



2025 Benefits FAQs

Health and Welfare Enrollment Information

Q. When do I need to enroll in health and welfare benefits?

A. If you are a new employee, you must enroll within 31 days of your hire date (31-day period includes date of hire). If you are enrolling due to a mid-year qualified life event (e.g., marriage, birth), you must enroll within 31 days of your qualified event (31-day period includes date of qualifying life event).

Q. How do I enroll in health and welfare benefits?

A. Our system for enrolling in health and welfare benefits is Workday. You can access Workday at work or home. Workday is available from computers logged in to the Endeavor Health network without any additional steps. To complete your enrollment:

- Visit the [myEndeavor intranet](#).
- From the intranet homepage scroll down to Quick links and click on Workday
- Click on Single Sign-On Login

Note: Some voluntary benefits such as MetLife Pet Insurance, Chubb Supplemental Short-Term Disability, and Chubb Whole Life with Long Term Care are elected outside of Workday. You can view enrollment periods and instructions at benefitsgo.com/EndeavorHealth.

Q. I can't get logged into the Workday system from home, who do I contact?

A. Please contact your applicable IT Service Desk at:

- NorthShore **(847) 982-5170**
- Edward-Elmhurst Health **(630) 527-3346**
- Swedish Hospital **(773) 878-8200 x5050**
- Northwest Community Healthcare **(847) 618-4357**

Q. What happens if I don't enroll through Workday within the required timeline?

A. You *will not* have employee elected benefits (e.g., medical, dental, vision insurance).

Q. How can I print a confirmation statement of my benefit elections?

A. You will have the option to print a confirmation statement after you complete your enrollment in Workday.

Q. How can I confirm my elections after I enroll?

A. You can view your current elections in Workday. If you need detailed instructions, visit ServiceNow accessible on the [myEndeavor intranet](#). Once you are in ServiceNow, search "How to Print Your Current Benefit Elections in Workday" (article number KB0011150).

Q. Are there resources available to get benefits information, ask questions or get assistance enrolling?

A. Yes, there are several ways to get benefits information and get assistance with enrolling.

- Visit benefitsgo.com/EndeavorHealth for benefit details and get access to view and download the 2025 benefits guide.
- Meet ALEX, your personal benefits concierge! ALEX can provide you with a better understanding of the plans and simplify the decision-making process. Simply answer a few questions and ALEX will make plan recommendations based upon your responses. Visit benefitsgo.com/EndeavorHealth for the link to ALEX.
- Call the HR Service Center at **847-570-5111** Monday-Friday 8:00 a.m. – 5:00 p.m. (CST).

Benefit Eligibility

Q. What are the eligibility requirements for benefits?

A. Generally, you must be regularly scheduled to work 20 hours or more per week to be eligible for many of the health and welfare benefits. Eligibility requirements do vary depending on the specific benefit plan. You can view all the eligibility details for each specific benefit at benefitsgo.com/EndeavorHealth.

Regarding the Retirement Savings 401(k) plan, most employees are eligible for this benefit (e.g., full-time, part-time, Registry/PRN).

Q. What are the eligibility requirements to enroll my dependents (spouse/children)?

A. Eligible dependents include:

- Spouses/civil union partnership (whether same or different sex)
- Dependent children up to age 26 (coverage generally ends the last day of the month in which they turn 26)
- Your children over age 26 who are not able to support themselves due to a physical or mental disability

Medical Plans

Q. Where can I check if my medical provider or facility is in the Endeavor Health Network or Cigna Network?

A. You can find the links to the Endeavor Health Network and the Cigna Network at benefitsgo.com/EndeavorHealth or listed below:

- Endeavor Health Plan, click here for [Endeavor Health Network](#)
- High Deductible Health Plan and EPO, click here for [Cigna Network](#)
- All medical plans, click here for [How To Search for Cigna Behavioral Providers](#)
- You can also call Cigna at **800-233-7137**

Q. What medical providers and facilities are part of the Endeavor Health Network besides ours?

A. To ensure all of your clinical needs are met within the Endeavor Health Plan and Endeavor Health Network, Duly Health and Care, Cigna Behavioral Health Providers, pediatric care through Advocate providers and facilities, and adult specialty care at UChicago Medicine are all considered part of the Endeavor Health Network, meaning your out-of-pocket costs when utilizing these partner providers and facilities are covered at the Endeavor Health Network amounts (e.g., copays, coinsurance, deductibles).

