



Employed Team Member Handbook

November 2019

We, the Novant Health team, will deliver the most remarkable patient experience, in every dimension, every time. Learn more about all of the Novant Health initiatives to ensure a **remarkable patient experience**.

**THE EMPLOYED TEAM MEMBER HANDBOOK IS FOR
INFORMATION ONLY AND IS NOT A CONTRACT OF
EMPLOYMENT.**

ABOUT THIS HANDBOOK

For purposes of this handbook and applicability of its content, team member is defined as employed team member.

AT THE BEGINNING OF EMPLOYMENT, EVERY TEAM MEMBER RECEIVES A COPY OF THE NOVANT HEALTH EMPLOYMENT HANDBOOK AND SIGNS THE HANDBOOK RECEIPT. THE EMPLOYED TEAM MEMBER HANDBOOK IS FOR INFORMATION ONLY AND IS NOT A CONTRACT OF EMPLOYMENT.

THIS HANDBOOK IS INTENDED TO SUMMARIZE SELECTED POLICIES, PROCEDURES AND BENEFITS OF NOVANT HEALTH, INC. PRACTICES MAY VARY FROM LOCATION TO LOCATION.

NOVANT HEALTH MAY AND DOES CHANGE, INCREASE, DECREASE OR ELIMINATE POLICIES, PROCEDURES AND BENEFITS FROM TIME TO TIME, WITH OR WITHOUT NOTICE. THEREFORE, THIS HANDBOOK SHOULD NOT BE RELIED UPON AS FINAL AUTHORITY FOR MATTERS THAT ARE DETAILED IN LEGAL PLAN DOCUMENTS OR POLICY MANUALS.

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THIS HANDBOOK SUPERCEDES AND REPLACES ALL OTHER HANDBOOKS OR SIMILAR MATERIALS WHICH HAVE BEEN PUBLISHED OR DISTRIBUTED. ALL PRIOR HANDBOOKS ARE HEREBY REVOKED AND DECLARED NULL AND VOID.

AN UP-TO-DATE HANDBOOK CAN BE FOUND ON THE NOVANT HEALTH INTRANET BY CLICKING ON EMPLOYEE BENEFITS AND SERVICES, EMPLOYMENT HANDBOOK. YOU ALSO MAY ACCESS THE MOST UPDATED HUMAN RESOURCE POLICIES ON THE INTRANET IN NOVANT DOCUMENT MANAGER.

IN ADDITION TO THE POLICIES AND PROCEDURES IN THIS HANDBOOK, ADDITIONAL WORK RULES FOR OUR SPECIFIC JOB HAVE BEEN ESTABLISHED. YOUR LEADER WILL EXPLAIN THESE TO YOU WHEN YOU ARE INTRODUCED TO YOUR NEW JOB ASSIGNMENT.

I ACKNOWLEDGE RECEIPT OF THE NOVANT HEALTH EMPLOYED TEAM MEMBER HANDBOOK AND UNDERSTAND IT IS EFFECTIVE, NOVEMBER 2019. I WILL READ THE HANDBOOK CAREFULLY PARTICULARLY THE ABOVE DEFINITION OF AT-WILL EMPLOYMENT. I UNDERSTAND THE HANDBOOK IS NOT AN EMPLOYMENT CONTRACT, AND I ACKNOWLEDGE THAT MY EMPLOYMENT IS "AT-WILL" AS DEFINED ABOVE.

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Welcome to Novant Health

Welcome! We are pleased to provide you with this employment handbook. In these pages, you will find important information about:

- The principles that guide us as an organization
- Our quest to provide remarkable experiences for our patients, which includes creating and sustaining a culture of safety
- Novant Health's expectations of you
- What you can expect from Novant Health

Among the most important pages are those that explain the principles that guide us as an organization. Read our mission, vision and values, commit yourself to them and exhibit them in everything you do.

As you make your commitment to serve our patients and customers, be assured that Novant Health is committed to creating an inclusive environment in which everyone can be a contributing member with equal opportunity for advancement and growth.

Whether you are just beginning your career or have been with us for many years, I urge you to read this booklet carefully and refer to it as you carry out your responsibilities to our patients, to your fellow team members and to the organization.

Sincerely,

Carl Armato
President and chief executive officer



The purpose of the employed team member handbook

This handbook has been prepared to inform you about Novant Health's employment practices and policies.

We ask that you read this book carefully and refer to it whenever questions arise. No employed team member handbook can answer every question, however, so please don't hesitate to ask questions.

The policies described here are those in effect at the time the handbook was printed. Additions or deletions may be made to human resource policies at any time to reflect changing business conditions and staffing needs. You will be informed of any policy changes. You can also find the latest copy of this handbook and human resource policies on Novant Health I-Connect.

We hope this handbook will help you understand Novant Health and its practices. If you have any questions about the information in this book, talk to your leader.

Novant Health human resources department

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Mission, vision and values

Our past achievements - and opportunities in the future - are the result of each of us working toward common goals. While our specific tasks can change with customer needs and market opportunities, our basic principles remain the same. Our mission, vision, values and team member promise reflect these principles.

Our mission

Novant Health exists to improve the health of communities, one person at a time.

Our vision

We, the Novant Health team will deliver the most remarkable patient experience, in every dimension, every time.

Our values

- **Compassion:** we treat customers as family members, with kindness, patience, empathy and respect.
- **Personal excellence:** we strive to grow personally and professionally. Honesty and personal integrity guide all we do.
- **Teamwork:** we support one another and collaborate in our efforts to better serve our customers.
- **Diversity & Inclusion:** we recognize that every person is different, each shaped by unique life experiences; this enables us to better understand one another and our customers.
- **Courage:** “We act boldly in making the changes necessary to achieve our mission, vision and promise of delivering remarkable healthcare.”

Our people

We are an inclusive team of purpose-driven people inspired and united by our passion to care for each other, our patients and our communities.

Our promise to our communities

By living our mission, vision and values, we will deliver on our promise to the communities we serve. *We promise that...*

We are making your healthcare experience remarkable. We will bring you world-class clinicians, care and technology – when and where you need

them. We are reinventing the healthcare experience to be simpler, more convenient and more affordable, so that you can focus on getting better and staying healthy.

Strategic plan and strategic imperatives

As the executive team reviewed the environmental trends in health care, seven key strategic imperatives emerged to guide the planning and strategy setting process.

A **strategic imperative is defined as an obligation** on which Novant Health must act that responds to changes required by the health care industry and our consumers and patients.

To this end, the following **six strategic imperatives** demand the attention of Novant Health as it plans for its future.

Novant Health is obligated to respond to our current environmental challenges by ensuring:

High Performing, Change Ready Organization and Resilient Team

Our culture will be known for resilience and innovation. Our leaders, team members and clinicians will have the mindset, tools and skills to anticipate and manage rapid change, ensuring that we continue to grow and thrive as a system.

Improving Health

We will continue to provide value through the remarkable patient experience to each individual patient, while developing a system of care that focuses on keeping our communities healthy.

Technology Optimization and Business Intelligence

We will expand our technology and business intelligence capability to provide actionable information to drive organizational results.

Operational Excellence

We will continually improve our ability to effectively and efficiently achieve outcomes based on best in class industry practices to exceed our patient’s expectations of a remarkable patient experience.

Strategic plan and strategic imperatives (continued)

Consumer-driven Products and Pricing

We will develop responsive products, pricing and partnerships that anticipate the needs of our patients, employers, communicates and payers.

Industry Leadership and Growth

We will continue to grow to a multi-state “super-regional” system to create economics of scale, attract talent, and fulfill an ambitious, industry leading mission and vision.

Novant Health’s vision elements

There are **six vision elements** that describe our current approach to providing remarkable care. The following are the definitions of each of the current elements:

Safety: Our patients are safe and free from harm when they are in our care. Our work environment is one of open communication and timely feedback about the patient’s safety and care experience which is guided by the expectation “**First, do no harm.**”

Quality: Patients receive integrated healthcare services which deliver superior outcomes as measured against national, state and regional benchmarks, peer databases, internal standards and the patient and family experience. Our system of care incorporates prevention, early detection, treatment and ongoing health across all venues of care. Our public transparency about our outcomes data creates a compelling reason for patients, communities, physicians and team members to affiliate with Novant Health and choose us for their healthcare needs.

