

2009 Parkland Benefits-At-A-Glance

The Benefits-At-A-Glance chart gives a snapshot of the benefits available to you as a Parkland Health & Hospital System employee. You automatically participate in some of the benefits when eligible because Parkland thinks it's important that you participate. You choose whether to participate in the optional benefits.

Benefit	How your Benefit Works at a Glance	Participation and How to Enroll	Who Pays
Immediately upon hire			
Retirement Income Plan for Full-time Employees	You automatically contribute 4.5% of pay; Parkland provides the balance.	Full-time employees are automatically enrolled. You name a beneficiary online through MyParkland.	You and Parkland
Mandatory Contributions for Part-time Employees	You automatically contribute 7.5% of pay.	Part-time employees are automatically enrolled. You name a beneficiary online through MyParkland.	You on a before-tax basis
Supplemental Retirement Plan	Contribute up to 75% of pay on a combined before-tax, Roth after-tax or after-tax basis, subject to IRS limits. After one year of service, Parkland matches \$1 for \$1 up to 6% of pay for full-time and part-time-with-benefits employees.	All employees choose whether to participate. You enroll and name a beneficiary via the plan's website or the plan's telephone hotline.	You and Parkland
Employee Assistance Program (EAP)	Confidential counseling to help when personal problems affect relationships at home and work	Available to all employees and their dependents. No enrollment is required.	Parkland
Medical – Parkland Employee Health Plan (PEHP)	Use providers from Parkland and Aetna Choice POS II networks as well as go to out-of-network providers. Opt out, or waive, if you have coverage elsewhere.	Full-time and part-time-with-benefits employees choose whether to participate. You may enroll yourself and eligible dependents online through MyParkland.	You on a before-tax basis and Parkland
Pharmacy for PEHP	Fill prescriptions at Parkland or through mail order (if written by a Parkland or UTSW/Aston provider), or Aetna retail pharmacies or through Aetna mail-order service.	Employees and their dependents who are covered by the PEHP	You and Parkland
Other Pharmacy	Fill prescriptions written by Parkland or UTSW/Aston providers at specified Parkland pharmacies.	Part-time employees not eligible for benefits	You on an after-tax basis
First day of the month following your date of hire (or on your date of hire if first day of the month)			
Dental	Dental Health Maintenance Organization (DHMO), or Preferred Provider Organization (PPO)	Full-time and part-time-with-benefits employees choose whether to participate. You may enroll yourself and eligible dependents online through MyParkland.	You on a before-tax basis
Vision	Provides vision benefits for routine eye care, including exams, frames and lenses, and contact lenses.	Full-time and part-time-with-benefits employees choose whether to participate. You may enroll yourself and eligible dependents online through MyParkland.	You on a before-tax basis
After 90 days of employment			
Flexible Spending Accounts (FSAs)	Health Care Spending Account Dependent Care Spending Account	All employees may choose whether to participate. You may enroll online through MyParkland.	You on a before-tax basis and Parkland
Supplemental Life Insurance	Choose up to 5½ times annual salary (maximum of \$500,000) for you as well as coverage for your dependents.	Full-time and part-time-with-benefits employees choose whether to participate. You may enroll yourself and eligible dependents online through MyParkland.	You on an after-tax basis
Long Term Care Insurance	Provides benefits when a chronic illness requires assistance in the home with day-to-day activities or special attention in a nursing home.	All employees may choose whether to participate. To enroll yourself and eligible dependents, download enrollment forms from the vendor's website.	You on an after-tax basis
Disability	After 42 consecutive days of disability, the Core Plan pays 50% of your biweekly earnings if you are disabled due to an illness or injury. You may buy up to a 60% benefit or buy down to a 14-day waiting period.	Full-time and part-time-with-benefits employees are automatically enrolled in the Core Plan. You may enroll online through MyParkland for the Buy-Up and Buy-Down plans.	Parkland for Core Plan; you (on a before-tax basis) for Buy-Up and Buy-Down Plans
Accidental Death & Dismemberment (AD&D) Insurance	\$20,000 - \$500,000 coverage for employees only, or \$20,000 - \$500,000 coverage for employees and lower coverage amounts for dependents	Full-time and part-time-with-benefits employees choose whether to participate. You may enroll yourself and eligible dependents online through MyParkland.	You on an after-tax basis
After 180 days of continuous service			
Basic Life Insurance	For full-time employees, 1½ times annual salary For part-time-with-benefits employees, ½ times annual salary Minimum benefit is \$20,000; maximum benefit is \$1 million.	Full-time and part-time-with-benefits employees are automatically enrolled. You name a beneficiary online through MyParkland.	Parkland

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Coverage and Cost

Your Eligible Dependents

The Benefits-At-A-Glance chart on page 1 of this brochure describes who may participate and how to enroll in your benefits. For most plans, if you enroll, you may cover yourself and eligible family members, as described in the Summary Plan Descriptions (posted on the Parkland Intranet) or plan documents.

You may choose to cover your eligible family members under the medical, dental, vision and AD&D plans that you choose for yourself. Eligible family members may also receive benefits for supplemental life insurance and long term care insurance. Eligible family members are automatically covered under the EAP.

Paying For Coverage

Parkland provides the full cost for the EAP, the core disability plan and basic life insurance, if you are eligible. Additionally, Parkland helps you save for retirement, and pays a large portion of the cost of your medical and pharmacy benefit programs.

Rates for optional benefits such as medical, dental, vision, and life and AD&D insurance are in this brochure and online at MyParkland, which is the employee self-service section of our PeopleSoft system. When paying on a before-tax basis, you save money as you pay for the benefit before federal income and Medicare taxes are deducted from your paycheck. Benefit coverages and deductions will begin based upon the effective date of your coverage in the plans.

Enrolling For Coverage

If you are eligible, you are automatically enrolled in the Retirement Income Plan, part-time mandatory contributions, EAP, core disability and basic life insurance. The optional benefits you choose when you enroll are in effect for the rest of the calendar year. If making elections during annual enrollment, your benefit choices become effective on Jan. 1 of the next calendar year.

Pages 5 and 6 of this brochure describe how to enroll for optional benefits and how to designate your beneficiary for the Retirement Income Plan, basic life insurance, supplemental life insurance and AD&D insurance through MyParkland. If you do not complete your online benefits enrollment by the deadline as a new hire or during annual enrollment, you may not enroll for benefits until the next annual enrollment unless you have a qualified change in status. Additionally, you will not be enrolled for coverage under any optional plan.

- As a new hire, you must enroll on MyParkland within 31 days of your hire date for coverage to begin when you become eligible.
- During annual enrollment, you must enroll on MyParkland by the due date specified by the Benefits Department.

If you wish to keep last year's coverage, you do not have to re-enroll to continue coverage from year to year, except for enrolling in the flexible spending accounts and selling PTO.

Each year that you want to opt out of medical coverage, you must have previously elected to waive coverage and provide during annual open enrollment documentation (such as confirmation statement or insurance ID card) showing that you have other group medical coverage. Otherwise, you will not receive the opt-out cash benefit.

To enroll for long term care insurance, log on to the website for the long term care insurance company (see the Benefit Resources list on the back cover of this brochure) to obtain an enrollment form from the provider of this benefit. To enroll for all other optional benefits except for the Supplemental Retirement Plan, log on to MyParkland. To enroll in the Supplemental Retirement Plan, log on to the plan's website or call the toll-free telephone hotline. Contact information is included on the Benefit Resources list on the back cover of this brochure. Other than the Supplemental Retirement Plan, you must enroll in all benefits within 31 days of your hire date. You may update your enrollment in the Supplemental Retirement Plan at any time.

If You Are Part-Time Without Benefits

Parkland offers a limited insurance benefits plan to part-time-without-benefits employees. See page 29 for details on the benefits and how to enroll.

Depending on the nature of your status change, you are allowed to add or drop a dependent, or elect to waive coverage through MyParkland. Any changes in coverage must be consistent with your change in life or employment status. Changes will be effective on the date of the status change, as long as you notify the Benefits Department within 31 days of the event.

Changing Your Coverage

Due to federal law, you may change your benefit elections during the year only if you have a change in life or employment status. Please review your enrollment carefully to be sure that your choices will fit your situation throughout the year.

This chart provides an overview of life and employment status changes and how you may change your benefits for your dependents. For changes such as birth, marriage or adoption, you will go to MyParkland to make the change and to the Benefits Department to provide the required documentation.

In the event that ...	Within 31 days of the event, you may ...		How to add or drop dependents
	Add	Drop	
Your Marital Status Changes			
• You get married or divorced	Yes	Yes	MyParkland
Your Dependent Eligibility Status Changes			
• Add a dependent through birth or adoption	Yes	No	MyParkland
• Add a dependent through legal guardianship	Yes	No	Benefits Department
• Your dependent dies or you lose legal guardianship	No	Yes	Benefits Department
Your Spouse's Coverage Changes			
• Your spouse's medical or dental coverage ends	Yes	No	Benefits Department
Your Spouse Changes Employment Status			
• Your spouse begins employment or changes from part-time to full-time	No	Yes	Benefits Department
• Your spouse involuntarily loses coverage, changes from full-time to part-time or terminates employment	Yes	No	Benefits Department
You Change Employment Status			
• You begin an unpaid leave of absence	No	Yes	MyParkland
• You change your employment status (for example, from part-time to full-time or full-time to part-time)*	No	Yes	MyParkland
• You become disabled and are receiving disability benefits	No	Yes	MyParkland

*You will also attend an orientation session on or near the date when your employment status changes.

Enrolling Newborns And Other Children

(Through adoption placement, adoption or guardianship)

As a reminder, you have up to 31 days after the birth, placement for adoption, adoption of your child(ren) or appointment as legal guardian to add the child(ren) to your medical plan, even if you already have dependent coverage. If you do not enroll your newly acquired child(ren) within this time period, you will not have the opportunity to enroll them for coverage until the next annual enrollment.

If You Leave Parkland

If your employment with Parkland ends, you will receive a letter as soon as administratively possible explaining how your benefits can continue in accordance with COBRA (Consolidated Omnibus Budget Reconciliation Act of 1985). If you are a new hire, letters explaining your rights and those of your dependents to continue group health coverage will be mailed to your home.