Q. What if I can't find my provider in the plan network?

A. If you are not able to locate your provider in the Cigna online provider directory, you can call Cigna customer service 24/7 at **800-233-7137** or email EndeavorSupport@cignahealthcare.com to confirm if the provider is in the allowable network based on your specific medical plan enrollment. Cigna can also confirm additional providers that are in your plan network.

Q. What if I can't find the specialist or service in the Endeavor Health Network?

A. If you are enrolled in the Endeavor Health Plan and Cigna is unable to locate a specialist or the specialty service needed in the Endeavor Health Network, you may request an exception to see a Cigna participating provider. You will need to complete the Gap Exception Form and submit for review per the instructions on the form. You can access the form on [myCigna.com](https://mycigna.com) under Forms Center.

If you are enrolled in the High Deductible Health Plan or EPO plan, you have the choice of using a provider in the Cigna Open Access Plus Network. Contact Cigna customer service **800-233-7137** or email EndeavorSupport@cignahealthcare.com about the type of provider and general location needed and Cigna will provide available options.

If the services or specialty needed are not available within either the Endeavor Health Network or Cigna Open Access Plus Network, email EndeavorSupport@cignahealthcare.com and provide the type of provider or service you are needing and Cigna can assist you with potential alternatives.

Q. What if the in-network specialist I need does not have any openings for several months?

A. If you are enrolled in the Endeavor Health Plan and unable to see an Endeavor Health Network provider within a reasonable time, you may request an exception to see a Cigna participating provider. You will need to complete the Gap Exception Form and submit for review per the instructions on the form. You can access the form on [myCigna.com](https://mycigna.com) under Forms Center.

If you are enrolled in the High Deductible Health Plan or EPO plan, you have a choice of using a provider in the Endeavor Health Network or in the Cigna Open Access Plus Network. If you are unable to see an Endeavor Health Network provider within a reasonable time frame, Cigna can assist you in finding a provider in the Cigna Open Access Plus Network. Contact Cigna customer service **800-233-7137** or email EndeavorSupport@cignahealthcare.com about the type of provider and general location needed and Cigna will provide available options.

Q. The Endeavor Health Plan states it only covers care at Endeavor Health and select in-network partners unless it's a medical emergency. What's defined as a medical emergency?

A. Our medical plans follow legal regulations related to what is considered an "emergency", and much credence is given to our team members' best judgment in what they reasonably believe to be an emergency. Typically, it is an emergency if waiting to get care could be dangerous to your life or a part of your body. Examples could be a bad injury, sudden serious illness, severe pain and active labor.

Q. I enrolled in the Endeavor Health Plan and have a college student outside the provider area. What are my options if they are sick and it's not an emergency?

A. Your college student has the option to utilize virtual care through Cigna's partnership with MDLIVE. Care is available for many minor illnesses and injuries, such as infections, cold & flu, and sinus problems. Visit [myCigna.com](https://mycigna.com) or call MDLIVE at **888-726-3171** if your dependent needs to utilize virtual care.

Q. I received an incorrect bill from my physician, how can I get it fixed?

A. Contact Cigna at **800-233-7137** or email EndeavorSupport@cignahealthcare.com. Most issues are resolved within 48 hours. If you feel you are not receiving resolution through Cigna, contact the HR Service Center at **847-570-5111** Monday-Friday 8:00 a.m. – 5:00 p.m. (CST).

Q. I'm unable to locate physical therapy or Endeavor Health laboratory information through the myCigna.com provider finder, how can I locate this information?

A. If you need assistance with these services, contact Cigna customer service **800-233-7137** or email EndeavorSupport@cignahealthcare.com about the type of provider and general location needed and Cigna will provide available options.

Q. Are there fertility benefits under the Endeavor Health medical plans?

A. Yes, all three medical plans provide fertility benefits up to lifetime maximum of \$30,000.

Q. Will I receive a Cigna medical ID card?

A. If you are newly enrolled, Cigna will mail you a medical ID card.

You can also visit myCigna.com, to print a new medical ID card. If you need detailed instructions on how to print an ID card, access ServiceNow from the [myEndeavor intranet](http://myEndeavor.intranet). Once logged in to ServiceNow, search How to Print a Temporary Cigna ID Card (article number KB0011304).