Affordability: We deliver a system of care that provides value, as judged by our patients and their payers. Novant Health will compare favorably to a similar group of top performing health systems. Our sustained financial strength will allow us to grow strategically and invest to meet the needs of the

patients and communities we serve.

Easy for me: We deliver a convenient and seamless patient and family experience which is accessible and welcoming. Patients understand they are part of a system of care and can describe what is going to happen during their journey and why. Resources and information are readily available and waits are filled in ways that add value to patients and their families.

Voice and choice: Patients receive all the necessary information to make knowledgeable and confident choices about their health conditions, treatment options and overall well-being. We embrace patients as true partners by valuing their perspectives and engaging them in genuine dialogue.

Authentic personalized relationships: We know our patients and see healthcare from their perspective. Our patients receive personalized care during and beyond their encounters, and always from a place of compassion. They truly feel like family and choose us because of the authentic and meaningful relationships we have built with them.

Service standards

Our service standards set the expectations for how we treat both patients and team members...

“I commit to demonstrate and uphold these service standards to deliver a remarkable patient experience, in every dimension, every time.”

Our service standards are:



Remarkable means knowing me. I will be fully present and attentive when I am with you.

How you can show that you know me:

- By getting familiar - I will introduce myself and let you know my role in your care. I will get to know who you are and what is important to you.
- By always listening - I will be attentive, listening with heart and head, and not focusing on what I have to say next.
- By anticipating my needs - I will be proactive, look for verbal and physical cues that signal needs and take initiative to address them.



Remarkable means respecting me. I will honor you as an individual.

How you can show that you respect me:

- By being open with me - I will share with you and walk through information in a way that is understandable.
- By valuing my time - I will do my part to make things easier for you and to acknowledge that you have a life away from us.
- By protecting my dignity - I will be mindful of your privacy and preserve your rights as a person.



Remarkable means caring about me... not just for me. I will be there for you in the way that you need.

How you can show that you care about me... not just for me:

- By comforting me - I will treat you with warmth and kindness, and identify ways to make you more comfortable, both physically and emotionally.
- By acknowledging my uniqueness - I will recognize you as an individual and respond to your distinct needs and preferences.
- By meeting me where I am - I will work to see things from your perspective... to see through your eyes.



Remarkable means delighting me. I will think ahead and go the extra mile.

How you can delight me:

- By creating warm hand-offs - I will make connections through personal exchanges and introductions with other caregivers and talk up my teammates.
- By owning my issues and concerns - I will continuously inquire about your experience in order to uncover and quickly address any concerns.
- By exceeding my expectations - I will seek out opportunities to find out what remarkable means to YOU and create memorable moments.

A copy of the service standards can be found on I-Connect, the Novant Health intranet, under “About Us.”

Information Security and privacy

Protecting the **health and financial information** of our patients and team members is fundamental to Novant Health's culture.

The following are actions you should take to protect all Novant Health data, including team members' and patients' information:

- **It begins with you and applies to all!**
- **Log off or lock your computer whenever you step away**
- **Never share your ID or password**
- **Do not access patient information without a job purpose**

Pause. Prevent. Protect.

The four rules are further enforced across our organization by the **"Pause. Prevent. Protect."** Information security and privacy initiative. Team members:

- **Pause** before taking action regarding the use of confidential information and the use of technology.
- **Prevent** inappropriate access and/or disclosure of Novant Health Confidential information, including PHI, by following specific guidelines.
- **Protect** our patients and our team members and Novant Health by continuously promoting the message and guidelines.

FairWarning software

The **FairWarning monitoring software** is a supporting element to **Pause. Prevent. Protect.** Across our organization, protected health information (PHI) will be proactively monitored by this software. All incidents of suspected inappropriate access will be automatically provided to the privacy office for further investigation.

Questions? Please follow-up with your leader with any questions you might have regarding our security and privacy practices.

Union free philosophy

Novant Health is a non-union organization. Our mission, vision, values and customer service standards — and not an outside agency - guide all of our efforts to provide the highest quality of services to the people of our markets while providing our team members with a safe and personally satisfying work environment. We believe that in order to meet these goals, all team members should strive to work together closely as a team in a spirit of cooperation, concern and respect for each other in a positive manner.

Novant Health believes that the interests of team members, patients, community and the organization are best served when we deal directly with team members rather than through a third party. We are not anti-union, but rather pro-team member, pro-Novant Health and pro-patient. Accordingly, the corporation will resist and oppose any such unionization efforts by every legal and proper means.

We want to ensure that our work environment encourages and supports direct communication and interaction between team members and management.

We seek to avoid the stress and divisiveness that unionization could cause team members, Novant Health and the people in our care. Therefore, we do not believe that it is in the best interest of Novant Health or our team members for our team members to belong to a union. For additional information, see HR policy 1010 Non-union Statement.

Working at Novant Health

Human resources (HR) supports you and your co-workers throughout our facilities. HR is responsible for recruiting and orienting new team members and coaching managers and staff. HR also administers support for your needs, such as compensation, benefits, education, team member health and leadership development.

Introductory period

Your first 90 days of employment are considered an introductory period for all new team members. The first 90 days in a new position for current team members will be considered an introductory period.

New team members: The first 90 days of employment is an opportunity for the team member to decide whether or not he or she likes the organization and his or her job. During the introductory period the new team member may resign without notice or may be terminated at the discretion of Novant Health.

Current staff: A team member who has transferred into a new position will be on an introductory status for the first 90 days. This status will not affect the usage of PTO (paid time off). If a team member is not satisfactorily performing his or her job, he or she will be subject to the I-Commit Performance Improvement Policy.

Employment at Novant Health is “at will.” This means you may terminate your employment at any time, for any reason, or for no reason at all. In order to continue service to patients and customers in an uninterrupted manner, we ask that you give adequate notice (see page 17). Novant Health reserves the same right to terminate your employment at any time, with or without cause.

Your human resources file

Novant Health maintains a personnel file for every team member. Your file contains your employment application and required personal information. Keeping your human resource information up to date is important. If you have a change in any of the following information, please contact human resources:

- Legal name (new Social Security card must be presented)
- Number of dependents for benefits coverage
- Marital status for benefits coverage
- Retirement Plus beneficiary designation

You may go online to Employee Self Service to update the following information:

- Home address
- Home telephone number
- Life Insurance Beneficiary designation
- Emergency contact information
- Exemptions on your W-2 and W-4 tax forms

You may view certain parts of your HR file in the presence of an appropriate HR representative. Please contact human resources for additional information.

Identification

Wear your ID badge whenever you are on Novant Health property so that we can identify you as a member of the organization. Wear your ID badge above the waist and with your photo clearly visible. Depending on your location, your badge will give you access to parking areas and team member entrances.

You also use your badge to “clock in or out” at work. If the badge is lost, there will be a charge to replace it. If the badge wears out or is accidentally damaged, it will be replaced at no charge upon return of the old badge. Your badge is the property of Novant Health and should be returned if your employment ends.

Team member classifications

Team members at Novant Health are classified according to the number of hours they are regularly scheduled to work:

- *Full-time team members:* are expected to work a standard schedule of 72 to 80 hours per pay period and are eligible for benefits as described in the various summary plan descriptions.
- *Part-time team members:* are expected to work a standard schedule of 48 to 71 hours per pay period. These team members are designated by status code "P" and are eligible for benefits as described in the various summary plan descriptions.
- *Part-time without benefits:* are expected to work a standard schedule of 16 to 46 hours per pay period. These team members are not eligible for Novant Health team member benefits.
- *PRN team members:* All PRN staff are required to work a minimum of at least 64 hours in a 12-month period. Please refer to policy 3150 PRN Requirements.
- *Temporary team members:* Temporary team members are hired for a specific assignment, usually for a period of time not to exceed 90 days and are terminated upon completion of the assignment. Temporary team members are not eligible to receive benefits.