MyParkland ... How To Enroll

A Guide To Online Benefits Enrollment

Enrolling for benefits is quick, easy and convenient with Parkland's online enrollment system. From home and most work computers, you can enroll using the web-based application, MyParkland on our PeopleSoft Self-Service System. The enrollment system gives you a one-stop shop for enrolling, finding benefit summaries and forms and linking to vendor websites. Accessing the system and enrolling online is easy as 1-2-3!

Step 1 Access the PeopleSoft site from the Intranet or visit PeopleSoft from your home computer at <https://hrportal.pmh.org:8080/psp/phhr/?cmd=login>.

Step 2 Enter your:

- User ID, which is your Parkland employee ID number, and
- Default Password, which is phhs plus the last four digits of your Social Security number.

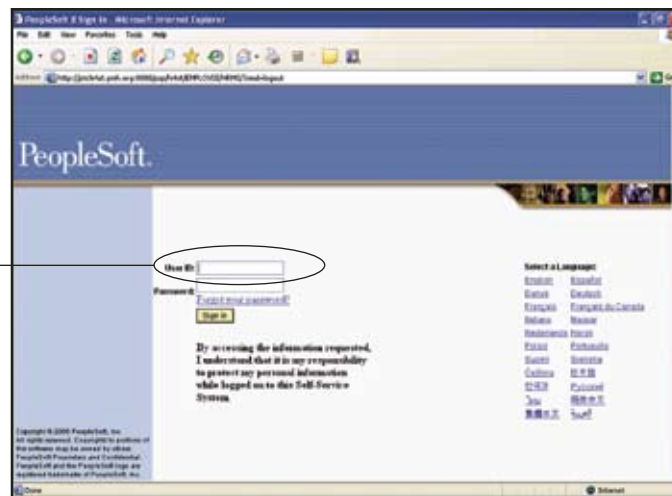
Step 3 After clicking Sign In, click on MyParkland / Benefits / Benefits Enrollment. Then, follow the prompts to enroll. After you have made your elections, click Submit. You will be directed to the Authorization Page. From this page, you will be asked to click Submit again to finalize your benefit choices.

Training Sessions

To access computer-based training on how to use MyParkland, log on to Parkland's Organizational Development website at www.phhstraining.org.

Log On To PeopleSoft

Enter your User ID, which is your Parkland employee number, and default password, which is phhs plus the last four digits of your Social Security number.

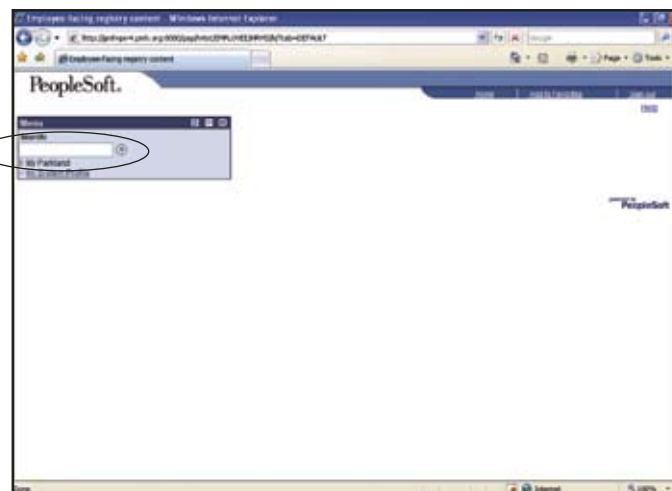


Navigate To MyParkland

MyParkland provides employees with self-service access to enroll in benefits, view current benefit elections and review or modify your personal information, such as home address.

To Enroll:

- Select the Benefits link.
- Select Benefits Enrollment to open your New Hire Enrollment record.



About MyParkland

You enroll for benefits through MyParkland. MyParkland provides employee self-service. This means that from MyParkland you can:

- Review or modify your personal information.
- View your Paid Time Off (PTO).
- View your paycheck information.

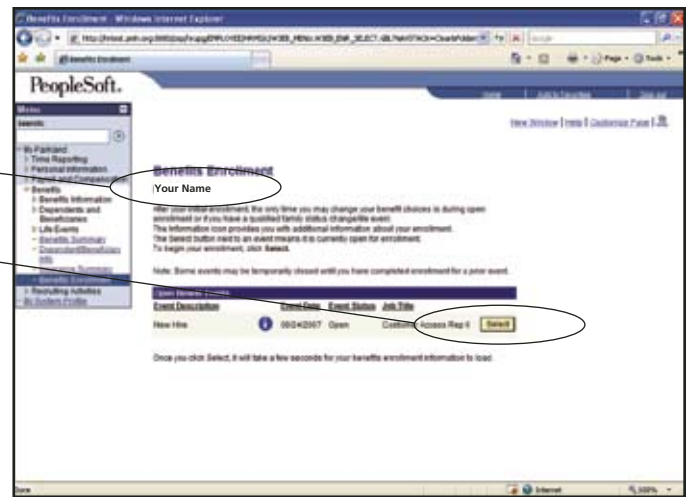
From the Benefits section, you can:

- Review your current benefits.
- Change your beneficiary/dependent information.
- Access benefit company information.
- Submit a life event change.
- Enroll for benefits.

PeopleSoft Benefits Enrollment

Your Name will display here.

Click the Select button to begin your enrollment.



PeopleSoft Benefits Enrollment (New Hire)

Your Name will display here.

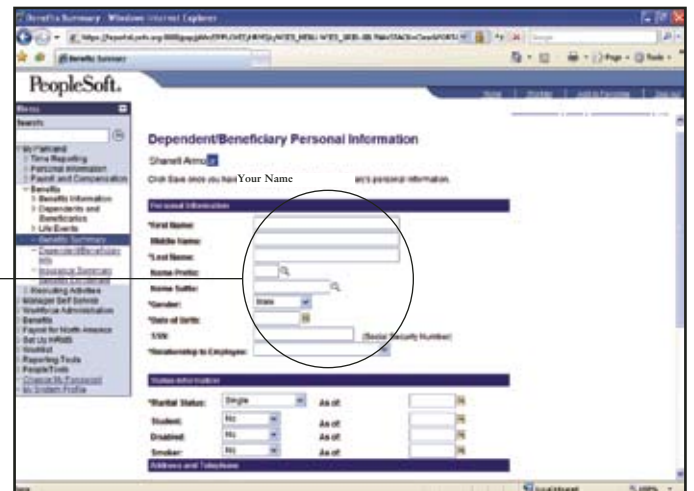
Click the EDIT button beside each Benefit Plan to enroll for coverage.



Dependent/Beneficiary Personal Information

To name your beneficiary for basic life, supplemental life, AD&D insurance, the Retirement Income Plan and Part-Time Mandatory Contributions:

- Enter personal information about your dependent/beneficiary. You must enter information in the required fields (see asterisks).
- Click Save after entering.
- Return to the appropriate benefit plan to enter the percentage each beneficiary will receive.



Medical Benefits

You and your eligible dependents may participate in the Parkland Employee Health Plan (PEHP) immediately upon hire. The Parkland Employee Health Plan includes three tiers of coverage. You may go to a doctor in any of these tiers.

Tier 1 Use Parkland providers/facilities – Employee Physician Office (EPO), Community Oriented Primary Care (COPC) centers, Parkland Memorial Hospital, Children’s Medical Center and The University of Texas Southwestern/Aston Center (UTSW/Aston) – to receive the highest level of benefits and pay the lowest copay.

Tier 2 Go to a Tier 2 provider/facility in Aetna’s Choice POS II Network to receive a Tier 2 benefit.

Tier 3 Use any provider/facility outside of the Tier 1 or Tier 2 networks, and receive the out-of-network Tier 3 benefit.

You may go to Parkland providers for some services, Aetna providers for other services and out of network for providers who are not in Tier 1 or 2.

For care using a Tier 1 provider, you pay:

- A \$0 copay for annual physicals, lab and X-ray services.
- A \$15 copay for office visits to a primary care physician (PCP).
- A \$50 copay for specialist care office visits.
- A \$50 copay for outpatient surgery at Parkland facilities.
- A \$25 copay for urgent care.
- A \$100 copay for a visit to the hospital emergency room.
- A \$100 copay for hospital admission to Parkland.
- No deductible.

For care using a Tier 2 provider, you pay:

- A \$0 copay for lab and X-ray services.
- A \$30 copay for office visits to a PCP.
- A \$50 copay for specialist care office visits.
- 30% coinsurance with a deductible for outpatient surgery and related services.
- A \$25 copay for urgent care.
- A \$100 copay for a visit to the hospital emergency room.
- 30% coinsurance with a deductible for a hospital admission.
- \$300 per person and \$900 per family deductible for coinsurance portions of Tier 2.

For care in Tier 3:

- After you have met a \$2,000 deductible (\$12,000 per family), the plan pays 60 percent of reasonable and customary (R&C) charges. You pay 40 percent of the remaining R&C charges plus any charges above the R&C amount.
- The plan pays 100 percent of covered expenses after you reach the plan’s maximum out-of-pocket expense (\$10,000 per person or \$25,000 per family).
- In most cases, you must file claims to receive benefits. Call the medical vendor on the Benefit Resources list on the back cover of this brochure to obtain information on filing claims.

Please Note

You are not required to choose a PCP and do not need a referral to see a specialist. However, a PCP gives you and your dependents a valuable resource and a personal health advocate. The amount you will pay for covered services will be based on the tier classification of your doctor – including PCPs or specialists. A Tier 1 provider directory can be found on the HR section of the Parkland Intranet site at <http://intranet.pmh.org>. You can locate Tier 2 providers at www.aetna.com.



The charts on pages 9 and 10 show how the PEHP pays benefits on covered services.



Take this simple step
To check the status of your health, take the first step. Complete the online Health Risk Assessment by logging on to www.simplestepslife.com.

Aetna Tools To Keep You Informed

Through Aetna, Parkland Employee Health Plan members have access to many convenient tools.