Prescription Plan

Q. What pharmacies can I use to fill my prescriptions?

A. Short-term (30-day supply) prescriptions can be filled in-person at Endeavor Health outpatient pharmacies, CVS, and other Express Scripts (ESI) network pharmacies (including Walgreens, Costco, and most other retail pharmacies). Maintenance (90-day supply) prescriptions can be filled in-person at Endeavor Health or CVS retail pharmacies, or by mail from Skokie Hospital Outpatient Pharmacy (call **847-933-6890** to enroll for free mail-order delivery). It's important to know that although you can choose to use a CVS pharmacy, maintenance medications will cost you more at CVS than they will at an Endeavor Health Outpatient pharmacy or mail-order. Specialty medications must be filled at an Endeavor Health Outpatient Pharmacy, and some supply-related exceptions may apply. You can view pharmacy plan details at benefitsgo.com/EndeavorHealth.

Q. Where are the Endeavor Health outpatient pharmacies located and what are their hours?

A. You can view the pharmacy details at benefitsgo.com/EndeavorHealth or they are also listed below.

Endeavor Health Outpatient Pharmacy Directory:

Pharmacy Name	Address	Phone Number	Hours
Evanston Hospital Outpatient Pharmacy	2650 Ridge Ave #G949 Evanston, IL 60201	847-570-2210	9AM-6PM M-F 9AM-3PM Saturday Closed Sunday
Glenbrook Hospital Outpatient Pharmacy	2100 Pfingsten Rd #1092 Glenview, IL 60026	847-657-1785	9AM-6PM M-F 9AM-3PM Saturday Closed Sunday
Highland Park Hospital Outpatient Pharmacy	777 Park Ave West #1421 Highland Park, IL 60035	847-926-6560	9AM-5PM M-F Closed Saturday and Sunday
Skokie Hospital Outpatient Pharmacy and Mail Order	9650 Gross Point Rd #1901 Skokie, IL 60076	847-933-6890	9AM-6PM M-F 9AM-3PM Saturday Closed Sunday
Swedish Hospital Foster Medical Pavilion Outpatient Pharmacy	5215 N California Ave #F103 Chicago, IL 60625	773-989-6280	10AM-6PM M-F 9AM-3PM Saturday Closed Sunday
Swedish Hospital Galter Medical Pavilion Outpatient Pharmacy	5140 N California Ave #G105 Chicago, IL 60625	773-989-3980	9AM-6PM M-F 9AM-3PM Saturday Closed Sunday
Northwest Community Hospital Outpatient Pharmacy	800 W Central Rd #1100 Arlington Heights, IL 60005	847-618-7427	8AM-6PM M-F 10AM-3PM Saturday Closed Sunday
Edward Hospital Outpatient Pharmacy	100 Spalding Dr. #101 Naperville, IL 60540	630-527-5204	8AM-6PM M-F Closed Saturday and Sunday
Elmhurst Hospital Outpatient Pharmacy	155 E. Brush Hill Road #D1543 Elmhurst, IL 60126	331-221-3500	9AM-5PM M-F Closed Saturday and Sunday

Q. How can I set up mail order prescription delivery?

A. Please contact Skokie Outpatient Pharmacy at **847-933-6890** to set up free mail order delivery to your home if you live within the state of Illinois. If you live outside of Illinois, mail order prescription delivery for maintenance medications is not available. Outside the state of Illinois, you will need to utilize your nearest CVS retail pharmacy for maintenance medication fills for 90-day supplies.

Q. Where can I find the list of Express Scripts (ESI) network retail pharmacies?

A. Visit Express-Scripts.com/EndeavorHealth or call **877-787-8660**.

Flexible Spending Accounts

Q. What expenses are eligible for reimbursement under a Health Care Flexible Spending Account (FSA)?

A. Under a traditional Health Care FSA, eligible expenses include office visits, prescription drugs, and many over-the-counter products (e.g., allergy medicine, antacids, bandages, sunscreen, acne treatment patches). For a complete list, visit www.irs.gov and see Publication 502.