Although you are hired into a specific classification, you may be asked to work a different schedule, different days or different hours than the ones specified at hire.

Former team members

Depending on the circumstances and unless they were previously dismissed for cause, Novant Health may consider former team members for re-employment. Such applicants are subject to usual pre-employment procedures. Generally, to be considered, an applicant must have been in good standing at the time of previous employment and must have provided the requested notice of intent to leave.

New team member orientation

New team members need orientation at three levels:

- to Novant Health and the specific facility, at which they work
- to their department
- to the specific job to be performed

All new team members are required to complete the general orientation program before actually beginning work. In certain circumstances, a team member may complete an "SOS" orientation module and attend the next scheduled orientation or complete the alternative orientation packet.

Employment verifications

If you need employment verification for a loan or mortgage application, you can authorize a lender to call the HR number at 800-890-5420. For income verification, the lender must contact the payroll department toll-free at 866-564-4139 or 336-277-1050.

Outside employment

Occasionally, team members ask about our policy on holding a second job, commonly referred to as "moonlighting." Novant Health sometimes permits, but does not encourage, you to hold other jobs outside of the organization as long as you can effectively meet the performance standards for your job. If the secondary job interferes with your performance at Novant Health, then you will be subject to performance related disciplinary action.

Certain outside employment opportunities may be restricted by our code of ethics and the conflict of interest policy. Please refer to HR policy 7070 Code of Ethics and HR Policy 7075 Conflict of Interest for more information.

Also, you may not be employed by another employer or self-employed while you are on a leave of absence from Novant Health.

Job postings and transfers

Novant Health's job posting system offers opportunities for team members seeking greater challenge and job satisfaction through promotion or transfer. This system keeps you informed of openings that help you reach your career goals. A new team member may apply for a transfer from one department or affiliate to another through the job posting program after 6 months of satisfactory employment.

Thereafter, you may apply for a transfer once in a 6-month period. If there is a business need for a transfer exception, the leader must provide the business rationale to the talent acquisition specialist who will seek employee relations review. **No interviews are to occur with team members who do not meet the 6 month transfer eligibility requirement unless a transfer exception has been granted.**

You may not be eligible for a transfer for up to 90 days, after placement on a Performance Improvement Plan, I-Commit Choice Day or on a Leave of Absence. Transfers will become effective at the beginning of a pay period. Also, a team member requesting a transfer must report any current work restrictions at the time of the request. Failure to report a work restriction will be considered a falsification of the transfer application.

If you are interested in applying for a job / transfer, refer to the employment site on the Novant Health I-Connect for a listing of available openings. Remember that advancement is not limited to your own department. Transfers within the Novant Health system broaden your opportunities for growth. Share your career goals with your leader so that he or she can help you advance. For additional information, please see HR policy 3007 Job Posting / Employee Transfer.

Employment of relatives

You and your fellow team members are our best recruiters. We welcome the opportunity to discuss employment opportunities with your friends and relatives. However:

A family member may not be employed in a position where direct administrative or supervisory control or

influence is exercised over a family member or relative.

A person may not be employed in a subordinate position where a family member or relative exercises direct administrative or supervisory control or influence over the other.

Family members and relatives are defined as husband, wife, domestic partner, child, parent, brother, sister, step-parent, step-siblings, legal guardian, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, aunt, uncle, niece, nephew, grandparents and grandchildren.

For additional information, please see HR policy 6015 Employment of Relatives or Individuals Involved in Intimate and/or Romantic Relationships.

Workplace relationships

To avoid misunderstandings, complaints of favoritism, possible claims of sexual harassment and other potential work-related problems, Novant Health prohibits intimate and/or romantic relationships between anyone who can exert authority or influence over staff members and anyone within his or her chain of command. Those who can exert authority or influence include, but are not limited to, all leaders, employed physicians, contract physicians who work on-site, physician assistants and other allied health providers. For additional information, see HR policy 2004 Workplace Relationships.

Resignation

Many team members will enjoy long and rewarding careers at Novant Health, others, for various reasons, will end their employment.

In order to continue service to customers without interruption, team members are encouraged to give as much notice as possible. However, in no case will Novant Health expect a working notice to be less than outlined below.

Resignation (continued)

Team Member Classification	Requested Notice
Non-Exempt Team Members (Excluding RN's)	Two (2) weeks*
Exempt Team Member, including managers	30 days*
Directors and above	30 days*
RN's, physician assistants, nurse practitioners, CRNA's, pharmacists, physical therapist, occupational therapist, speech pathologist, Behavior Health	30 days*
Team Members who resign in accordance with I-Commit Performance Improvement Policy	In lieu of working a notice, will be paid for notice period in associated with classification

**Failure to work the requested notice may result in rehire ineligibility. The notice period may be waived at the discretion of the responsible administrative officer.*

The notice of resignation should be in writing to the department/practice manager or appropriate supervisor. The working notice begins the day the resignation is submitted. Paid time off (PTO) taken during a working notice extends the required notice by the same amount of time. A team member who resigns before completing at least 90 days of employment will forfeit his or her PTO balance.

A team member who resigns after at least 90 days of employment but before completing 10 years of service will be paid 75 percent of the value of his or her PTO balance in the last paycheck. A team member who resigns with 10 or more years of service will be paid 100 percent of the value of his or her PTO balance in the last paycheck. Any sick balance is forfeited upon termination.

Team members who do not work the requested notice or resign under the terms of the I-Commit Performance Improvement Policy may not be eligible for rehire. If a team member later reapplies for employment, the application may be evaluated based on prior performance and organizational needs at that time.

Novant Health's code of ethics

We ask and expect you to act at all times within the spirit and letter of the code of ethics and avoid any dishonest, illegal or unethical actions.

It is our responsibility to comply with all the healthcare laws, including detecting and preventing fraud and abuse in government healthcare programs. Novant Health has a number of policies and procedures designed to detect such fraud and abuse as well as provide information about laws and the rights of team members. You should read the code of ethics, the compliance plan, the conflict of interest policy and the gifts and business courtesies policy, for example, and become familiar with them.

The Novant Health code of ethics, which may be updated from time to time, (available on I-Connect, the Novant Health intranet, as HR Policy 7070 and in Appendix A of this handbook) captures in written form the ethical principles that guide our organization. If you have any questions, or if you are concerned about a possible violation, talk with your leader, corporate compliance, employee relations or call The Alert Line.

Equal employment opportunity

It is the policy of Novant Health to hire, promote and assure equal employment opportunities for all current and prospective team members without regard to race, color, religion, sex, national origin, age, disability, veteran's status, genetic information, sexual orientation, gender identity or any other characteristic or status protected by law.

For additional information, please see HR policy 2000 Equal Employment Opportunity.

Reasonable accommodation of protected disabilities

Novant Health also will provide reasonable accommodations to any team member with a known disability who is otherwise qualified to perform the essential functions of his or her job. A team member who believes that he or she requires a reasonable accommodation because of a protected disability must notify the Hartford of the issue so that an interactive dialogue can begin on the subject of a proposed accommodation.

No team member will be retaliated against because he or she request a reasonable accommodation due to or because of a protected disability.

Team members may submit a medical accommodation request by contacting the Hartford by telephone or online at 1-800-549-6514 or online at www.thehartfordatwork.com.

Reasonable accommodation for religious beliefs

Reasonable accommodations requests because of a religious belief will be evaluated on a case-by-case basis. No team member will be retaliated against because he or she requests a reasonable accommodation due to a religious belief.

Team members may contact the Human Resources Service Center by telephone 1-800-890-5420 or online at <https://novant.service-now.com/sp>

Harassment and bullying

Novant Health is committed to providing an environment in which you are treated with dignity and respect and which is free from all forms of unlawful harassment, whether on the basis of race, color, religion, sex, national origin, age, disability veteran's status, genetic information, sexual orientation, gender identity or any other characteristic or status protected by law.