At www.aetna.com you will find information about PEHP/Aetna benefits for you and your dependents – online and at your convenience.

The Aetna Discount Program, which offers discounts on health and wellness programs such as Jenny Craig®, acupuncture, massage therapy, eye care, hearing care, fitness club memberships and more. Check out these programs at www.aetna.com.

The Aetna 24-Hour Informed Health® Line, where you can call 24 hours a day and speak with a registered nurse or listen to audio tapes on a variety of health topics.

The Aetna Health ConnectionsSM Program helps you manage symptoms related to asthma, diabetes, heart disease, lower back pain and chronic obstructive pulmonary disease (COPD). This program provides support for more than 30 chronic conditions through information and one-on-one counseling. To learn more about how this disease management program works, visit www.aetna.com.

Simple Steps To A Healthier Life® is a personalized online wellness program. Simple Steps To A Healthier Life offers resources to help you eat right, get in shape, lose weight, cope better with stress and much more. Begin by completing a secure online **Health Risk Assessment**. Once you complete your assessment, you will receive a personalized Action Plan with convenient online Healthy Living Programs recommended just for you. Go to www.simplestepslife.com to access the assessment.

Access Your Personal Benefits Information. Your Secure Aetna NavigatorSM member website is available 24 hours a day, 7 days a week at www.aetna.com, where you can:

- Find claim status and details
- Find costs of tests and medical visits
- Search for a doctor based on your individual plan
- Get fund and account balances
- Do much more ... and it's all secure!

For details on these tools, log on to www.aetna.com or contact them at the numbers shown on the Benefit Resources list on the back cover of this brochure.

Utilization Review

To help you determine if the services you receive are a covered benefit, Aetna performs utilization review and provides pre-authorization on certain services, including:

Predetermination of Benefits – Your physician may request a predetermination of benefits prior to delivery of services to confirm whether a procedure or treatment is covered. This process should be requested from Aetna prior to receiving any service that you think might not be covered to determine eligibility, covered services, benefits and any limits. For more information, your physician should call 1.888.632.3862.

Hospital Pre-Admission Certification – Requests for non-emergency hospital stays other than a maternity stay must be approved in advance. Precertification is not required for a maternity stay of 48 hours for vaginal deliveries or 96 hours for cesarean sections.

Continued Stay Review – In order to stay in the hospital beyond the number of days approved during the precertification process, your hospital stay will be subject to a continued stay review by the medical plan administrator.

Case Management – This service is designed to help guide your care if your medical condition puts you at risk for medical complications, or if you need rehabilitation or additional health care support. The program strives to balance quality and cost-effective care while maximizing your quality of life.

Please Note Your doctor will coordinate precertification if you are seeing a Tier 1 or Tier 2 provider. You are responsible for obtaining approval for a hospital admission if you see a Tier 3 provider. If you do not use the precertification or continued stay review programs when you are hospitalized, you may pay a penalty or have a reduction in benefits.

Covered Services

The charts on pages 9 and 10 show what you pay when you receive Tier 1, Tier 2 and Tier 3 covered services through the Parkland Employee Health Plan. Once you reach the out-of-pocket maximum for Tiers 2 and 3, the plan pays 100 percent of eligible charges for the remainder of the plan year (except for mental health which will continue to be paid at the levels shown in the chart).

Service	Tier 1 Parkland Network You Pay	Tier 2 Aetna's Choice POS II Network You Pay	Tier 3 Out of Network You Pay
Calendar-year Deductible	None	\$300/person (applies to coinsurance only) \$900/family (applies to coinsurance only)	\$2,000/person \$12,000/person
Physician Services (<i>Checkups and immunizations are covered under all Tiers</i>)			
• Primary care office visit	\$15 copay/visit	\$30 copay/visit	40% coinsurance after deductible
• Specialist care office visit	\$50 copay/visit	\$50 copay/visit	40% coinsurance after deductible
Laboratory and X-ray Services	\$0 copay	\$0 copay	40% coinsurance after deductible
Maternity Care			
• Initial visit to confirm pregnancy	\$15 or \$50 (depending upon provider)	\$30 or \$50 (depending upon provider)	40% coinsurance after deductible
• Subsequent physician services including prenatal, delivery and postnatal	\$0 copay	30% coinsurance after deductible	40% coinsurance after deductible
• Hospitalization (per admission)	\$100 copay	30% coinsurance after deductible	40% coinsurance after deductible
Emergency Services (<i>Actual emergency always covered</i>)			
• Hospital emergency room visit (not charged if admitted)	\$100 copay/visit	(if not a true emergency, 30% coinsurance after deductible) \$100 copay/visit	(if not a true emergency, 40% coinsurance after deductible) \$100 copay/visit, no deductible
• Urgent care/outpatient facility	\$25 copay/visit	\$25 copay/visit	\$25 copay/visit, no deductible
• Ground ambulance services (for emergencies only)	\$0 copay	\$0 copay	\$0 copay
Hospital Admission (<i>All services must be pre-authorized</i>)			
• For each admission	\$100 copay	30% coinsurance after deductible	40% coinsurance after deductible
Durable Medical Equipment	\$0 copay	\$0 copay	40% coinsurance after deductible
Skilled Nursing Care In Facility* (<i>All services must be pre-authorized</i>)			
• Up to 60 days/year instead of acute hospital care	\$0 copay	\$0 copay	40% coinsurance after deductible
Home Health Care			
• Home nursing visits prescribed by a doctor	\$0 copay/visit	\$0 copay/visit	40% coinsurance after deductible
Outpatient Surgical Procedures			
• In physician's office	\$15 or \$50 copay (depending upon provider)	\$30 or \$50 copay (depending upon provider)	40% coinsurance after deductible
• In hospital (day surgery)	\$50 copay/procedure (at Parkland facilities only)	30% coinsurance after deductible	40% coinsurance after deductible

*60 days combined maximum per calendar year for skilled nursing facility, rehabilitation (inpatient and outpatient) and sub-acute facilities

Please Note To cover dependents between the ages of 19 and 25, you must be enrolled in the PEHP and your dependent must be a legal tax dependent and a part-time or full-time post-secondary student. Payment on claims will be held until proof of student status is provided to Aetna.

Service	Tier 1	Tier 2	Tier 3
	Parkland Network – You Pay	Aetna’s Choice POS II Network – You Pay	Out of Network – You Pay
Rehabilitation Services*			
• Outpatient (up to 60 days/year)	\$15 copay/visit	\$30 or \$50 copay/visit (depending upon provider)	40% coinsurance after deductible
• Inpatient (up to 60 days/year)	\$0 copay	\$0 copay	40% coinsurance after deductible
Hospice Care (If pre-authorized)	\$0 copay	\$0 copay	40% coinsurance after deductible
Mental Health Services (All services must be pre-authorized)			
• Outpatient (up to 30 visits/year)	\$15 copay/visit	\$15 copay/visit	40% coinsurance after deductible
• Inpatient (up to 25 days/year)	\$100 copay/admission	\$100 copay/admission	40% coinsurance after deductible
Substance Abuse Services (All services must be pre-authorized)			
• Outpatient	\$15 copay/visit	\$15 copay/visit	40% coinsurance after deductible
• Inpatient	\$100 copay/admission	\$100 copay/admission	40% coinsurance after deductible
Family Planning Services			(All services must be pre-authorized)
• Family planning counseling	\$15 or \$50 copay/visit	\$30 or \$50 copay/visit	40% coinsurance after deductible
• Infertility testing and treatment	\$15 or \$50 copay/visit	\$30 or \$50 copay/visit	40% coinsurance after deductible
• Sterilization procedure	\$15 or \$50 copay/visit or \$100 if admitted	\$30 or \$50 copay/visit or 30% coinsurance after deductible if admitted	40% coinsurance after deductible
• Medically necessary pregnancy termination			
– Outpatient	\$50 copay/visit	30% coinsurance after deductible	40% coinsurance after deductible
– Inpatient	\$100 copay/admission	30% coinsurance after deductible	40% coinsurance after deductible
Routine Health Assessments			
• Routine physicals, including well adult checkups, well woman care and well baby/well child care	\$0 copay/visit	\$30 or \$50 copay/visit (depending upon provider)	40% coinsurance after deductible
• Routine adult/child lab and x-rays	Included in above copay if billed by separate facility	Included in above copay if billed by separate facility	40% coinsurance after deductible
• Annual mammogram, PSA (prostate-specific antigen) and pap smear	Included in above copay if billed by a separate facility	Included in above copay if billed by a separate facility	40% coinsurance after deductible
Immunizations for You and Your Eligible Dependents	\$0 copay/visit	\$0 copay/visit	40% coinsurance after deductible
Hearing Aids (Up to \$2,000 every 36 months for each device)	\$0 copay	\$0 copay	40% coinsurance after deductible
Hearing and Speech Screenings (1 exam per year)	\$15 or \$50 copay/screening (depending upon provider)	\$30 or \$50 copay/screening (depending upon provider)	40% coinsurance after deductible
Allergy Testing and Evaluation			
• Testing	\$15 or \$50 copay/visit	\$30 or \$50 copay/visit	40% coinsurance after deductible
• Other physician visits	\$15 or \$50 copay/visit	\$30 or \$50 copay/visit	40% coinsurance after deductible
Calendar Year Out-of-pocket (Does not include deductible, copays, amounts over plan limits expenses, and penalties)	Does not apply	After you pay: \$5,000/person or \$15,000/family plan pays 100% or covered expenses, excluding mental health	After you pay: \$10,000/person or \$25,000/family plan pays 100% of covered excluding mental health
Lifetime Maximum	Unlimited	\$1,000,000	\$1,000,000

*60 days combined maximum per calendar year for skilled nursing facility, rehabilitation (inpatient and outpatient) and sub-acute facilities

Please Note The PEPH offers comprehensive coverage. However, some services such as cosmetic surgery, dental care, exams for contact lenses and glasses, and health club memberships are not covered. For a list of covered services, please refer to the Summary of Benefits posted on the HR Intranet site at <http://intranet.pmh.org>.