Q. How much of my unused Health Care Flexible Spending Account funds can I rollover into the next year?

A. You have until March 31, 2026, to reimburse yourself for claims incurred in 2025, and then any remaining funds up to \$640 will be rolled over into your 2026 FSA (Unused funds in your Dependent Care FSA do not carry over at the end of the plan year and are lost).

Q. I had to reduce my Dependent Care Flexible Spending Account annual contribution. Why did this occur?

A. The IRS generally allows an annual pre-tax contribution of up to \$5,000 to a Dependent Care Flexible Spending Account (FSA). However, employers are required to also complete non-discrimination testing to ensure FSA plans are favorable to *all participants*, not just “Highly Compensated Employees” as defined by the IRS.

Non-discrimination testing is generally completed within the second quarter of the plan year. You will be notified once testing is completed if you are affected by these rules.

It's important to note adjustments due to non-discrimination testing is considered a qualified mid-year life event, which provides a spouse, if applicable, the opportunity to add a Dependent Care FSA through their employer's plan. Additionally, you can still claim these expenses on your personal income taxes to gain the additional tax advantage. IRS rules do not allow us to provide this benefit above the allowable limit through pre-tax payroll deductions.

Health Savings Account

Q. How does the Health Savings Account (HSA) work?

A. An HSA works together with a High Deductible Health Plan. It enables you to pay for qualified health expenses tax-free. And, unlike a traditional Flexible Spending Account (FSA), unspent money isn't forfeited at the end of the year – it stays in your account. In fact, the money in your account is always yours to keep – even if you change medical plans, retire or leave Endeavor Health.

Q. Do I automatically receive the Health Savings Account (HSA) if I enroll in the Endeavor Health High Deductible Health Plan (HDHP)?

A. No, if you want the HSA you must elect it through Workday during your enrollment period. Additionally, you must meet HSA eligibility requirements:

- You must be enrolled in an HDHP medical plan.
- You cannot be covered by a noneligible medical plan (Tricare, Medicare, Spouse/Parent plan).
- You cannot be claimed as a tax dependent by some else.
- You cannot be covered by a Full Purpose Health Care Flexible Spending Account (FSA) used to pay for eligible medical, dental and vision expenses. However, you can be covered by a Limited Purpose Health Care FSA used to pay for eligible dental and vision expenses only.

Q. Can I enroll in the High Deductible Health Plan (HDHP) and not participate in a Health Savings Account (HSA)?

A. Yes, you can enroll in the HDHP and not participate in the HSA.

Q. How much can I contribute to a Health Savings Account (HSA)?

A. For 2025, the IRS maximum annual contribution is \$4,300 for employee only coverage and \$8,550 for employee + additional family members. You may be eligible to make an additional \$1,000 contribution if you turn 55 or older during the plan year.

Q. Does Endeavor Health contribute to my Health Savings Account (HSA)?

A. No, Endeavor Health does not make an employer contribution.

Q. I'm a new participant to the Health Savings Account (HSA), how do I open my HSA?

A. You need to be enrolled in the Endeavor Health High Deductible Health Plan medical option and enroll in the HSA through Workday. WEX, our third-party administrator, will then send you an enrollment confirmation email from no_reply@wexhealth.com. The email will provide you with a link to register for an online account through WEX, if you don't already have a WEX account. If you have any questions, contact WEX at **866-451-3399**.

Q. Can I have a Health Care Flexible Spending Account (FSA) and a Health Savings Account (HSA)?

A. You cannot have a Full Purpose Health Care FSA (used for eligible medical, dental and vision expenses) and have an HSA. However, you can have a Limited Purpose Health Care FSA (used for eligible dental and vision expenses only) and have an HSA.

Q. If I am enrolled in both the Health Savings Account (HSA) and Limited Purpose Health Care Flexible Spending Account (FSA), can I use both? How does this work with my WEX debit card?

A. If you are enrolled in both the HSA and the Limited Purpose Health Care FSA, you can use your benefits debit card for both accounts. Depending on your purchase type, the WEX Health, Inc. system will apply the appropriate savings account funds to the appropriate expense. For example, if you purchase prescription eyeglasses, the system will recognize your purchase as a vision expense and deduct the payment from your Limited Purpose Health Care FSA.