Therefore, all actions that could be construed as harassment or bullying are prohibited. This includes any verbal, physical, written or visual conduct that is or has the effect of being malicious, obscene, threatening, or intimidating to another team member or that could contribute to a hostile work environment on the basis of race, color, religion, sex, national origin, age, disability veteran's status, sexual orientation, genetic information, or sexual orientation, gender identity, or any other characteristic or status protected by law.

If you believe that you have been the subject of harassment or bullying or have observed this treatment of another person, you should promptly report the incident to your leader or employee relations using HR Service Now on I-Connect. You may also call The Novant Health Alert Line at 800-350-0094.

For additional information, please see HR policy 2005 Harassment and Bullying.

Conflict of interest

A conflict of interest is any circumstance when your private interest conflict with your ability to perform your job duties effectively and objectively. Novant Health's conflict of interest policy and code of ethics provide guidance to team members in avoiding situations which are, or appear to be, in conflict with their responsibilities to Novant Health.

Any circumstance that might lead to the appearance of a conflict of interest should be disclosed on the conflict of interest form and fully evaluated to determine if an actual conflict of interest exists. Certain team members are designated as having special decision-making responsibilities on behalf of Novant Health. These team members are required

to complete the conflict of interest form annually. You will be notified if you are in such a position. For additional information, please see HR policy 7075 Conflict of Interest.

False Claims Act

The Federal False Claims Act prohibits any person from submitting a false or fraudulent claim for payment to the US government. It is designed to prevent fraud and abuse in government healthcare programs. Medicare and Medicaid are two primary government healthcare programs.

A **claim** is a request for money, like a bill for healthcare services. **Fraudulent** situations could include:

- Intentional fraud
- Not accurate (without checking)
- Ignoring information (on purpose) that proves its accuracy

Fraudulent claims (deliberate or not) include:

- Knowingly making false statements
- Falsifying records
- Double billing for services
- Billing for services never performed

Whistleblower provision

A "whistleblower" is a person who reports something he or she believes is an illegal act.

Under our whistleblower provision:

- Team members are encouraged to come forward and report misconduct.
- Team members are protected against any action that discriminates against their employment, including suspension, demotion, harassment or termination of employment.
- A team member is protected regardless of whether it's true or not (however, a team member may not knowingly make false statements).
- Potentially, the whistleblower may receive a percentage of the amount recovered in the lawsuit.

False Claims Act (continued)

Corporate compliance program

Our corporate compliance program supports compliance with the False Claims Act by:

- Monitoring and auditing to prevent or detect errors in coding or billing.
- Educating team members that they are responsible to report any concern about a possible false claim.
- Investigating all reported concerns and correcting any billing errors when discovered.
- Protecting team members from adverse action when they do the right thing and report any genuine concern.
- Establishing policies and procedures for the prevention and detection of fraud waste and abuse. Those policies include but are not limited to the compliance plan, the code of ethics, anonymous reporting of wrongdoing policy and the False Claims Act Policy. These policies may be found on I-Connect, the Novant Health intranet.

The Alert Line

Call 1-800-350-0094 or

<https://novanthealth.alertline.com>

Every Novant Health team member has a personal responsibility to ensure that we conduct business in manner that complies with our policies and all applicable laws. If you have a question or know of a situation in which you're unsure what to do, we encourage you to talk with your manager, a Novant Health leader in your chain of command, corporate compliance, human resources / employee relations through HR Service Now on I-Connect or consult the Novant Health code of ethics for further guidance. You may also call The Alert Line or go online to <https://novanthealth.alertline.com>.

About the Alert Line

The Alert Line is a way to voice your concerns as a team member of Novant Health. You can call this toll-free service 24 hours a day, seven days a week, or access it electronically to ask work-related questions or to report information you may have about a possible violation of our code of ethics.

Also, any questions or reports related to detecting and preventing fraud and abuse, including fraud and abuse in government healthcare programs, can be reported. You may remain completely anonymous.

By calling The Alert Line you may voice your concerns about issues like:

- Billing for services not rendered or goods not provided
- Falsifying certificates or records to maximize payments
- Failing to report overpayments or credit balances
- Duplicate billing
- Unlawfully giving healthcare providers, such as physicians, inducements in exchange for referrals for services
- Conflicts of interest (as defined in Novant Health's Conflict of Interest policy)
- Misuse of property, technology and confidential information (as defined in Novant Health's Confidentiality policy)
- Bribes
- Kickbacks
- Inappropriate business courtesies and gifts
- Inappropriate medical record alteration or destruction
- Theft and fraud
- Sexual and other unlawful harassment
- Discrimination
- Violations of patient rights
- Health, safety and environmental issues
- Failure to adhere to professional standards of practice
- Potential criminal violations
- Employee relations

Performance expectations

As a Novant Health team member, you were selected from among many applicants because we believe your talents and abilities will help us achieve our goals. We need and expect you to carry out your responsibilities effectively and efficiently, to suggest new and better ways to do your job and to continue to develop yourself so that you can meet the challenges of the future. These and other factors add up to the Novant Health expectation of superior performance.

Your leader will evaluate your job performance in accordance with the practices in your facility. We encourage you to take an active role in ensuring that these discussions take place.

Attendance and punctuality

The Novant Health attendance and tardiness behavior policy helps to assure that we deliver the most remarkable patient experience in every dimension, every time. An individual team member's attendance behavior has a direct impact on their overall performance. In order for a team member to be considered a satisfactory or above performer, they must be at work when scheduled and manage their absences in accordance with this attendance policy.

You are expected to arrive on time and be ready to work when the shift begins. You are also expected to work to the end of your shift. Late arrivals, early departures and other unscheduled absences are disruptive to patient care and should be minimized.

Time Keeping

All non-exempt team members are required to clock in using a badge reader, telephone or PC at the beginning of their shift and clock out at the end of their shift. Exempt team members are not required to clock. Here is additional information about timekeeping:

1. Team members who work in more than one department during their shift must "department charge" when changing departments using the designated clocking device. When traveling to another location, the department charge should be entered prior to leaving the current location.
2. You must clock out upon leaving the premises during the shift for any non-work-related reason

(doctor or dental appointments, for example) and clock in upon returning.

You must clock out when visiting onsite team member medical clinics at Forsyth Medical Center and Presbyterian Medical Center. This also applies to team members who work at Novant Health Medical Group Physician practices and visit their onsite clinics. Only exceptions to this rule are when a team member has a work-related injury or illness, workers compensation examination, or is directed to go to the clinic by his/her leader. In these situations, team members must stay on the clock while attending such appointments.

4. You must clock out and back in for lunch, if required.
5. You may not clock in more than seven minutes ahead of your scheduled shift starting time or clock out more than seven minutes after your shift ending time without prior supervisor or manager approval.
6. You may not, for any reason, clock in or out for another team member. Clocking in or out for another team member is considered a Non-Negotiable offense under the I-Commit Performance Improvement Policy and will result in termination of employment.
7. Team members who are not on duty are expected to leave the interior of our facilities and any exterior working areas within ten to fifteen minutes after their shift ends and should not return to the interior of our facilities or any exterior working areas except to report to work, seek company services or visit a patient who is admitted to a Novant Health facility. If a team member has to wait on another Novant Health team member because of transportation or other reason, the off-duty team member must wait in a public area or outside of the building.
For additional information, please see HR policy 3120 Time Keeping.

The attendance program

Your attendance record is maintained on a 12-consecutive month basis, beginning with your first "occurrence." Regardless of the reason (except as noted below, an unscheduled absence or tardy will be counted as an occurrence under this policy.

Occurrences are measured as follows: Coaching action will be based on the number of occurrences in a rolling 12-month period. Occurrences are incurred as follows:

- Tardies: Up to 7 minutes = ½ an occurrence
- Greater than 7 minutes = 1 occurrence
- Unscheduled Absences = 1 occurrence

Approved scheduled time away from work using paid time off (PTO) will not count as an occurrence on your attendance record.