Pharmacy Benefits

If you enroll in the PEHP, the type of provider that writes your prescription will determine where you can fill your prescription. You have the convenience of going to the Central Pharmacy, a COPC pharmacy or a retail pharmacy in the Aetna network. For medications that you take on an ongoing basis, you may use the Parkland or Aetna mail-order service to fill your prescriptions.

Tier of Provider Writing Prescription	You may fill your prescriptions at	
	Central Pharmacy, COPC Pharmacy or Parkland Mail Order	Retail Pharmacies in Aetna Network or Aetna Mail Order
Tier 1	Yes	Yes
Tier 2	No	Yes
Tier 3	No	Yes

If you work part-time and are not eligible for benefits, you may fill prescriptions for you only at the Central or a COPC Pharmacy if a Parkland or UTSW/Aston provider writes the prescription. You will pay the full cost of the prescription plus a \$10 fee (minimum of \$25 for formulary and \$45 for non-formulary) for up to a 30-day supply.

Amount PEHP Members Pay for Prescription Drugs

Tier of Provider	Pharmacies	Mail Order
	For up to a 30-day supply, you pay:	For up to a 90-day supply, you pay:
Tier 1	\$10 formulary (generic and brand-name) \$25 approved non-formulary \$45 unapproved non-formulary	\$20 formulary (generic and brand-name) \$50 approved non-formulary \$90 unapproved non-formulary
Tier 2	\$15 generic \$40 preferred brand-name \$60 non-preferred brand-name	\$30 generic \$80 preferred brand-name \$120 non-preferred brand-name
Tier 3	Covered as Tier 2 benefit if using Aetna's pharmacy network to fill prescriptions. Otherwise, covered at 60%/40% after deductible.	Covered if using Parkland's or Aetna's mail-order service

Mail-Order Service (Parkland and Aetna Rx Home Delivery)

Use the mail-order service to fill prescriptions that you are taking on an ongoing basis. With mail order, you can receive up to a 90-day supply of your medicine; you save one 30-day supply copay. The first time you fill a prescription through the mail-order service, it's a good idea to ask for two prescriptions – one that you can fill immediately and one that you can fill through the mail-order service.

- For Parkland mail-order service (prescriptions written by a Tier 1 provider), call 214.590.1400.
- For Aetna Rx Home Delivery, call 1.866.612.3862.

Generic vs. Brand-Name Drugs In All Tiers

Generic drugs contain the same active ingredients and are subject to the same standards as brand-name drugs with respect to quality, strength and purity. Using a generic drug offers the lowest cost option, regardless of where you fill your prescription. To save money, ask your doctor to prescribe a generic, when it is available. Generics can cost 25 to 75 percent less than brand-name drugs yet are equally as effective.

In The Event Of An Emergency

If you are enrolled in the PEHP or if you are a part-time employee without benefits, you may fill emergency prescriptions written by a Parkland provider (Tier 1) only at the Central Pharmacy in the basement of Parkland when other approved pharmacies are closed. Emergency prescriptions include new prescriptions from an emergency room or acute care physician. Refills are not emergency prescriptions. If you are enrolled in the PEHP, you may also fill your prescriptions written by a Parkland or UTSW/Aston provider at a Tier 2 retail pharmacy.

Medicare and Prescription Drug Coverage

If you or your dependents have Medicare or will become eligible for Medicare in the next 12 months, a federal law provides prescription drug coverage through Medicare Part D. For details, please see the Creditable Coverage Notice on the back page of this brochure.

Formulary vs. Non-formulary in Tier 1

A formulary is a list of medications approved by the Pharmacy & Therapeutics Committee of Parkland. The committee is made up of members of Parkland's medical staff. The formulary includes medications proven to be safe, effective and affordable for certain diseases and conditions.

Non-formulary medications are brand and generic medications not listed on the formulary. Procedures are in place to give you access to non-formulary medications when medically necessary. There are two types of non-formulary medications – approved and unapproved. To receive an approved non-formulary medication, ask your doctor to fill out a non-formulary request form along with the original prescription. A pharmacy adviser from the Drug Information Center will review your request for an approved non-formulary medication.

- If approved, your prescription will be filled at the approved non-formulary cost.
- If not approved, your prescription will be filled at the unapproved non-formulary cost.

Preferred vs. Non-preferred in Tier 2

Aetna divides medications into three categories:

Generic – As discussed on the previous page, using generic drugs saves you – and Parkland – money. Generic drugs must meet the same FDA standards as brand-name drugs and work as well as brand-name drugs.

Preferred Brand-Name – This category includes brand-name drugs with no generic equivalent that are included on the Aetna Preferred Drug List. The preferred drug list is similar to the Parkland formulary. The Aetna Pharmacy and Therapeutics Committee, made up of physicians and pharmacists, develops the list and updates it periodically.

Non-Preferred Brand-Name – This category includes brand-name drugs that have generic equivalents, or another brand-name option on the preferred drug list. You will pay more money to fill a prescription from this list. But you and your doctor may decide that a medication in this category is best for you.

Your 2009 Biweekly Payroll Deductions For Medical

Coverage Category	Parkland Employee Health Plan with Aetna Network			
	Full-time Employees Annual Wages under \$20,000	Full-time Employees Annual Wages \$20,000 - \$29,000	Full-time Employees Annual Wages over \$29,000	Part-time Employees with Benefits
Employee Only	\$13.18	\$23.07	\$32.96	\$64.30
Employee plus Children	\$40.78	\$71.36	\$101.95	\$179.03
Employee plus Spouse	\$46.89	\$82.06	\$117.23	\$206.16
Employee plus Family	\$65.93	\$115.38	\$164.82	\$290.19

Waive Medical Coverage

If you are covered under another group medical plan, Parkland will pay you to opt out of, or waive, medical coverage. You may elect to waive medical coverage as a new hire, as a result of a qualified status change or during annual enrollment. Waiving coverage means you will not have medical coverage through Parkland.

Each year you must provide the Benefits Department proof of other group coverage if you want to receive your opt-out cash benefit. "Proof" will be documentation that shows you have other coverage such as a confirmation statement or insurance ID card. After providing your proof, Parkland will pay full-time and part-time-with-benefits employees \$46.15 per pay period (up to \$1,200 per year). You may not receive your per-pay-period cash benefit until proof is provided. Therefore, the total cash benefit may be less than the amount shown above.

Dental Benefits

For dental health benefits, you choose between two plans and can start participating on the first of the month after your date of hire (or on the first of the month if you are hired on the first). Both plans cover preventive, basic, major and orthodontia (limited to dependent children under age 19 for the PPO).

Dental Health Maintenance Organization (DHMO) provides services only through the DHMO network of dentists. For visits to your general or specialty dentist in the DHMO network, you pay a copay from the benefits schedule. There are no deductibles, no waiting period, no plan maximums and no claims to file. If you require dental services not provided by your DHMO network general dentist, you will be referred to a DHMO network specialty dentist.

Preferred Provider Organization (PPO) gives you the freedom to see any dentist but receive a greater benefit if you use a PPO network provider. With this plan, you pay a \$50 deductible per person (maximum \$150/family) before the plan begins covering services. The plan pays a percentage of reasonable and customary charges, depending on the type of service you receive. You can receive up to \$2,000 in benefits per participant each calendar year. This chart provides an overview of how the PPO pays benefits.

Your 2009 Biweekly Payroll Deductions For Dental

Coverage Category	Delta Dental	
	DHMO	PPO
Employee Only	\$4.59	\$13.77
Employee plus Children	\$9.76	\$37.17
Employee plus Spouse	\$8.89	\$26.51
Employee plus Family	\$12.76	\$46.08

PPO Deductible

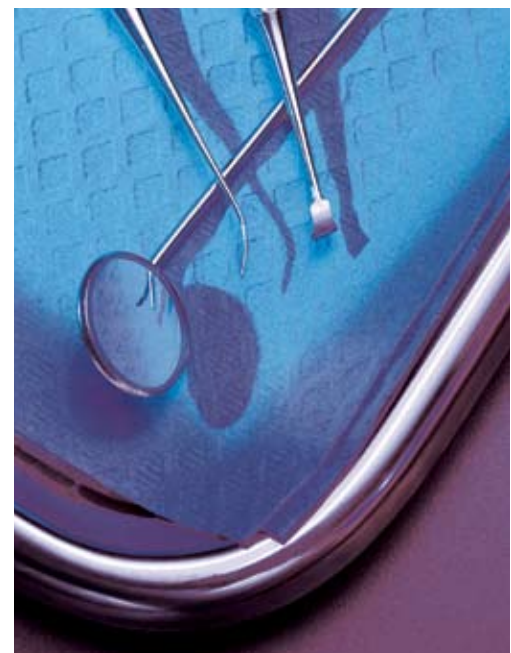
PPO Feature	Preventive	Basic	Major	Orthodontia (for children under age 19)
Annual Deductible	\$0	\$50 per person \$150 per family	\$50 per person \$150 per family	\$0
Coinsurance				
• Plan pays	100%	80%	50%	50%
• You pay	0%	20%	50%	50%
Annual Maximum	\$2,000 per year per covered person	\$2,000 per year per covered person	\$2,000 per year per covered person	\$1,000 lifetime max

For More Information
Dental information, including a summary of each plan (with the various types of covered services defined) and a benefits schedule, is available on the Parkland Intranet. You may access a provider directory on the dental vendor's website. For information on how to contact the dental provider, see the Benefit Resources list on the back cover of this brochure.

Which Plan is Best for You

That's up to you. To help you decide, refer to the comparison chart.