Q. Can I contribute to a Health Savings Account (HSA) if I am enrolled in Medicare?

A. No. If you are enrolled in Medicare (Medicare Part A, Part B, Part C, Part D and Medigap), you cannot contribute towards an HSA. You can use your previously accumulated HSA funds for qualified medical expenses and for other expenses as long as you have funds in your HSA. For a list of qualified medical expenses, see IRS Publication 502. For information regarding Health Savings Accounts and Medicare reference IRS Notice 2004-50.

Important: It is your responsibility to stop HSA contributions via the “Medicare life event” in Workday if you are enrolled in Medicare. If you are Medicare eligible but not enrolled in Medicare, you can contribute to an HSA.

Q. Can I use my Health Savings Account (HSA) when I turn 65?

A. When you turn 65, you can still use your HSA to pay for qualifying medical expenses penalty free regardless of whether or not you are enrolled in Medicare. Withdrawals taken for other purposes will be subject to income taxes. For a list of eligible medical expenses, see IRS Publication 502.

Q. If I am ineligible for a Health Savings Account (HSA) due to Medicare enrollment, can I use my Health Care Flexible Spending Account (FSA) for medical expenses?

A. No. If you are enrolled in a High Deductible Health Plan, your Health Care FSA becomes a Limited Purpose FSA (used for eligible dental and vision expense only) regardless of whether or not you are eligible to contribute to an HSA.

Dental and Vision

Q. Will MetLife mail a Dental and/or Vision ID card?

A. No, MetLife does not mail dental or vision ID cards. Most providers have access to MetLife's database to confirm your eligibility and coverage details. You can simply share the last 4 digits of your Social Security Number or your Workday employee ID to your provider. If you prefer to have an ID card, you can access a generic [digital dental ID card](#) and [vision ID card](#) at benefitsgo.com/EndeavorHealth. If you prefer an ID card with your name, visit metlife.com, then select "My Benefits" to print a card. Instructions on how to print an ID card can be accessed through ServiceNow from the [myEndeavor intranet](#). Once logged in to ServiceNow, search How to Print a Dental or Vision ID Card via Metlife website (article number KB0011308).

Q. How is ophthalmology covered in the Metlife Vision Network?

A. The vision network is designed to cover your optometry needs, which generally include vision tests and glasses or contact lens coverage. For medical related eye-care needs, typically performed by an ophthalmology specialist, you should utilize your medical plan, and locate available ophthalmologists through the www.myCigna.com provider finder directory.

Voluntary Benefits

Q. I need assistance with my voluntary benefits (e.g., MetLife Pet Insurance, Norton LifeLock, Chubb Supplemental Short-Term disability, Cigna Critical Illness), who do I contact?

A. Contact the applicable benefits carrier, phone numbers and websites are available under "Resources", "Contact Information" at benefitsgo.com/EndeavorHealth.

Q. Can I enroll in voluntary benefits at any time?

A. No, Chubb voluntary benefits (Supplemental Short-Term Disability, Life with Long Term Care) are only offered at annual open enrollment in the fall. While other voluntary benefits (e.g., Norton LifeLock, Cigna Critical Illness) are offered during open enrollment or if you become newly benefit eligible (e.g., new hire or qualified life event). MetLife Pet Insurance is available at any time.

Q. How do I enroll in voluntary benefits?

A. It depends on the carrier and benefit:

- Chubb Supplemental Short-Term Disability (available to part-time employees regularly scheduled 20-29 hours/week) and Life with Long Term Care is enrolled directly through the carrier during annual open enrollment in the fall.
- MetLife Pet Insurance is elected directly through the carrier. Visit benefitsgo.com/EndeavorHealth for details.
- All other voluntary benefit plans are elected through Workday during your applicable enrollment period.

Q. Are there pre-existing conditions for the voluntary Supplemental Short-Term Disability (available to employees regularly scheduled to work 20-29 hours/week) provided through Chubb?

A. Yes, the Chubb Supplemental Short-Term Disability plan includes a pre-existing condition clause. A pre-existing condition means a condition for which you received medical treatment, advice, consultation, diagnostic testing, care, services, or took prescribed drugs or medications within the 12 months preceding your coverage effective date.