Occurrences are accumulated over a rolling 12-month period. For example, an occurrence incurred in November remains on your attendance record until the following November. An occurrence incurred in December remains on record until the following December and so on. It's important to note that absences and tardies are tracked separately. Under the I-Commit Performance Improvement Policy, the following will be used as a guide to evaluate attendance concerns.

Steps for unscheduled absences in a 12-month period	
Four (4) occurrences	Coaching Session
Five (5) occurrences	Coaching Session
Seven (7) occurrences	Choice Day
Nine (9) occurrences	Discharge
Steps for tardies in a 12-month period	
Five (5) tardies	Coaching Session
Seven (7) tardies	Coaching Session
Ten (10) tardies	Choice Day
Twelve (12)	Discharge

Please be aware that although this policy establishes certain suggested steps for corrective action, nothing in this policy is intended to modify Novant Health's at-will employment policy. Novant Health reserves the right not to take any or all of the steps identified in this policy in a particular order, as all employment with Novant Health is at-will. In all events, corrective action will be taken in the best interest of Novant Health.

Exceptions

The following unscheduled absences will not be counted as occurrences:

- Bereavement leave
- Workers compensation incidents
- Military duty
- Family medical leave
- Jury duty
- Approved Leave as an accommodation

In these circumstances, you still need to notify your department prior to the event when possible.

Patterns of absences

Although occurrences roll off of your record after 12 months, habitual offenders, including those who have established a pattern of absences (such as reporting to work in excess of two hours late), consistently being performance managed through the –Commit Performance Improvement Process, or routinely calling in on Mondays or Fridays, may be subject to the I-Commit Performance Improvement Policy even though old infractions have rolled off the record.

Call-in procedure

When you have an unscheduled absence, you must follow your department's call-in procedure. Be sure to provide the reason for the absence and your expected date of return.

If you are absent for more than one day, you must call in daily unless you are on preapproved leave or other arrangements are made to keep your department leader informed.

If you're going to be late, you should notify your supervisor as soon as possible and provide your estimated arrival time. The notification doesn't excuse the tardiness but simply notifies your supervisor that a schedule change may be necessary.

No call / no show

Not reporting to work and not calling to report the absence is a serious matter.

No Call-No Show: Team members who are absent for any reason without notifying their department leader/designee will have a coaching session, unless there are extenuating circumstances (e.g. doctor's note of hospitalization, accident etc.) A second "no call-no show" in a rolling 12-month calendar period will result in a choice day discussion. The third "no

call-no show” will be cause for termination with no right of appeal.

For additional information, please see HR policy 6065 Attendance and Tardiness Behavior.

Flexible work schedules

Novant Health supports the use of flexible work schedules whenever possible to help balance the demands of work and family life. Flexible work schedules could include flextime, staggered hours, flexplace (telecommuting), weekend programs, compressed work weeks and job sharing. If you are interested in an alternative work schedule, talk with your leader. Please remember that patient care and department workloads must be considered in work schedule decisions.

Professional Image

Personal appearance plays an important role in the public’s perception of team members as professionals and Novant Health as an organization.

A policy cannot cover every eventuality so always use good judgment, keeping in mind the nature of your work, your personal safety and your need to interact with patients, vendors and the public.

Your department or facility may have specific dress codes regarding uniforms and other appropriate attire, particularly in clinical areas.

General guidelines

- Extremes in makeup, hairstyles/hair colors, clothing, tattoos and body piercing should be avoided.
- Offensive and vulgar tattoos are not permitted to be visible at any time.
- Strong perfumes, lotion, colognes and aftershaves are not permitted.
- All team members must wear a Novant Health-issued team member name badge in an area above the waist. The badge identifies an individual as team members of the organization.
- Clothes should be clean and neatly pressed.
- Open-toed shoes / sandals cannot be worn when working in or around clinical areas.

- Hair should be well groomed, and beards and mustaches must be neatly trimmed.
- Hats or other head coverings may only be worn as required as part of the uniform or for religious purposes.
- Nails must meet the guidelines specified in each facility’s infection control policies.
- Jewelry must be conservative and not interfere with a team member’s duties.
- Earrings will not exceed 1 inch in length and/or diameter. Matched earrings in simple styles may be worn and should be no more than two (2) earrings per ear.
- Professional specialty pins and insignias are permissible; non-functional pins promoting other organizations or causes are not allowed. Exceptions include:
 - Pins or buttons issued by Novant Health for a specific initiative, and only for the duration of the initiative; and
 - Pins, buttons and insignia protected by the National Labor Relations Act which may be worn only in locations other than patient care areas. See Solicitation and Distribution policy NH-HR-6030 for a description of patient care areas.

Business casual attire

It is the policy of Novant Health to permit business casual attire in certain facilities and/or departments. However, in all cases attire must be appropriate to the care setting (as addressed below under “Unacceptable Attire”). Also, team members permitted to wear business casual attire are expected to use good judgment as to when it is appropriate to dress more formally (for meetings or presentations inside or outside of the facility. **Please refer to the Professional Image Policy #NH-HR-6025**

Unacceptable attire

Unacceptable casual dress includes, but is not limited to:

- Denim, with the exception of a company-sanctioned philanthropic activities or unless otherwise approved.
- Jogging suits

- Shorts or capri pants; capri pants are defined as mid-calf to just below the knee. Pants that fall below mid-calf are acceptable presuming they follow the other guidelines of the policy.
- Beach shoes (such as flip flops, surf shoes and sandals)
- T-shirts; with the exception of Novant Health aubergine t-shirts for “Promise Day”
- Tank tops, halter tops or bare midriiffs
- Tight leggings/spandex stretch pants
- Strapless or spaghetti-strap sun dresses
- Street and non-scrub outerwear such as coats, sweatshirts and hoodies. These items are for outside wear and thus should only be worn when entering or exiting a facility.
- For safety reason “croc” or “croc style” shoes with plastic soles are not allowed in Novant Health facilities.

For additional information please see HR policy NH-HR-6025 Professional Image.

Confidentiality

Novant Health complies with HIPAA, the Health Insurance Portability and Accountability Act, and similar state laws. HIPAA guarantees rights of privacy to patients and limits how we use individually identifiable health information. Our privacy office provides resources that you can call upon to ensure compliance with the law.

Privacy representatives can be reached from any facility to answer your questions and provide guidance on protecting patient privacy. Our privacy policies also apply to Novant Health information covering the past, present and future activities and relationships concerning Novant Health’s business, physicians, team members and others. In addition, the group health plan (“Plan”) of Novant Health provides a HIPAA Privacy Notice which explains how medical information about you may be used by the Plan.

Please remember you should not discuss patient or Novant Health Confidential Information (as defined below) with anyone not employed by Novant Health except as permitted by policy, nor should you share this information with other Novant Health staff unless there is a job purpose to do so. Also, do not access any Confidential Information stored in

Novant Health’s private or confidential records unless you are authorized to do so and need it to perform your job duties.

Novant Health takes steps to maintain the confidentiality of such information and it is to remain confidential both while you are a team member and afterward, if your employment should end.

All physicians and staff are annually required to sign a confidentiality agreement which confirms the individual understands of the individual’s obligations to protect and secure patient and other Novant Health Confidential Information. Violations of the confidentiality policies could include, but are not limited to:

- Accessing protected health information (in written or electronic form) about any patient, **including fellow team members, or family members**, by someone who is not assigned to care for the patient or for which there is no job-related, appropriately approved need to know.
- Using or disclosing protected health information for any purpose unrelated to the patient’s care or for which there is no authorized job-related purpose.
- Unauthorized deletion or changing of patient information (in written or electronic form).
- Allowing use of or using an individual’s sign-on and/or password to a Novant Health system by another person.
- Lending or using an ID badge belonging to another person.
- Accessing or disclosing personnel files or other team member records unless one is authorized to access those records to perform one’s duties within the business of Novant Health.
- Knowledge of and failure to report inappropriate use or disclosure of patient health information by any worker.