	DHMO	PPO
Choice of dentist	Choose a DHMO network general dentist for each family member. See a DHMO network specialty dentist with a referral from your general dentist.	Maximize your benefits through discounts on covered and non-covered services by using a PPO network dentist. Use any dentist, including specialists. If your dentist is not from the PPO network, benefits will be based on reasonable and customary (R&C) charges. You will pay 100% of the amounts greater than R&C charges.
Orthodontia (braces)	For adults and children	For children only (under age 19)
Waiting periods	None	12 months for major services 24 months for orthodontia
Annual deductibles	No deductibles	\$50/person (maximum of \$150/family)
What you pay	For covered services, a specific copay amount from the copayment schedule	A deductible and a percent of charges (up to a maximum covered expenses). See PPO Deductible chart on page 15.
Benefit maximums	No annual or lifetime maximums	\$2,000 annual maximum for routine, basic and major services \$1,000 lifetime maximum for orthodontia (for dependent children under age 19)
Claims and payment procedures	<p>For DMHO providers</p> <ul style="list-style-type: none"> You file no claims You pay a copay from the benefits schedule when services are performed. The schedule is on the Parkland Intranet 	<p>For PPO network providers</p> <ul style="list-style-type: none"> Your dentist files claims. You pay discounted rates. <p>For non-network providers</p> <ul style="list-style-type: none"> You are responsible for filing claims. You pay full amount of services when performed and receive reimbursement from plan.



Vision Care Benefits

For vision benefits, you can start participating on the first of the month after your date of hire (or on the first if your date of hire is the first). The vision plan provides benefits for routine eye care, including comprehensive eye exams, frames and lenses and contact lenses. When you want vision care, you may choose to see a:

Network provider, who will contact the network for authorization of benefits. There are no claims to file. You pay the copay or allowance for the exam and materials. The plan pays the balance for covered benefits.

Non-network provider. Before receiving services, you must obtain an authorization number from the vision care provider. After receiving services, you pay all charges at the time of your appointment. Then, submit your original itemized receipt along with your authorization number to the vision care provider for reimbursement as shown in the chart.

The following chart shows benefits you receive based on the provider you use.

	If you use a network provider, you pay ...	If you use a non-network provider, you pay ...
Eye Exams (every 12 months)		
• Ophthalmologist	\$10 copay	Up to \$42
• Optometrist	\$10 copay	Up to \$37
Eyeglasses (every 12 months)*		
• Single	\$10 copay (per pair)	Up to \$32 (per pair)
• Bifocal	\$10 copay (per pair)	Up to \$46 (per pair)
• Trifocal	\$10 copay (per pair)	Up to \$61 (per pair)
• Lenticular	\$10 copay (per pair)	Up to \$84 (per pair)
Frames (every 24 months)*	\$10 copay on frames up to \$100	Up to \$48
Contact Lenses (in lieu of eyeglasses and frames)*		
• Medically necessary	No copay. Plan pays 100%	\$210 allowance
• Elective	Any charges above \$120 allowance for contacts and \$35 fitting exams	Up to \$100

* Once in a 12-month period, you may receive benefits for eyeglass lenses or contact lenses, but not both. Once in a 24-month period, you may receive benefits for frames.

Your 2009 Biweekly Payroll Deductions For Dental

Coverage Category	Vision
Employee Only	\$3.42
Employee plus Children	\$5.53
Employee plus Spouse	\$7.35
Employee plus Family	\$10.08



Life Insurance

Parkland offers two types of life insurance coverage – Basic and Supplemental.

Basic Life Insurance

After six months of service, Parkland pays the full cost to provide you with Basic Life Insurance.

Full-Time Employees – Benefit is equal to 1½ times annual salary.

Part-Time-with-Benefits Employees – Benefit is equal to ½ of your annual salary. Minimum benefit is \$20,000; maximum benefit is \$1 million.

Supplemental Life Insurance

If you want additional life insurance, Parkland offers Supplemental Life Insurance after 90 days of service. You pay the full cost on an after-tax basis.

You may choose the following coverage amounts for yourself and eligible dependents:

For You – Up to 5½ times annual salary (up to a combined maximum of \$1.5 million for Basic and Supplemental).

For Your Spouse – Up to the lesser of \$100,000 or 50 percent of your coverage.

For Your Dependent Children – \$5,000, \$10,000, \$15,000 or \$20,000 per child.

As a new hire, evidence of insurability is required on coverage amounts over two times salary for you and \$30,000 for your spouse. Unless otherwise announced during open enrollment, you will need to provide evidence of insurability in order to increase your coverage after your initial enrollment.

If you leave Parkland, you may continue your coverage under an individual policy with the same benefits and provisions as under your group policy. Payment of premiums will change from payroll deduction to having your premiums billed directly to you.

Eligibility guidelines and coverage provisions for Supplemental Life Insurance are outlined in the Summary Plan Description. Rate information, a Summary Plan Description and an evidence of insurability form are available online at MyParkland.

2009 Life Insurance Rates

Supplemental Term Life for you and your spouse	
Age Range	Monthly Rate/\$1,000
Age less than 25	\$0.05
Ages 25 - 29	\$0.06
Ages 30 - 34	\$0.08
Ages 35 - 39	\$0.09
Ages 40 - 44	\$0.10
Ages 45 - 49	\$0.16
Ages 50 - 54	\$0.24
Ages 55 - 59	\$0.44
Ages 60 - 64	\$0.68
Ages 65 - 69	\$1.31
Ages 70+	\$2.13

For your child(ren) up to age 25	
Coverage Amount	Monthly Cost
\$5,000	\$0.70
\$10,000	\$1.40
\$15,000	\$2.10
\$20,000	\$2.80

Naming A Beneficiary

Your beneficiary is the person(s) who will receive your benefit in the event of your death.

- For Basic Life, go online to MyParkland to name your beneficiary (see page 6).

- For Supplemental Life and AD&D, go online to MyParkland to name your beneficiary and to enroll (see page 6). You must enroll within 31 days of your hire date. Coverage will begin after 90 days of employment. When you name your beneficiary, you will allocate the percentage of the benefit that each beneficiary should receive.

Accidental Death & Dismemberment (AD&D) Insurance

If you want additional protection above and beyond the life insurance coverage, you can buy accidental death & dismemberment (AD&D) insurance. You pay the full cost of this benefit with after-tax payroll deductions. This coverage, available to full-time and part-time-with-benefits employees after 90 days of service, pays a benefit if you die or are injured in an accident. You can buy two levels of coverage:

- Employee only
- Employee plus family coverage

Either plan will cover you from \$20,000 to \$500,000 (in \$10,000 increments). However, the amount cannot be larger than 10 times your base pay. If you choose to cover your family, the amount of coverage on your spouse or children will be a percentage of your coverage as shown in the chart below:

Family Member	Spouse	Child(ren)
Spouse only	60% of your coverage	N/A
Child(ren) only	N/A	20% of your coverage up to \$50,000
Spouse and child(ren)	50% of your coverage	15% of your coverage up to \$50,000

Basic Life Insurance

Coverage Amount	Bi-weekly Payroll Deductions	
	Employee Only	Employee and Family
\$20,000	\$0.21	\$0.32
\$30,000	\$0.32	\$0.48
\$40,000	\$0.42	\$0.64
\$50,000	\$0.53	\$0.80
\$60,000	\$0.63	\$0.96
\$70,000	\$0.74	\$1.12
\$80,000	\$0.84	\$1.28
\$90,000	\$0.95	\$1.44
\$100,000	\$1.05	\$1.60
\$150,000	\$1.58	\$2.40
\$200,000	\$2.10	\$3.20
\$250,000	\$2.63	\$4.00
\$300,000	\$3.15	\$4.80
\$350,000	\$3.68	\$5.60
\$400,000	\$4.20	\$6.40
\$450,000	\$4.73	\$7.20
\$500,000	\$5.25	\$8.00

What the Plan Pays

Benefit	For Loss of
100%	<ul style="list-style-type: none"> • Both hands or both feet • Sight of both eyes • One hand and one foot • One hand and the sight of one eye • One foot and the sight of one eye • Speech and hearing in both ears
50%	<ul style="list-style-type: none"> • One hand or one foot • Sight of one eye • Speech or hearing in both ears
25%	<ul style="list-style-type: none"> • Thumb and index finger of same hand

Please Note The amount of the benefit depends upon the extent of your injury. If you die in an accident, the full coverage amount is payable. The chart above shows what the plan pays for various injuries. For more details on this benefit, go to the Parkland Intranet (<http://intranet.pmh.org>).

Long Term Care Insurance

Long term care insurance provides a benefit for a variety of services needed when people are no longer capable of caring for themselves. This care includes assistance in the home with day-to-day activities or special attention in a nursing home.

Who May Participate

If you enroll within 31 days of your hire date and are actively at work, you may purchase this protection for yourself with after-tax dollars without providing evidence of insurability. You may also elect coverage for your spouse. However, your spouse will be required to answer a few health questions and coverage will be subject to medical underwriting.

Coverage is also available to your adult children (25 years and older), parents and grandparents, including parents-in-law and grandparents-in-law. They may apply for coverage by downloading an enrollment form from the vendor's website and completing the evidence of insurability forms.

What The Program Covers

The chart provides an overview of how the plan works.

Plan Feature	How the Plan Feature Works
Daily maximum benefit	For each day of care, you may choose: <ul style="list-style-type: none">• \$100/day• \$150/day• \$200/day• \$250/day
Automatic benefit increase option	Increase your Daily Maximum Benefit by 5% each year if you choose this option.
Lifetime maximum	1,825 times the Daily Maximum Benefit <i>(For example, if \$150/day were selected as the Daily Maximum Benefit, the lifetime maximum benefit payable would be \$273,750. This benefit would be significantly higher if you chose the Automatic Benefit Increase Option.)</i>
Waiting period for benefits	90 days after the benefit trigger of chronic illness has been satisfied. Starts on the first day of chronic illness and ends 90 calendar days later. See When Benefits are Paid (below).

When Benefits are Paid

To receive long term care benefits (subject to the terms and conditions of the policy), the covered person must be certified as chronically ill by a licensed health care practitioner and:

- Unable to perform at least two activities of daily living for 90 days without the substantial assistance or supervision of another individual, OR
- Require substantial supervision to protect the covered person or others from threats to health and safety due to a severe cognitive impairment.

Activities of daily living include bathing, continence, dressing, eating, toileting and transferring.

Paying for Coverage

On the effective date of coverage, an age-based premium is determined. Then, for the duration of coverage, your premium will go up only if you choose to increase the coverage level. For example, if you are 39 years old on the effective date of coverage, you will always pay rates based on 39 years of age.