Benefits will not be paid for any disability caused by, contributed by, or the result of a pre-existing condition which begins within the first 12 months following your coverage effective date. If you have a claim in the first 12 months, Chubb will look back 12 months to see if there was a pre-existing condition. The claim would not be paid if Chubb determines there is a pre-existing condition. Note: the pre-existing condition limitation is only applicable during your first 12 months of coverage.

Example 1: You became pregnant 10/1/2024 and enroll in Supplemental Short-Term Disability (STD) effective 1/1/2025, the STD claim for that birth would be denied. You would have to get pregnant after the plan goes into effect for the birth to be covered in 2025.

Example 2: You receive physical therapy for a knee injury 4/12/2024 and enroll in Supplemental Short-Term Disability (STD) 1/1/2025, and later need knee surgery in 12/15/2025, the STD claim may be denied based upon having received medical treatment on your knee in the 12 months prior to the 1/1/2025 coverage effective date.

Retirement Plan

Q. Am I eligible to contribute to the 401(k) Plan?

A. Every Endeavor Health employee is eligible to contribute to the 401(k) Plan. You can find more information about the Plan in ServiceNow, accessible via the [myEndeavor intranet](#).

Q. How do I enroll in the 401(k) Plan?

A. You can enroll in the 401(k) Plan by contacting Fidelity at **800-343-0860** or logging on to Fidelity NetBenefits® at www.netbenefits.com/EndeavorHealth.

You may contribute from 1% - 100% (in whole percentages) of your eligible pay as pretax, after-tax or Roth 401(k) contributions, or a combination, up to the annual IRS limits.

Q. How much can I contribute to the 401(k) Plan?

A. The IRS limits for the 2025 plan year are:

- \$23,500 for pre-tax and/or Roth after-tax contributions
- If you are age 50 through 59 or age 64 or older during a calendar year, you may make additional catch-up contributions on a pre-tax and/or Roth after-tax basis up to the IRS limit (\$7,500 for 2025). Starting in 2025, the SECURE 2.0 Act increased the catch-up contribution limit for participants age 60 - 63 in a given calendar year to help boost retirement savings. If you will be age 60, 61, 62, or 63 in 2025, you can contribute \$11,250 in catch-up contributions to the 401(k) Plan instead of \$7,500.
- \$25,500 for regular after-tax contributions. This is a separate IRS annual contribution limit.

The Endeavor Health payroll system has been designed to limit the amount that you may contribute on a regular after-tax basis each year (\$25,500 for 2025). This system limit will allow you to take advantage of the full pre-tax, Roth after-tax and match opportunity under the 401(k) Plan.

Q. As a new hire, I have already contributed to a qualified retirement plan (401k/403b) with my previous employer in 2025. Should I factor those contributions in when deciding what to defer in the Endeavor Health plan?

A. Yes, you will need to account for contributions to your prior employer's 401k/403b when determining what to defer in the Endeavor Health retirement plan to avoid exceeding the IRS limits.

Q. Is there a company matching contribution?

A. Endeavor Health will match 100% of the first 6% of your eligible earnings that you elect to contribute as pre-tax and/or Roth after-tax contributions to the 401(k) Plan each payroll period (including any catch-up contributions). To take advantage of the maximum company match, you will need to contribute at least 6% of your eligible pay each payroll period during the calendar year.

Endeavor Health does not match regular after-tax contributions.

The maximum company match is \$21,000 for 2025.

Q. I maxed out my 401(k) contributions earlier this year. Will I receive the maximum match amount?

A. All company matching contributions go through a year-end true-up calculation to ensure that the match is based on your total contributions made to the Endeavor Health 401(k) Plan during the year while you are eligible for a match, rather than only the pay periods in which you contributed.

Q. I over-contributed to my 401(k) Plan. What do I do?

A. Contact Fidelity at **800-343-0860** and request a Return of Excess (ROE) Contribution Form. Then complete the following:

- Create a ServiceNow Ticket and attach the completed Return of Excess Contribution Form.
- Attach copies of your employers' W-2s so that we can verify the requested excess contribution amount.

Members of the HR Retirement Team will review your documents and contact you with any follow up questions. Endeavor Health submits the final ROE to Fidelity for processing.