Confidentiality (continued)

- Accessing any Confidential Information that one is not authorized to access, that does not come to one's attention in the normal course of one's work activity, and that is not necessary to perform one's duties within the business of Novant Health.
- Knowledge of and failure to report loss of Novant Health computers or portable devices.
- Access to patient or Novant Health Confidential Information in violation of Novant Health confidentiality policies.
- Access in violation of policy HIPPA-Patient Access to Protected Health Information NH-IM-RI-7042

Protected health information (PHI) refers to individually identifiable information (including demographic information) relating to a person's health, to the healthcare provided to a person or to payment for healthcare.

Confidential Information as defined by Novant Health policy, includes PHI, as well as information regarding our trade secrets, know-how, technology, patient lists, pricing, non-public sales and profit data, and strategic business plans (for instance, possible mergers and acquisitions). "Confidential Information" also includes other team members' and patients' sensitive personal identifying information (e.g., social security numbers, credit card information, bank account information, or PIN numbers).

If you witness or suspect any violations of confidentiality you must report the incident to his or her leader. You also may anonymously report a suspected violation by calling the Alert Line. Novant Health will not retaliate or allow retaliation against anyone who, in good faith, reports a suspected violation.

Violation of these confidentiality guidelines, or the more specific requirements that may apply to your position, will result in appropriate disciplinary action, which may include termination of employment and legal action.

For additional information, please refer to our Code of Ethics HR Policy 7070, the Information Confidentiality Policy NH-IM-7060 and the HIPPA Privacy Notice-Appendix D.

Media policy

Any media inquiries you receive seeking the official position of Novant Health or a statement on behalf of Novant Health should be routed immediately to Novant Health marketing and public relations. It is the responsibility of marketing and PR to determine the nature of the call, whether it is appropriate for Novant Health to participate and if so, who should serve as the spokesperson.

If a media request is made outside of regular business hours, a qualified person is on call 24 hours a day and can be reached through the procedure established for your facility

Contact with attorneys

Like all companies, Novant Health may become involved in legal disputes and litigation. Outside attorneys occasionally contact team members directly to get information about lawsuits involving Novant Health. Team members should politely, but firmly, refuse to discuss anything with any attorney seeking information about a lawsuit involving Novant Health. Instead, refer the attorney to Novant Health's in-house counsel.

In-house counsel will share with the attorney Novant Health's practice concerning the availability of witnesses. Nothing in this handbook is intended to interfere with a team member's obligation to comply with a valid legal process or a team member's legally protected rights.

License, certification, registration

Certain professional health occupations require licensure. Other professional or technical team members are required to be registered or certified by accrediting organizations.

Human resources will verify licenses, certifications and registrations of applicants before they actually begin work by logging onto the accrediting association's website (source verification). Thereafter, renewal is the responsibility of each individual.

Team members' who do not provide current credentials by the expiration date will be suspended without pay for a maximum of two weeks and be placed on a Performance Improvement Plan under the I-Commit policy and not be allowed to return until current credentials are provided. Paid time off may not be used. If credentials are not provided within two weeks, the team member will be terminated. Novant Health has no obligation to hold a job open for a team member who has allowed his or her credentials expire.

License, certification, registration (continued)

If a team member is on a company-approved leave when a required certification expires, the team member will have two weeks to renew the certification upon return to active employment. If the team member does not renew the certification within two weeks, termination will occur. For additional information, please refer to our License, Certification and Registration Policy HR 3095.

Competency assessments

Novant Health conducts initial and on-going competency assessments of team members. Competence is defined as having the knowledge, skills and abilities to meet and consistently demonstrate performance as identified in the job description.

Competency is assessed during department orientation. Orientation skills checklists to validate initial competency will be completed and placed in your department file. Each year thereafter your leader will complete a competency evaluation using your current job description, performance standards and skills checklists. A copy will be kept in your department file. You will also participate in an annual performance evaluation. For additional information, please refer to our Performance Feedback Policy HR 5054.

Please be aware that nothing in this policy on competency assessments modifies the at-will employment relations between you and Novant Health.

Exclusion from care

If a treatment plan for a patient conflicts with your personal values or religious beliefs, you may request to be excused from participating in that

aspect of treatment or care.

Examples of situations where accommodations may be made include, but are not limited to, caring for a patient having an abortion, caring for patients receiving blood transfusions, withholding nourishment and fluids, withdrawing life-sustaining support, administering vaccines and use of experimental drugs, procedures or treatments.

Submit in writing, or, in an emergency, within 24 hours after the incident, the specific aspects of care from which you are requesting to be excused and the reasons for the request. If no other assistance is immediately available, and the patient's life is in jeopardy, you must provide the needed service to the patient.

The leader may assign other work or change your work schedule in order to meet the department's workload. For additional information, please refer to our HR Policy 2015 Staff Rights.

Influenza immunization

As an organization committed to the health and safety of its patients, Novant Health requires all team members, contracted personnel, volunteers, students, vendors and medical staff to receive an annual flu vaccination. Vaccinations will be provided at no cost during annual flu clinics. New team members must show proof of vaccination upon employment or receive a vaccination within seven days of their initial start date. If a valid medical or religious exemption is granted, masks must be worn for the duration of flu season.

Annual health screening

Annual health screenings are an important way to monitor the work environment to ensure that patients, visitors and team members are protected from risks associated with exposure to occupational hazards and infectious disease.

Each year Novant Health will conduct facility risk assessments to determine if annual tuberculosis (TB) screening of team members will be required. Team members who fail to have a required TB screen will be suspended without pay for a maximum of two weeks and will not be allowed to return until the TB screen is completed. Upon return, the team member will be

placed on a Performance Improvement Plan. Paid time off may not be used. If the screening is not completed within two weeks, the team member will be discharged. In addition,

Novant Health is under no obligation to hold a job open for a team member who has been placed out of work because of a delinquent TB screen.

Annual health screening (continued)

A health assessment may be required for the following situations:

- Is injured on the job and an assessment is required under the Workers' Compensation law
- Wishes to return to work after an injury or illness
- Family/medical leave, leave as an accommodation, or a disability lasting over five days must be cleared through team member occupational health prior to returning to work
- Team members given any work restrictions (hourly, lifting, bending, pushing) must clear through team member occupational health with a health provider note that lists specific restrictions or desires a reasonable accommodation due to a disability and a medical assessment is necessary or when other laws require a medical exam or screening

Any person who shows signs of upper respiratory infection, skin lesions, draining wounds, diarrhea or other communicable diseases may be placed out of work if, in the judgment of team member occupational health, it is necessary for the protection of patients and others.

Company property/lockers

Lockers may be available for team members. However, Novant Health is not responsible for property stored in the lockers.

Team members should not consider any property such as their locker or desk as their own personal property. The property is owned by Novant Health and is subject to search by authorized personnel if violations of any relevant group rules or policies are

suspected. You are not permitted to remove any company property from the premises unless approved, in writing, by your leader. If you have knowledge of or suspect any illegal activity by another team member, report such activity to your leader.

Personal use of office equipment

Novant Health relies heavily on its computers, telephone lines, fax machines and other office equipment to keep its operations flowing smoothly. These resources are limited and should be used to handle business transactions. Please use good judgment and discretion when using company equipment and limit use for personal needs.

Excessive use will be addressed through the I-Commit Performance Improvement Policy. Personal long-distance phone calls are not permitted on company phones.

If you need to make a personal long-distance call, charge it to your home telephone number or personal credit card number.

Computer security/Internet use

Many team members use computers in their jobs every day. It's important to understand that information is considered a corporate asset and must be protected against all forms of unauthorized access, use and distribution. It is absolutely essential that we protect the privacy of our patients, customers, team members and business plans.

Accordingly, Novant Health will maintain security sufficient to ensure the confidentiality, integrity, and availability of important information. No one should have any expectation of privacy when using Novant Health information systems. In order to ensure that the security of our systems is not compromised, and that team members' use of our systems does not violate our policies. Novant Health reserves the right to deny access to Internet services and to retrieve, inspect, or monitor access to Novant Health equipment, Novant Health systems and to other online services.