Premiums for you and your spouse will be deducted from your paycheck. Premiums to cover other eligible family members will be billed directly to the covered family member by the long term care insurance vendor.

How To Enroll

For rate information and an enrollment form, visit the long term care provider's website or call the toll-free number. Contact information on the long term care provider is shown on the Benefit Resources list on the back cover of this brochure.

If You Leave Parkland

You may continue your long term care coverage under an individual policy with the same benefits and provisions as under your group policy. Payment of premiums will change from payroll deduction to having your premiums billed directly to your home.

Disability Benefits

The Parkland disability plans offer income protection and security for you and your family if an extended illness or injury keeps you from working. Parkland provides the Core Disability Plan that will pay 50 percent of your biweekly earnings after you are unable to work for 42 consecutive days due to a covered illness or injury. You may:

Increase your disability benefit to 60 percent of pay by electing the Buy-Up Plan.

Decrease your waiting period to 14 days by electing the Buy-Down Plan.

With these upgrades, you pay the difference in cost between the Core Plan benefit and waiting period, and the additional benefit amount and shorter waiting period. Earnings for purposes of the disability plans are your base rate of pay, excluding overtime, bonuses or other compensation.

Disability Plan	Waiting Period	Benefit Amount
Core Plan	42 days (paid for by Parkland)	50% of pay (paid for by Parkland)
Buy-up Plan to increase benefit amount	42 days (paid for by Parkland)	+ 10% of pay (paid for by you) = 60% of pay (total benefit)
Buy-down Plan to decrease	14 days (paid for by you)	50% of pay (paid for by Parkland)

How To Enroll

Log on to MyParkland to determine your cost for the additional 10 percent benefit in the Buy-Up Plan or the shorter waiting period in the Buy-Down Plan. You may enroll online at MyParkland in one or both of the upgrade plans.

Paid Time Off

The Paid Time Off (PTO) program provides eligible employees with paid time off that can be used for vacations, holidays, illnesses (both their own and their families) and other personal business.

You receive PTO according to the hours you work each biweekly pay period as time is earned. You start earning PTO hours on your first day of employment. Accrued PTO will not be available until the beginning of the first full pay period after you complete 90 days of continuous employment.

You earn PTO for every hour you work using an hourly accrual rate based on your years of seniority and employment status. For every hour you work up to a maximum of 80 hours per pay period, you accrue PTO as shown in the charts below. The charts show the maximum number of hours you may earn for each biweekly pay period and annually.

You may earn up to 1½ times your annual maximum accrual of PTO. Once you earn the maximum accrual, you will not earn more PTO until you use some of your accrued time. Accrued PTO is paid out at termination only.

Maximum Hours Earned Each Bi-Weekly Pay Period Based on Years of Seniority						
Employment Status	0 to 1	2 to 4	5 to 9	10 to 14	15 to 19	20 or more
Full-time and part-time with benefits	6.77	7.69	8.92	9.54	10.15	10.46
Weekend option	2.71	3.14	3.88	4.18	4.49	4.74

Maximum Hours Earned Each Year Based on Years of Seniority						
Employment Status	0 to 1	2 to 4	5 to 9	10 to 14	15 to 19	20 or more
Full-time and part-time with benefits	176	200	232	248	264	272
Weekend option	70	82	101	109	117	123

Selling Paid Time Off

For future years, you may sell up to 40 hours of PTO during annual open enrollment. Parkland will pay 100 percent of your hourly base pay rate for each hour that you sell. In accordance with federal law, you will sell PTO in the year prior to its accrual.

Parkland Holidays

As a new employee, you will be paid for any holiday that is observed by Parkland, that is taken by your department, and that occurs before you are eligible for PTO. This time will be considered an advance against PTO that you later accrue. Parkland observes the following holidays:

- New Year's Day
- July 4th
- Thanksgiving
- Christmas Day
- Memorial Day
- Labor Day
- The day after Thanksgiving

Flexible Spending Accounts

With flexible spending accounts (FSAs), you can set aside before-tax dollars through payroll deductions to cover certain types of health care and dependent care expenses. There are two types of flexible spending accounts:

Health Care Spending Account to reimburse you for eligible medical, dental, vision and hearing expenses not paid by another health care plan. Elections to this account will cover the time period from Jan. 1 through March 15 of the following year. To request reimbursement of an eligible health care expense, you will use the plan's FSA card at the time of purchase, or submit your receipt and claim form to the FSA administrator. See page 24 for details.

Dependent Care Spending Account to reimburse you for eligible dependent care expenses (such as child or adult day care) incurred while you and your spouse work. Elections to this account will cover the time period from Jan. 1 through Dec. 31. Your eligible expenses must be for dependents who:

- Are under age 13, or of any age if he or she is physically or mentally incapable of self-care,
- Can be claimed on your federal income tax return and
- Reside in your home for at least eight hours a day.

To request reimbursement of an eligible dependent care expense, you will submit your receipt and claim form to the vendor. See page 24 for details.

General Information About Both Accounts

Federal income tax rules and plan provisions govern how the flexible spending accounts work. Here are some things to remember:

- Your annual elections will cover different time periods as shown in the chart below. **If you are a new hire, your election will start 90 days after your date of hire. For the health care account, you may continue to incur expenses through March 15 of the following year. For the dependent care account, you may incur expenses through Dec. 31 of the same year.** You may be reimbursed only for expenses that you incur once you become eligible to participate.

Flexible Spending Account	Incur Expense by	Request Reimbursement by
2009 Health Care Spending Account	March 15, 2010	March 31, 2010
2009 Dependent Care Spending Account	Dec. 31, 2009	March 31, 2010

- Once you elect to participate, you may not change your election or stop participation during the time period unless you have a change in status as defined by the plan. You must enroll online through MyParkland within 31 days of the event. A list of life status changes is shown on page 4 of this brochure and posted in the Summary Plan Descriptions for the flexible spending accounts on Parkland's Intranet site at <http://intranet.pmh.org>.

Tax Deductions vs. The Accounts

It's up to you to determine whether taking tax deductions on your federal income tax return is more beneficial than using the flexible spending accounts. Some points to consider:

Only health care expenses that exceed 7.5 percent of your adjusted gross income can be deducted from your income taxes, according to the IRS.

For work-related dependent care expenses, take a look at the tax credit vs. the spending account. The tax credit amount is determined by applying a percentage to your total dependent care expenses. Based on current tax structure, generally the tax credit is more beneficial than a dependent care spending account if your family income is under \$24,000.

The Tax-Free Advantage Of Flexible Spending Accounts

Looking for savings? Consider participating in a Flexible Spending Account. You never pay taxes on the money contributed to these accounts. You set aside this money before taxes are deducted to pay for eligible health care or dependent care expenses that you would otherwise pay on an after-tax basis. In order to take advantage of these tax savings, you must follow IRS rules and regulations.

Use It Or Lose It

All monies set aside in these accounts must be used by the appropriate time period, or forfeited.

Overview Of How The Flexible Spending Accounts Work

Plan Feature	Health Care Spending Account	Dependent Care Spending Account
Amount you can set aside each year	\$0 to \$5,000 per year	\$0 to \$4,000 per year
Special Incentive	Does not apply	Parkland will contribute 25% of your election each pay period (up to \$1,000 per year).
Examples of expenses that can be reimbursed*	<ul style="list-style-type: none"> Copays, deductibles and coinsurance for medical, dental, pharmacy and vision plans Over-the-counter medications used to treat an illness or injury such as aspirins, antacids, allergy and sinus medicines, pain relievers and cold medicines Weight loss programs prescribed by your doctor to treat a specific medical condition Stop smoking programs prescribed by your doctor to improve your health 	While you and your spouse are working: <ul style="list-style-type: none"> Nursery school, day care centers, day camp and baby-sitting Before- or after-school care for children under age 13 Nurse or caregiver for an elderly relative who qualifies as a dependent
Examples of expenses that cannot be reimbursed*	<ul style="list-style-type: none"> Health insurance premiums paid with before-tax dollars Cosmetic surgery and procedures, unless there is a related disease or injury Over-the-counter medications that benefit your health but do not actually treat an illness or injury such as vitamins, other nutritional aids or drugs to help you stop smoking Weight loss program or health club dues to maintain your general health 	<ul style="list-style-type: none"> Baby-sitting (if you or your spouse are not working) Overnight camp, unless day care fees are broken out from camp fees
Maximum reimbursement	Up to the full amount of your annual contribution, less any amounts previously paid	Up to the amount of money available in your account at the time that you request reimbursement

*A list of eligible and ineligible expenses is posted on the FSA administrator's website. You may also refer to IRS Publication 502, Medical and Dental Expenses, or IRS Publication 503, Child and Dependent Care Expenses, for additional information. These publications are available at www.irs.gov.

The Dependent Care Subsidy: How It Works

Parkland offers a special incentive to encourage you to contribute to the dependent care FSA. The total maximum contribution that can be made on your behalf each year is \$5,000 per household. Of this total maximum contribution:

- The maximum you can contribute is \$4,000.
- The maximum Parkland can contribute is \$1,000.

Parkland's contribution is equal to 25 percent of the amount that you contribute. The chart on the next page gives examples of how the incentive works with different contribution amounts from Parkland and you.

Contribution Source	Examples of Contribution Amounts			
You	\$4,000	\$2,800	\$800	\$400
Parkland	\$1,000	\$700	\$200	\$100
Total	\$5,000 *	\$3,500	\$1,000	\$500

*The total maximum contribution per year is \$5,000 (\$4,000 from you and \$1,000 from Parkland)

Example: How A Spending Account Saves Money

John and Julie both earn \$40,000 a year. Let's assume that they both pay 15 percent in federal income taxes and are single with no dependents. Each pays \$2,000 a year out-of-pocket for medical expenses.

- Julie decides to pay these expenses from her Health Care Spending Account.
- John decides not to participate in the account and will pay medical expenses with after-tax dollars.

Take a look at their spendable income after paying these expenses.

