+ Customer Service: 800-359-1991/State Relay 711

Health Insurance Buy-In Program (HIBI): colorado.gov/pacific/hcpf/health-insurance-buy-program
HIBI Customer Service: 855-692-6442

FLORIDA – Medicaid
Website: fmedicaidprecovery.com/
fmedicaidprecovery.com/hipp/index.html
Phone: 877-357-3268

GEORGIA – Medicaid
GA HIPP Website: medicaid.georgia.gov/health-insurance-premium-payment-program-hipp
Phone: 678-564-1162, Press 1
GA CHIPRA Website: medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra
Phone: 678-564-1162, Press 2

INDIANA – Medicaid
Healthy Indiana Plan for low-income adults 19-64
Website: in.gov/fssa/hip
Phone: 877-438-4479

All other Medicaid
Website: in.gov/medicaid
Phone: 800-457-4584

IOWA – Medicaid and CHIP (Hawki)
Medicaid Website: dhs.iowa.gov/ime/members
Medicaid Phone: 800-338-8366

Hawki Website: dhs.iowa.gov/Hawki
Hawki Phone: 800-257-8563

HIPP Website: dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp
HIPP Phone: 888-346-9562

KANSAS – Medicaid
Website: kancare.ks.gov
Phone: 800-792-4884

KENTUCKY – Medicaid
Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx
Phone: 855-459-6328
Email: KIHIPPPROGRAM@ky.gov
KCHIP Website: kidshealth.ky.gov/Pages/index.aspx
Phone: 877-524-4718
Kentucky Medicaid Website: hchfs.ky.gov

LOUISIANA – Medicaid
Websites: medicaid.la.gov
ldh.la.gov/lahipp
Phones: 888-342-6207 (Medicaid hotline)
855-618-5488 (LaHIPP)

MAINE – Medicaid
Enrollment Website: maine.gov/dhhs/ofi/applications-forms
Phone: 800-442-6003
TTY: Maine relay 711

Private Health Insurance Premium Webpage: maine.gov/dhhs/ofi/applications-forms
Phone: 800-977-6740
TTY: Maine relay 711

MASSACHUSETTS – Medicaid and CHIP
Website: mass.gov/masshealth/pa
Phone: 800-862-4840
TTY: 617-886-8102

MINNESOTA – Medicaid
Website: mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp
Phone: 800-657-3739

MISSOURI – Medicaid
Website: dss.mo.gov/mhd/participants/pages/hipp.htm
Phone: 573-751-2005

MONTANA – Medicaid
Website: dphhs.mt.gov/MontanaHealthcarePrograms/HIPP
Phone: 800-694-3084
Email: HSHIPPProgram@mt.gov

NEBRASKA – Medicaid
Website: ACCESSNebraska.ne.gov
Phone: 855-632-7633
Lincoln: 402-473-7000
Omaha: 402-595-1178

NEVADA – Medicaid
Medicaid Website: dhcfp.nv.gov
Medicaid Phone: 800-992-0900

NEW HAMPSHIRE – Medicaid
Website: dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program
Phone: 603-271-5218
Toll-free number for the HIPP program: 800-852-3345, ext 5218

NEW JERSEY – Medicaid and CHIP
Medicaid Website: state.nj.us/humanservices/dmahs/clients/medicaid
Medicaid Phone: 609-631-2392
CHIP Website: njfamilycare.org/index.html
CHIP Phone: 800-701-0710

NEW YORK – Medicaid
Website: health.ny.gov/health_care/medicaid
Phone: 800-541-2831

NORTH CAROLINA – Medicaid
Website: medicaid.ncdhhs.gov
Phone: 919-855-4100

NORTH DAKOTA – Medicaid
Website: nd.gov/dhs/services/medicalserv/medicaid
Phone: 844-854-4825

OKLAHOMA – Medicaid and CHIP
Website: insureoklahoma.org
Phone: 888-365-3742

OREGON – Medicaid
Website: healthcare.oregon.gov/Pages/index.aspx
oregonhealthcare.gov/index-es.html
Phone: 800-699-9075

PENNSYLVANIA – Medicaid
Website: dhs.pa.gov/Services/Assistance/Pages/HIPP-Program.aspx
Phone: 800-692-7462

RHODE ISLAND – Medicaid and CHIP
Website: eohhs.ri.gov
Phones: 855-697-4347
401-462-0311 (Direct Rite Share Line)

SOUTH CAROLINA – Medicaid
Website: scdhhs.gov
Phone: 888-549-0820

SOUTH DAKOTA - Medicaid
Website: dss.sd.gov
Phone: 888-828-0059

TEXAS – Medicaid
Website: gethipptexas.com
Phone: 800-440-0493

UTAH – Medicaid and CHIP
Medicaid Website: medicaid.utah.gov
CHIP Website: health.utah.gov/chip
Phone: 877-543-7669