All team members are expected to comply with Novant Health information security policies and any additional security directives. Penalties for noncompliance may be subject to the I-Commit

Performance Improvement Policy, including termination of employment and/or criminal prosecution, depending upon the severity of the incident. Immediately report any suspected instances of information theft and/or abuse, as well as potential threats (such as hackers or computer viruses) to your leader.

Use of the Internet and Email

Novant Health provides access to the Internet for team members who have a business-related need. Access addresses are the exclusive property of Novant Health. They are assigned to support business, education and research consistent with work-related objectives and should be considered a privilege, not a right. Also, all email and other electronic messages received or sent through Novant Health equipment or systems are the property of Novant Health.

If you are granted access to the Internet, you will be informed of our policies and procedures and may be asked to sign an agreement to honor these policies, procedures and laws dealing with information transmission. Violation of the Email Usage Policy (NH-IM-7020) or the guidelines below may be subject to the I-Commit Performance Improvement Policy and up to and including termination of employment.

Email guidelines

The following apply guidelines apply:

- **Chain letters:** forwarding chain letters to other users inside or outside of Novant Health is prohibited.
- **Messages containing viruses:** Novant Health employs anti-virus solutions to prevent viruses and other types of malicious data from entering the corporate network. Information technology services (ITS) will initiate notification about viruses once they have verified the presence of an active threat. Users should direct any suspicious emails received to spam@novanthealth.org. Deliberately emailing or forwarding an email known to contain a virus to any other internal address, unless instructed to do so, is a violation of the email policy.
- **Sending global email:** Global email for business purposes (sending an email to all users or all users

in one market) should be used sparingly and may be restricted. Global emails may not be sent to promote events that are not directly sponsored by Novant Health or any of its legal entities. If you have a question or need assistance with global communication, call marketing and public relations in your market.

- **Personal use:** Personal use of Novant Health email should be limited. All email communications (including content of email messages) are the property of Novant Health and will not be released to workers upon termination of employment. Novant Health email should not be used to advertise for or sell personal items or services. Novant Health email accounts should not be used to register to receive non-business related email, such as shopping, surveys, eMagazines social media, or news.
- **Unauthorized access / confidential information:** It is a violation of Novant Health policy for any worker to obtain unauthorized access to the email files or communications of others. Team members are not required to provide their manager with access to their email account.
- **Gaining access to other users' email accounts:** Occasionally, there may be circumstances that require access to another user's email account for day-to-day administration and other legitimate business purposes. A user may grant authorized access to another worker through the email system in support of a business purpose. If a user does not grant such access, a vice president's approval is required to access a current team member's email account. A vice president's or director's approval is required to access a terminated worker's account.
- **Forwarding messages:** Forwarding email messages without a legitimate business purpose is prohibited.
- **Transmission of illegal data:** Transmission of data that is a violation of local, state or federal law, or Novant Health policies, is prohibited.

Email guidelines (continued)

- **Secure transmission of information:** Any email containing patient or Novant Health confidential information must be encrypted by including “Secure” in the email subject line and comply with applicable email and privacy policies.
- **Hostile work environment:** Information sent and received through the email system that may be considered by other workers to create a hostile work environment is prohibited. Types of emails that may create a hostile environment include, but are not limited to, pornographic or sexually related material, material that is biased toward race, ethnicity, sex, age, disability, religion, national origin or sexual orientation. Jokes, magazines, or personal emails that contain this type of information must not be sent within, into or outside of the Novant Health system.

Reporting wrongful use

If you receive data that you think is in violation of the law or Novant Health policy, report it to your leader immediately or contact The Alert Line.

For additional information, please see NH-IM-7020 E-Mail Usage

Solicitation and distribution

Novant Health is responsible for promoting the efficiency and the quality of the important services it performs. The purpose of the solicitation and distribution policy is to establish guidelines for solicitation and distribution (including electronic communications) to avoid disturbing patients and to avoid disruption of patient care and facility operations.

Solicitation and distribution of items, material or literature on all premises operated by Novant Health (owned or leased) shall be permitted only in accordance with this policy. Any requests that are not explicitly covered under this policy will be considered non-compliant.

Non-team member solicitation

- Solicitation or distribution of literature by non-team members in public and non-public facility areas is prohibited.
- Non-team members may not set up

unauthorized tables or booths or attach or affix materials of any kind (e.g. stickers, signs) on Novant Health owned or leased property, other than posting on designated team member bulletin boards with prior approval by human resources.

- Non-team member vendors may not promote on premises any benefits or services not subsidized by Novant Health.
- Auxiliary or foundation sponsored sales are allowed under this policy. Auxiliaries or the foundation can:
 - Raise money for the facilities through events, sales and activities of any kind, anywhere on premises, and
 - Advertise their sales and activities however they wish on premises
- Auxiliaries or foundations cannot raise money or solicit for:
 - Non-health related community charities
 - Team member scholarships or other activities that directly benefit team members instead of the facility itself

(Note: this is the “Auxiliaries” exceptions created by the National Labor Relations Board (NLRB)

- Non-team members who are offering services as part of Novant Health’s wellness efforts are permitted but must be approved by authorized wellness program personnel. Services include (but are not limited to):
 - Chair massage
 - Makeovers and other spa-like services
 - Vendors for health fairs
 - Fitness classes
- Non-team members can sell or solicit on Novant Health property as long as ALL the money raised goes to support Novant Health, its programs / functions or community health projects.
- Non-team member vendors can sell or solicit products on the premises that are related to Novant Health’s programs and functions. Examples include:

- Pharmaceutical and medical device sales
- Medical or work-related books
- Educational offerings related to Novant Health's functions or professional advancement of team members.

Team member solicitation

General

Team members may not solicit on Novant Health premises for any purpose during working time. During non-working time, team members may not solicit in immediate patient care areas. Immediate patient care areas include patient waiting rooms, patient rooms, operating rooms and places where patients receive treatment.

Individual soliciting for not-for-profit organizations

Individual soliciting for not-for-profit organizations includes, but is not limited to, Girl Scout cookies, Boy Scout popcorn or school fundraisers and will be allowed but must in accordance with the Solicitation and Distribution policy (in other words, it may only occur during non-working time and distribution of materials may only occur in non-working areas). Novant Health email may not be used for this purpose.

Solicitation for personal gain

Team members may not advertise or sell products from private business enterprises on Novant Health property or using Novant Health email, unless they are an approved vendor with Novant Health. This includes, but is not limited to, cosmetic products, jewelry, household products, handbags, raffle tickets and the like. Violations will be addressed according to the I-Commit Performance Improvement Policy.

Distribution of literature/materials

Team member distribution of literature is restricted to non-working areas and during non-working time. Both the team member distributing literature and the team member receiving the literature must be on non-working time. Working time is the time a team member is expected to be working and does include rest, meal or other authorized breaks.

Solicitation or distribution of literature must not impede access in or out of buildings. It must not

impede physical movement within the building or interfere with the work being performed.

Team members may not set up unauthorized tables or booths or attach or affix materials of any kind (e.g. stickers, signs) on Novant Health owned or leased property, other than posting on designated team member bulletin boards with prior approval by human resources.

Non-individual soliciting for hospital / practice / department programs or functions (requires HR approval)

Team member solicitation that supports Novant Health or its programs, or a community health-related project is allowed as long as the money raised goes to a project, program or function.

Non-Individual soliciting for any charitable activity sponsored and approved by Novant Health

Soliciting and fundraising for any Novant Health - sponsored (where Novant Health materially contributes) activities is permissible as long as Novant Health conducts the fundraising (e.g. United Way). Solicitation is allowed in patient care areas and during work time. Novant Health email may be used to solicit.

Non-Individual soliciting for charitable activity NOT sponsored by Novant Health (requires senior leader approval) that is NOT healthcare related or Novant Health mission related

Charitable activities, including charity fundraising, not conducted by Novant Health itself but on Novant Health premises are limited to three organizations and events per year.

The facility or market leaders will select the charitable organizations and communicate with leadership. Leaders and staff should not conduct independent fundraising or activities outside of the fundraising for these three organizations. Solicitation is allowed in patient care areas and during work time. Novant Health email may be used to solicit.