	Julie (with account)	John (without account)
Annual pay	\$40,000	\$40,000
Before-tax contribution to Health Care Spending Account	- 2,000	- 0
Taxable pay (adjusted gross income)	\$38,000	\$40,000
Estimated federal income taxes (15%)	- 5,700	- 6,000
Estimated Medicare taxes (1.45%)	- 551	- 580
Take-home pay	\$31,749	\$33,420
After-tax medical expenses	- 0	- 2,000
Remaining annual spending income	\$31,749	\$31,420

Tax Savings: Julie has \$329 more than John in spendable income at the end of the year after paying her medical expenses through reimbursements from her Health Care Spending Account

How Much Should I Contribute To The Health Care Spending Account?

Budget Worksheet	
1. Medical deductibles and copays	\$ _____
2. Medical coinsurance	\$ _____
3. Prescription drug copays	\$ _____
4. Over-the-counter medications used to treat an illness or injury	\$ _____
5. Dental deductibles	\$ _____
6. Dental coinsurance	\$ _____
7. Vision care (including eye exams, glasses and contact lenses not paid by any vision or medical plan)	\$ _____
8. Hearing exams and aids	\$ _____
9. Other health care expenses	_____
Annual Total	\$ _____

Budgeting for your Health Care Spending Account

Use the budget worksheet (left) to determine the amount you might consider contributing to your Health Care Spending Account. Budget carefully because any unused amounts must be forfeited. You may want to review your family's health care bills for the last several years and estimate your expected out-of-pocket expenses for you and your eligible dependents for the plan year (Jan. 1 through March 15 of the following year). If you are a new hire, include only expenses for the current year that you expect to incur after 90 days of employment through March 15 of the following year. **Include only those expenses that are not paid by health care coverage.**

Go to www.flexdirect.adp.com for additional worksheets to help you decide how much to contribute to the flexible spending accounts.

Questions?

For more information, you can contact the FSA administrator at the toll-free number or website shown on the Benefit Resources list on the back cover of this brochure.

How To Get Reimbursed From A Flexible Spending Account (FSA)

For eligible dependent care expenses, you submit your receipts and/or claim form with the dependent care provider's certification to the FSA vendor to obtain reimbursement. For eligible health care expenses, you have two ways to request reimbursement based on where you make your purchase – through the plan's FSA card and an FSA reimbursement form.

- 1. Use the plan's FSA card** to pay for qualified health care expenses only from places like your doctors' offices, dental offices, hospitals, health care clinics and pharmacies (like Walgreens, CVS or the Parkland pharmacies). You will not have to substantiate your purchases at many stores (such as Walmart, Target, CVS, etc.) and may not have to supply receipts. However, it's a good idea to save your receipts just in case!
- 2. Incur and pay the eligible expense; file an FSA reimbursement form.** For the Health Care Spending Account, you must file a claim with any other existing health plan coverage before you submit a reimbursement claim. Then, complete the FSA reimbursement form, available on Parkland's Intranet (<http://intranet.pmh.org>) and the FSA administrator's website, and attach any required documentation. You may choose to be reimbursed by check or direct deposit. To receive your reimbursement faster through direct deposit, log on to the FSA administrator's website and submit your banking information.

For the Dependent Care Spending Account, you must include the provider's Social Security number or tax identification number so that the reimbursed amount can be reported to the IRS.

For the Health Care Spending Account, attach copies of itemized bills or an Explanation of Benefits (EOB). For over-the-counter (OTC) medications used to treat an illness or injury, you must submit a receipt showing what medication you purchased, the date of purchase and the amount paid.

You can save yourself a stamp and reduce handling costs by faxing your claim form (for reimbursement) or substantiation form (to document a purchase) to the number shown on the form. Reimbursement checks are prepared daily.

Retirement Benefits

As an employee of Parkland, you may plan and save for the future from your date of hire through different retirement benefit plans based upon your employment classification.

Retirement Benefits Plan	Full-Time Employees	Part-Time Employees
Retirement Income Plan	Yes	No
Part-time Mandatory Contributions	No	Yes
Supplemental Retirement Plan	Yes	Yes

Retirement Income Plan *(For Full-Time Employees)*

This Pension Plan, which is intended as a replacement for Social Security, offers a monthly benefit at retirement. You are automatically enrolled on your hire date. You and Parkland share in the cost; you contribute 4.5 percent of regular pay to the plan. Parkland contributes the additional amounts required to provide your vested benefit, which is typically based on your years of service and average monthly earnings during the highest five out of the last 10 calendar years you work at Parkland as a full-time employee. You name your beneficiary for this benefit at MyParkland (see page 6 for more details).

Parkland's Retirement Income Plan vs. Social Security

It may not seem important today, but someday it will make a difference. As a full-time employee, you participate in Parkland's Retirement Income Plan rather than Social Security. To see how the Parkland Retirement Income Plan compares to Social Security, we estimated benefits for a full-time employee who begins a career with Parkland at age 40 in the year 2008 and works full-time for 25 years at Parkland, retiring at age 65. The table shows the value of benefits in today's dollars.

Receive a Benefit at Age 65 from	For Annual Earnings of				
	\$20,000	\$30,000	\$45,000	\$60,000	\$76,000
Retirement Income Plan	\$1,000	\$1,500	\$2,250	\$3,000	\$3,800
Social Security	\$820	\$1,044	\$1,379	\$1,662	\$1,830

Part-Time Mandatory Contributions *(For Part-Time Employees)*

On the first day of employment, part-time employees automatically start contributing 7.5 percent of total pay on a before-tax basis as part-time mandatory contributions. You make these mandatory contributions instead of contributing to Social Security. This amount is automatically contributed to your part-time mandatory contributions account beginning with your first paycheck.

Parkland does not match your part-time mandatory contributions. However, Parkland will match any amounts up to six percent of pay (based on 40 hours a pay period) that part-time-with-benefits employees contribute to the Supplemental Retirement Plan above 7.5 percent.

For mandatory contributions and other contributions to the Supplemental Retirement Plan, pay is based on 40 hours a pay period and includes your before-tax contributions to the Supplemental Retirement Plan. You may choose to contribute additional amounts to the Supplemental Retirement Plan, subject to IRS limits described in the next section.

Vesting

Vesting means ownership. You become 100 percent vested in the Retirement Income Plan benefit when you complete five years of full-time service. Once you are vested, you are entitled to a benefit. You may receive your benefit as early as age 55. If you leave Parkland with less than five years of service, your 4.5 percent contributions will be returned to you. You will receive a package that explains your options.

To Name Your Beneficiary

You may name your beneficiary for the Part-Time and Supplemental Retirement Plan through the plan's website or toll-free number. You can find the website name and the toll-free number on the Benefit Resources list on the back cover of this brochure.

How To Enroll In The Supplemental Retirement Plan

You may join the plan immediately upon hire. To enroll, review the How To Save And Invest For The Future insert in the front pocket of this brochure. Then, either log on to the plan's website or call the telephone hotline to make your contribution and investment elections. If you are making Roth after-tax contributions, go to the Parkland Intranet or call the telephone hotline for more information.

Supplemental Retirement Plan (For Full-Time and Part-Time Employees)

By participating in the Supplemental Retirement Plan, you can:

- Save on a before-tax basis and lower your current taxable income. Pay no taxes on this money or the earnings until you withdraw your account.
- Contribute on a Roth after-tax or after-tax basis for additional retirement savings.
- Receive Parkland matching contributions after one year of service.
- Take advantage of a variety of investment choices.

Your Before-Tax, Roth After-Tax And After-Tax Contributions

Save from one percent to 75 percent of your pay on a combined before-tax, Roth after-tax or after-tax basis through payroll deductions, subject to applicable IRS limits. These limits are double those in most traditional savings plans because the Supplemental Retirement Plan includes before-tax 403(b) and 457 contributions, which are available only to governmental entities. Pay does not include bonuses, overtime pay, severance pay and differential.

- Before-Tax Contributions are deducted from your paycheck before federal income taxes are withheld. The 403(b) and 457 contributions make up your before-tax contributions to the Supplemental Retirement Plan. These accounts are tracked separately because there are some differences between them.
- Roth After-Tax Contributions are deducted from your pay after federal income taxes are withheld. Investment earnings on the Roth after-tax contributions are never taxed, not even upon distribution, as long as certain requirements are met. At the time of withdrawal, you must have reached age 59½ and your first Roth after-tax contribution must have been in the plan for five years. For more information on Roth after-tax contributions, read the Roth newsletter that is posted in the **Communications** section of the plan's website listed on the back cover of this brochure.
- Catch-Up Contributions are additional before-tax and Roth after-tax savings opportunities if you are age 50 or older by the end of a calendar year.

The chart shows what you can save on a before-tax and Roth after-tax basis in Parkland's Supplemental Retirement Plan and compares these amounts with the savings limits of most other savings plans. These limits are not plan-specific. If you contributed to another employer's plan on a before-tax or Roth after-tax basis during the year, consider those contributions when deciding how much to contribute to the Parkland plan.

Year	Maximum Annual Before-Tax and Roth After-Tax Contributions			
	Most other Savings Plans		Supplemental Retirement Plan	
	Under Age 50	Age 50 and Over	Under Age 50	Age 50 and Over
2009	\$16,500	\$22,000	\$33,000*	\$44,000*

*The first \$16,500 that you save (\$22,000 if you are age 50 or older) may be before-tax, Roth after-tax or a combination of the two.

To determine the amount that you want to save, review the *How To Save And Invest For The Future* insert in the front pocket of this brochure. Then, log on to the plan's website or call the telephone hotline to select your contribution savings percentage or a specific dollar amount. To elect Roth after-tax contributions, go to the Parkland Intranet or the plan's website for more information.

Once you decide how much you want to contribute, your before-tax and Roth after-tax contributions are allocated first to 403(b) contributions. If you reach the maximum for the 403(b) account, additional before-tax contributions will automatically convert to 457 contributions. You will not be able to make any more Roth after-tax contributions; they will automatically convert to before-tax contributions. When you reach the combined before-tax limit for 403(b) and 457 contributions, you must elect after-tax contributions in order to continue contributing to the plan. Unless you make a new election before the first pay period of the new year, your before-tax and/or Roth after-tax 403(b) elections will continue for the following calendar year.