Q. Can I contribute to my 403(b)/TDA account?

A. You may no longer contribute to your 403(b)/TDA account.

In association with the Endeavor Health Retirement Program integration, the TDA Plan was amended to cease (freeze) contributions for all participants effective January 1, 2024.

You can still direct the investment of your account balance and designate beneficiaries by calling Fidelity at **800-343-0860** or logging on to Fidelity NetBenefits® at www.netbenefits.com/EndeavorHealth.

Q. I'm planning on retiring at the end of the year. What do I need to do to prepare for retirement?

A. Please refer to the 2025 Separation of Employment Overview, Article KB0011412, in ServiceNow.

Q. I just updated my address in Workday. When will Fidelity be updated?

A. Updates made in Workday are automatically sent to Fidelity bi-weekly on Thursdays, prior to paycheck week. It may take one to two pay periods to update your information, depending on when it was updated in Workday.

Q. How do I update my beneficiaries? Can I update at any time?

A. Yes, you can update your beneficiaries at any time. In fact, it's good that you review at least annually. Log on to Fidelity NetBenefits® and follow the online instructions. You can also text CARE to 343898 to get a link. You can also contact Fidelity at **800-343-0860**, Monday through Friday, to speak with a representative. They will be able to update your beneficiary's designation.

Q. Who do I contact regarding my terminated Pension Plan?

A. Contact Athene at **877-813-4240** or access Athene's website portal at www.lifeatworkportal.com/Athene.

Q. Is there any plan to offer early retirement packages to eligible employees?

A. No, there are not currently any plans to offer an early retirement package.

Tuition Assistance

Q. What are the eligibility requirements and reimbursement rates for Tuition Assistance?

A. Team members who are regularly scheduled to work a minimum of 20 hours per week are eligible to participate after 90 days of employment. Reimbursement levels and maximums vary depending upon your grade and employment status.

Reimbursement Levels:

- Full-Time regularly scheduled to work 36 or more hours/week: \$5,000/year
- Part-Time regularly scheduled to work 30-35 hours/week: \$3,750/year
- Part-Time regularly scheduled to work 20-29 hours/week: \$2,000/year

Grade Requirements:

- A+ - B- or pass will be paid at 100%, up to calendar year maximum
- C+ - C- will be paid at 80%, up to calendar year maximum
- D+ or below or fail will not be reimbursed

Q. How do I request tuition reimbursement?

A. Endeavor Health partners with Edcor, a comprehensive education benefit outsourcing and consulting services. You can apply for tuition reimbursement directly through Edcor at <https://endeavorhealth.tap.edcor.com/>.

Note: Manager approval is required prior to enrollment in class to be eligible for tuition reimbursement.

Paid Time Off (PTO)

Q. Why won't we have a system PTO plan when all of our other benefits are aligned?

A. To properly design and implement a system PTO plan, more time for analysis, plan design and change management are needed. We have more than 20 plans across the system. Given the scope of changes going on with organizational alignment, Workday implementation and combining our health and retirement benefits, more time is needed to thoughtfully review PTO. Please know an internal team along with outside benefits consultants are actively working on this analysis.

Q. What PTO plan will new team members join?

A. New team members joining an entity (NCH, SW, EEH, NorthShore hospitals) in an entity-specific position will become part of the PTO plan for that entity.

New team members in system roles where departments have team members from various entities will align with the entity and cost center of that position, per the departmental budget.

Q. Will Endeavor Health offer mental health days and professional development days without requiring the use of PTO?

A. There is a team from across the system currently working on PTO integration. They are reviewing all the current practices, as well as the current market trends, while considering our budgetary constraints. We will continue to offer time off programs that are competitive in the market. Whether time off for mental health or development will be separate items or included in the PTO bucket has not been determined yet.

Leave of Absence

Q. Who is our Leave of Absence administrator?

A. Reliance Matrix is our plan administrator. If you want to initiate a new Leave of Absence or need assistance with a current leave, contact Reliance Matrix at:

- General Questions: **800-351-7500**
- Claims: **877-550-4614**
- Claims: matrixabsence.com

Q. I applied for a Leave of Absence, why haven't I received a decision?

A. The most common reason for a delay in determining the approval for a Leave of Absence is missing documentation. Your physician must submit a Medical Certification form to Reliance Matrix to complete the review process and for Reliance Matrix to make a determination.