VERMONT– Medicaid
Website: greenmountaincare.org
Phone: 800-250-8427

VIRGINIA – Medicaid and CHIP
Websites: coverva.org/en/famis-select
coverva.org/en/hipp
Medicaid Phone: 800-432-5924
CHIP Phone: 800-432-5924

WASHINGTON – Medicaid
Website: hca.wa.gov
Phone: 800-562-3022

WEST VIRGINIA – Medicaid and CHIP
Websites: dhr.wv.gov/bms
mywvhipp.com
Medicaid Phone: 304-558-1700
CHIP Toll-free phone: 855-MyWVHIPP (1-855-699-8447)

WISCONSIN – Medicaid and CHIP
Website: dhs.wisconsin.gov/badgercareplus/p-10095.htm
Phone: 800-362-3002

WYOMING – Medicaid
Website: health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility
Phone: 800-251-1269

IMPORTANT NOTICE FROM AMEDISYS HOLDING, LLC ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Amedisys Employees Welfare Benefit Plan and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The Amedisys Employees Welfare Benefit Plan has determined that the prescription drug coverage offered by the Amedisys Employees Welfare Benefit Plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you decide to join a Medicare drug plan, your current Amedisys Employees Welfare Benefit Plan coverage will not be affected. See the plan SPD for more information about your prescription drug coverage provisions/options. If you do decide to join a Medicare drug plan and drop your current Amedisys Employees Welfare Benefit Plan coverage, be aware that you and your dependents will not be able to get this coverage back.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

You should also know that if you drop or lose your current coverage with the Amedisys Employees Welfare Benefit Plan and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1 percent of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19 percent higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

FOR MORE INFORMATION ABOUT THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE . . .

Contact the person listed below for further information. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Amedisys Employees Welfare Benefit Plan changes. You also may request a copy of this notice at any time.

FOR MORE INFORMATION ABOUT YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE . . .

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit [medicare.gov](https://www.medicare.gov).
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help.
- Call **1-800-MEDICARE (1-800-633-4227)**. TTY users should call **1-877-486-2048**.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at: [socialsecurity.gov](https://www.socialsecurity.gov) or call them at **1-800-772-1213** (TTY **1-800-325-0778**).

Date: 10/14/2022

Name of Entity/Sender: Amedisys Holding, LLC

Contact: Amedisys Benefits Center at **1-888-528-7066**

REMEMBER: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained Creditable Coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

For more information

Don't forget! You can access information about your benefits year-round at amedisys.com/benefits.

Keep this page handy if you have questions about your benefits throughout the year.

BENEFIT	VENDOR	WEBSITE	PHONE
24/7 care team + telemedicine and expert/second medical opinions	Included Health	includedhealth.com/amedisys	855-429-7330
Employee Assistance Program (EAP)	LifeWorks	login.lifeworks.com Username and password: Amedisys	888-267-8126
Request a leave of absence	Unum	portal.unum.com	866-868-6737
Amedisys Wellness Program	Aduro	amedisys.com/wellness	855-864-0721
Medical	Highmark Blue Cross Blue Shield	highmarkbcbs.com	866-283-3792
Health Savings Account (HSA) and Flexible Spending Accounts (FSAs)	Optum Financial	optumfinancial.com	833-881-8154
Prescription drug	CVS Caremark	caremark.com	866-842-5181
Dental	Cigna	mycigna.com	800-244-6224
Vision	VSP	vsp.com	800-877-7195
Disability	Unum	portal.unum.com	866-868-6737
Life and accidental death and dismemberment (AD&D) insurance	Securian Financial	lifebenefits.com/amedisys	866-293-6047
Accident and critical illness insurance	Voya Financial	voya.com	888-238-4840
Employee discounts	Perks at Work	perksatwork.com/login	N/A
The Amedisys Retirement Savings Plan	Merrill	benefits.ml.com	800-228-4015
Employee Stock Purchase Plan	Computershare	computershare.com	888-482-3443



Your Amedisys benefit contacts are mobile!

To access your Mobile Wallet Card, scan the QR code or visit mymobilewalletcard.com/amedisys.

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The information in this guide is a summary and does not provide a full description nor is it a guarantee of benefits. Additional plan specifics and benefit details can be found in the related summary plan descriptions and plan documents on the Amedisys employee self-service websites. If any discrepancies arise, the summary plan description or plan document will govern. Amedisys reserves the right to change, amend, suspend or terminate any or all of the benefits, in whole or in part, at any time and for any reason at its sole discretion. Union employees should refer to the current collective bargaining agreement for specific terms and provisions.