- After-tax contributions are deducted from your paycheck after taxes are withheld.

Parkland Matching Contributions *(For Full-Time And Part-Time-With-Benefits Employees)*

After one year of service, Parkland matches your contributions \$1 for \$1, up to 6 percent of your pay. Parkland matches a combination of your before-tax, Roth after-tax or after-tax contributions, up to 6 percent of pay.

Rollover Contributions

If you have a balance in a qualified plan such as a 401(k) or another 403(b) with a previous employer, you can roll over that money immediately and take advantage of the loan and withdrawal options offered by the plan. You can also roll over deductible Individual Retirement Accounts (IRAs).

Vesting Of Parkland Matching Contributions

You own (meaning you are 100 percent vested in) your contributions (before-tax, Roth after-tax, after-tax, rollover and part-time mandatory contributions) immediately. The part of the Parkland match that you own increases each year that you work at Parkland. You become vested in the Parkland matching contributions as shown in the vesting chart below.

Regardless of your service, you become 100 percent vested in the matching contributions and associated earnings upon total or permanent disability, death while employed or retirement on or after your normal retirement date (age 65).

Years of Vesting Service You Complete	Vested Percentage
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

Your Investment Options

You can invest your account in investment options with different risk and return characteristics. The Investor Profile Quiz in the How To Save And Invest For The Future insert and on the plan's website can help you decide how to invest your savings. Consider investing in one of the plans model portfolios, depending on your needs. See the How To Save And Invest For The Future insert in the front pocket of this brochure for more information on investing your account.

When You Leave Parkland

When you stop working at Parkland, you may leave your money in the Supplemental Retirement Plan or you may request a lump-sum payment of your account. To request your lump-sum payment, please contact the plan administrator at the phone number or website shown on the back cover of this brochure. Starting at age 70½, you must start taking minimum distributions from your account.

Loans

Using the plan's website or the telephone hotline, you may request a loan. You may have only one outstanding loan at a time. The interest rate is prime plus one percent. Your loan will be taken from your before-tax 403(b), Roth after-tax and rollover accounts with your Roth after-tax account being accessed last. You may not take a loan from your before-tax 457, after-tax and part-time mandatory contributions. You may borrow:

- A minimum of \$1,000 and
- Up to the lesser of one-half of your account balance or \$50,000, reduced by your highest outstanding loan balance during the last 12 months.

If you leave Parkland and do not repay the loan within the required time period, you will have to pay taxes on the outstanding loan balance.

In-Service Withdrawals

Using the plan's website or the telephone hotline, you may request a withdrawal from your Supplemental Retirement Plan accounts while you are still employed at Parkland. Part-time mandatory contributions are not eligible for in-service withdrawal. You may:

- Withdraw from your after-tax or rollover accounts at any time.
- Request a full or partial withdrawal of your account balance after age 59½ if you are 100 percent vested in the Parkland match.
- Apply for a financial hardship withdrawal from all or part of your before-tax 403(b) and Roth after-tax contributions made to the plan and the vested portion of Parkland's matching contributions.
- Apply for an unforeseeable emergency withdrawal from your before-tax 457 contributions if you or your dependents incur a severe financial hardship. An unforeseeable emergency must cause a hardship that cannot be relieved through reimbursement or compensation by insurance, liquidation of your assets (unless such liquidation would cause you severe financial hardship), or discontinuation of all before-tax 457 contributions to the Supplemental Retirement Plan. Payment of college expenses and purchase of a home do not qualify as an unforeseeable emergency.

If you do not roll over a withdrawal to an IRA or to another eligible retirement plan, the taxable portion of the withdrawal becomes ordinary income to you for the year in which you receive the distribution. In-service withdrawals that are not financial hardship withdrawals are subject to 20 percent mandatory withholding. If you have not reached age 59½, the withdrawal may also be subject to an additional 10 percent nondeductible early distribution penalty tax. Withdrawals from your before-tax 457 contributions account are generally not subject to the additional 10 percent early distribution penalty tax. However, special rules apply to Roth after-tax monies. Consult your professional tax adviser for details.

Employee Assistance Program (EAP)

Sometimes it's a tough world out there! To help you deal with personal problems that affect your relationships at home and at work, Parkland sponsors an Employee Assistance Program (EAP) as part of its benefits program.

A confidential program, the EAP offers you and your family members a set number of counseling sessions per problem. Services through the EAP are provided at no cost to you, unless you are referred to an outside provider. These referrals will be made based on your health care benefits and your individual needs.

Available around the clock, EAP experienced counselors can help you address issues related to:

Family problems	Depression	Divorce
Interpersonal communication	Unresolved grief	Problems of adolescence
Single parenting	Parent/child conflict	Career change
Alcohol or drug problems	Marital problems	Legal matters
Dual careers	Job "burnout"	Financial pressures
Life transition	Sexual problems	Relationships
Anxiety/stress	Work-related problems	Physical abuse
Aging parents	Personal concerns	Eating disorders



Another top benefit in Parkland's benefits program, the EAP is there to help ... 24 hours a day, 7 days a week. All it takes is a phone call from you. See the **Benefit Resources** list on the back cover of this brochure for the name of the EAP provider and the number to call if you want to seek assistance from an EAP counselor.

Limited Benefits Insurance Plan

For Part-Time-Without-Benefits Employees

Parkland offers part-time-without-benefits employees a limited benefits insurance plan – Aetna Affordable Health Choices® – through SRC (an Aetna company). This insurance plan is not available to full-time and part-time-with-benefits employees. The program includes benefits for eligible part-time-without-benefits employees and their dependents as noted below.

Limited Benefits Insurance Plan

- Medical (for you, your children, your spouse or family)
- Dental (for you, your children, your spouse or family)
- Short Term Disability (for you only)
- Term Life Insurance (for you and your family)

Other Benefits

As a part-time-without-benefits employee, you may also participate in Parkland's long term care insurance, the flexible spending accounts and the Supplemental Retirement Plan (excluding the Parkland match). Eligible health care costs not paid by any other medical coverage may be reimbursed through the Health Care Spending Account described starting on page 21 of this brochure.

How To Enroll

Enrollment kits for the limited benefits insurance plan are available in the Parkland Benefits Department. The kits provide more details on how the benefits work and step-by-step instructions on how to enroll. You have two ways to enroll in this program, log on to www.src-web.com or call 1.888.772.9682. You do not enroll in this program through Parkland.

2008 Privacy Reminder Notice

Your privacy is important to us.

Su privacidad es de importancia para nosotros.



These important grand can also be viewed and printed from Parkland's Intranet at <http://intranet.pmh.org> under Employee Communications/ Benefits.

We are required by law to keep your health information private. The Notice of Privacy Practices explains how we use health information about you. It also lets you know when we can share that information with others. It tells you about your rights to your health information and how you can use those rights. If you would like a copy of the Parkland Employee Health Plan Notice of Privacy Practices, please call 214.590.8330. You can also write us at:

Parkland Employee Health Plan
Benefits Department – Support Building B
5201 Harry Hines Boulevard
Dallas, Texas 75235

Notificación Del Aviso De Prácticas De Privacidad

Por ley, estamos obligados a mantener su información médica de manera confidencial. El Aviso de Prácticas de confidencialidad explica cómo usamos su información médica. También le informa cuándo podemos compartir esa información a otras personas. Le habla sobre los derechos que usted tiene a su información médica y cómo puede usar esos derechos. Si desea una copia de la Notificación de Prácticas Privadas de Parkland Employee Health Plan, por favor llame al 214.590.8330. También puede escribirnos a:

Parkland Employee Health Plan
Benefits Department – Support Building B
5201 Harry Hines Boulevard
Dallas, Texas 75235

Other Important Notices

Women's Health and Cancer Rights Act of 1988

As a result of the Women's Health and Cancer Rights Act of 1998, if you have breast reconstruction in connection with a mastectomy, coverage will be available as follows:

- Reconstruction of the breast on which the mastectomy was performed,
- Surgery and reconstruction of the other breast to produce a symmetrical appearance,
- Prosthesis (e.g., breast implant) and
- Treatment for physical complications of the mastectomy, including lymphedema.

Benefit payment is subject to the deductible and benefits under the plan.

Newborns' and Mothers' Health Protection Act

Federal law prevents group health plans from restricting benefits for hospital stays in connection with childbirth to less than 48 hours following a normal delivery or 96 hours following a cesarean section. However, the mother's or newborn's attending provider, after consulting with the mother, can discharge the mother or her newborn earlier than 48 or 96 hours, as applicable.

Medicare Notice

Creditable Coverage Notice from the Parkland Employee Health Plan 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 the Parkland Employee Health 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. Parkland Employee Health Plan (PEHP) has determined that the prescription drug coverage offered by the PEHP is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage pays and is considered Creditable Coverage. Because your existing coverage is, on average, at least as good as standard Medicare prescription drug 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 Nov. 15 through Dec. 31. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two-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 Parkland Employee Health Plan coverage will not be affected. If you do decide to join a Medicare drug plan and drop your current Parkland Employee Health Plan coverage, be aware that you and your dependents may 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 Parkland Employee Health 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 one 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 November to join.

Medicare Notice *(continued)*

For More Information about this Notice or Your Current Prescription Drug Coverage

For more information, contact Marnese Elder, Health Plan Administrator, in the Parkland Benefits office at 214.590.8330.

Note: You will receive 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 the Parkland Employee Health Plan changes. You also may request a copy of this notice at any time.

Remember

Keep this Creditable Coverage notice. If you 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 whether or not you are required to pay a higher premium (a penalty).

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 prescription drug plans. For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov.
- Call your State Health Insurance Assistance Program (see the inside back cover 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. Information about this extra help is available from the Social Security Administration (SSA) online at www.socialsecurity.gov or via the phone at 1.800.772.1213 (TTY 1.800.325.0778).

Date	Nov. 1, 2008
Name of Entity/Sender	Parkland Benefits Department /Parkland Employee Health Plan
Contact/Position/Office	Marnese Elder, Health Plan Administrator
Address	5201 Harry Hines Boulevard Support Building B Dallas, Texas 75235
Phone Number	214.590.8330