You can contact Reliance Matrix at the following phone number regarding the status of your leave request or you can create an account online to monitor the progress.

- Claims: **877-550-4614**
- Claims: matrixabsence.com

Limeade Wellbeing Program

Q. What is the Limeade Wellbeing Program

A. Limeade is an online program that takes a holistic approach to wellness with physical, emotional, financial and life/work harmony resources and tools. You can complete activities and challenges either through your desktop, laptop or Limeade's mobile app to enhance all areas of your life.

Q. Who is eligible to participate in Limeade Wellbeing?

A. All Endeavor Health employees (excludes seasonal and temporary workers). And spouses/civil union partners under the Illinois Religious Freedom Protection and Civil Union Act who are enrolled in an Endeavor Health Medical Plan.

Q. I'm a new Limeade participant, how do I register for an account?

A. To activate your account, download the Limeade ONE mobile app and search for "Endeavor Health" or visit endeavorhealth.limeade.com, then click "Sign Up" and follow the prompts.

Q. Can my spouse/civil union partner participate if I do not participate?

A. Yes, an eligible spouse/civil union partner enrolled in an Endeavor Health medical plan will have a separate participant account. This account is independent from the employee account.

Q. Are there any financial incentives for participating in the Limeade Wellbeing Program?

A. Yes, you can earn Wellbeing Rewards by reaching certain Limeade program levels.

- Level 1: Get Started – 1,000 points
- Level 2: Hit Your Stride – 3,000 cumulative points
- Level 3: Finish Line – 4,000 cumulative points

Q. What are the Wellbeing Rewards?

A. Each participant (eligible employee and/or eligible spouse/civil union partner) can earn financial rewards as you reach certain program levels. The rewards structure is as follows:

- Level 1: Get Started = \$100 cash reward paid through the employee's Endeavor Health paycheck, subject to taxes.
- Level 2: Hit Your Stride = \$70 cash reward paid through the employee's Endeavor Health paycheck, subject to taxes.
- Level 3: Finish Line = Entry into sweepstakes drawing for \$250 Amazon gift card (120 winners will be selected). Value of the gift card will be reported on the employee's Endeavor Health paycheck in December as imputed income for tax purposes

Q. Is there a deadline to earn Wellbeing Rewards?

A. Yes, you must complete a Limeade level no later than November 30th, 2025, to be eligible for the associated reward in 2025.

Q. How and when will I (and/or my spouse/civil union partner) receive Wellbeing Rewards?

A. You and an eligible spouse/civil union partner each earn rewards independently. Level 1 and Level 2 cash rewards will be issued through the employee's Endeavor Health paycheck. Generally, cash rewards are paid within 2-3 pay periods of completing a level. Level 3 sweepstakes winners will be emailed a \$250 Amazon gift card in December to the email address on file with Limeade

Q. Where can I get assistance with benefit questions?

A. There are several ways to get benefits information and get assistance with your questions.

- Visit benefitsgo.com/EndeavorHealth for benefit details and access to view and download the 2025 benefits guide.
- Meet ALEX, your personal benefits concierge! We've partnered with Jellyvision to offer ALEX, your interactive personal benefits assistant. ALEX can provide you with a better understanding of the plans and simplify the decision-making process. Visit benefitsgo.com/EndeavorHealth for the link to ALEX.
- Contact the carrier or plan administrator, you can view all the phone numbers and websites under "Resources", "Contact Information" at benefitsgo.com/EndeavorHealth.
- Call the HR Service Center at **847-570-5111** Monday-Friday 8:00 a.m. – 5:00 p.m. (CST) or access ServiceNow via the [myEndeavor intranet](#).

This document is intended to provide you with a general summary of the employee benefit programs offered by Endeavor Health. This document is only a summary of the terms and conditions of the benefit programs—it does not contain complete details about all plan provisions. Summary plan descriptions (SPDs) contain more information about each of these programs, and the actual plan documents contain the full and complete legal and governing terms of the plan's provision and benefits. To the extent that there is any conflict between this document and/or the SPD or actual plan documents, the terms of the actual plan provisions shall govern. Endeavor Health may modify or terminate any of the programs described herein at any time.