Team members can solicit on Novant Health premises during non-working time and not in immediate patient care areas.

Soliciting for and by a department (Requires department leader approval)

Individual team members can solicit to raise money for a department birthday cake fund or other recognition events or celebrations. The money raised must go back to the department and all team members in the department are invited to participate.

Novant Health departments or business units may conduct fundraisers such as bake sales to raise money for department recognition or celebration events.

Solicitation must be confined to non-patient care areas and during non-work time. Novant Health email may not be used.

Violations of this policy will be subject to the I-Commit Performance Improvement Policy up to and including termination of employment. All solicitations that require approval from human resources must be approved through completion of the solicitation request form. See HR policy 6030 Solicitation and Distribution.

I-Commit Performance Improvement Process

Successful job performance (performance, behavior and attendance), both individually and collaboratively, depends upon an array of factors including - first and foremost - a clear and full understanding of and commitment to workplace expectations and guidelines.

This policy is designed to ensure that all team members commit to successful job performance to deliver a remarkable customer experience, every dimension, every time.

Novant Health culture of coaching focuses on performance conversations to ensure workplace performance expectations and guidelines are communicated clearly and team members are responsible to perform successfully. I-Commit is a performance improvement policy, which has no progressive discipline steps or impact on bonus eligibility or market increase. The I-Commit process may include the following:

- **Coaching Conversations**
- **Choice Day/Improvement Plan**
- **Discharge**

It's important to note that Novant Health reserves the right to use all or none of the steps as it deems appropriate, depending upon the seriousness and recurrence of the problem. Employment at Novant Health is "at will." This means you may terminate your employment at any time, for any reason or for no reason at all. Novant Health reserves the same right to terminate your employment at any time, with or without cause.

Coaching Conversations

In 1:1 conversation(s) with the team member, the leader explains the unacceptable performance and/or behavior to the team member and the actions necessary to improve. The 1:1 conversation(s) must be summarized through email to the team member. This will serve as documentation and confirmation that the conversation(s) occurred. The leader has the discretion to determine the appropriate number of coaching conversations needed to ensure the

team member fully understands (or should fully understand) the expectations and has sufficient time to demonstrate sustained improvement.

Choice Day (Designated time to reflect and decide)

If there is insufficient improvement following the coaching conversation(s), the team member will have a day/shift (minimum of 24 hours) to decide whether he/she wants to continue to work for Novant Health in accordance with the expectations of the job and the leader. The leader will provide the team member with the I-Commit Choice Day Acknowledgment form and the Performance Improvement Plan.

The team member will be paid, for his/her normally scheduled work time during this 24-hour period. The team member's choice should be communicated back to the leader at a scheduled meeting and using the I-Commit Choice Day Acknowledgment form. The 24-hour period is a time for the team member to consider the Novant Health culture, service standards, his/her job responsibilities and expectations; take accountability and identify actions necessary to correct all performance issues by completing the Performance Improvement Plan if they choose to commit.

The team member has two choices, he/she may:

- return to work the next scheduled work day with a commitment to successfully perform the duties of their job; or decide to voluntarily resign from employment, effective immediately.

If the team member decides to voluntarily resign, the team member and leader must then sign the I-Commit Choice Day Acknowledgment form acknowledging resignation and the payout of the notice. The original form must be sent to the team member's file in Human Resources. A copy of the form should be kept in the team member's departmental file. The team member will not work the required notice but will be paid for the notice period according to the Novant Health Resignation Policy.

Examples of Performance and/or Behaviors that Novant Health considers inappropriate and may result in action taken under this Policy:

A list of examples has been created to provide guidance to all team members and leaders on types of performance and/or behaviors that will be addressed under this policy. This is not an all-inclusive list:

Non-Negotiables

These violations are serious in nature and, except in unusual circumstances, will result in immediate termination, following an investigation.

- Stealing
- Patient safety/harm
- Violence: physical, verbal, incited, or inferred
- Fraud/falsification, actual or attempted.
- Harassment/bullying/ intimidation/hostile work environment: Physical, Verbal, incited or inferred.
- Sexual Harassment
- Information Confidentiality/Privacy- HIPAA
- Immoral & indecent conduct on NH premises, owned or rented, and using NH property.
- Illegal, non-prescribed, controlled drug/alcohol use and/or possession, on any NH premises, owned or rented, and during the use of NH Property.
- Refusal of fitness for duty/drug and alcohol testing
- Possession of firearms, dangerous weapons, explosives, etc. on Novant Health premises, owned or rented and during the use of NH Property.
- Gambling/Conducting Pyramid Scheme
- Failure to comply with compliance plan
- Intentional violation or willful disregard of Novant Health policies
- Refusal to comply with the Healthcare Worker Influenza Immunization Policy

Examples of Performance and/or Behaviors that Novant Health considers inappropriate and may result in action taken under this Policy:

This is not a non-exhaustive list:

- Willful violation of a Novant Health Red Rule (refer to the Performance Management Decision Guide for assistance in determining culpability and the appropriate level of discipline).
- Willful damage or destruction of Novant Health property.

- Willful interference, improper or false use, disabling, damaging or destruction of any Novant Health security system or component.
- Adjustment of a time record without supervisor/manager approval.
- Threatening language or behavior toward any person.
- Obtaining or conveying confidential information about Novant Health patients or trade secrets that you do not have proper authority.
- Sleeping on the job during working hours.
- Unauthorized leaving of Novant Health premises during working time.
- Gross negligence or intentional conduct, which could result in serious injury to, or the death of another person, or damage to Novant Health property.
- Failure to exercise responsible care, consideration or courtesy in dealing with patients.
- Willfully harboring any disease, which may endanger other persons.
- Willful work slowdown.
- Accepting bribes or kickbacks or engaging in any scheme to profit oneself to the detriment of Novant Health.
- Eating food from a patient food tray either before or after the tray goes to the patient.
- Eating food from the kitchen for which the team member has not paid.
- Violation of a law at any time or at any place, which reflects adversely on Novant Health.
- Failure to comply with Novant Health Service Standards.
- Failure to comply with the Tobacco-Free Environment Policy (NH HR 6045)
- Excessive tardiness.(NH-HR-6065 Attendance)
- Excessive absenteeism.(NH-HR-6065 Attendance)
- Failure to notify department manager in advance of absence or lateness for work.
- Performing careless or improper work.
- Failing to do acceptable quantity and quality of work.
- Being out of assigned area without authorization.
- Loafing or neglecting work.
- Failing to follow health safety or fire rules or regulations.

- Failing to obey instructions.
- Unauthorized operation of machines or equipment.
- Excessive time on breaks or taking unauthorized breaks.
- Committing an act contrary to Novant Health standards of conduct after being notified that the conduct was unacceptable by a supervisor or by Novant Health posted notice.
- Violation of no solicitation-distribution rule.
- Unnecessary waste of materials or supplies.
- Refusal to work overtime or special hours when required to do so.
- Failing to exercise reasonable care, consideration or courtesy in dealing with visitors.
- Failing to wear designated uniforms and failing to comply with regulations concerning personal hygiene and grooming. (These standards vary depending upon your classification and work area. If there are questions as to the applicable regulations, ask your immediate supervisor.)
- Creating or contributing to unsanitary conditions or to conditions creating bad housekeeping.
- Damaging, abusing or neglecting Novant Health equipment or supplies.
- Engaging in horseplay or disorderly conduct on Novant Health property.
- Failing to immediately report any injuries sustained on Novant Health property or in connection with work.
- Marking bulletin boards or notices contained on bulletin boards; removing bulletin board notices or materials without permission. (Nothing is to be posted on bulletin boards without the required level of approval in accordance with Novant Health's policy on Bulletin Boards.)
- Willful or reoccurring failure to comply with policies, procedures and/or regulations regarding applicable licenses, certifications or registrations.
- Using Novant Health systems to access the team member's own medical record. (Team members are to access their own medical record through channels available, which include HIM, MyChart and the team member's provider.

This procedure does not form an employment contract and the company reserves the right to add or delete steps according to individual circumstances. Novant Health reserves the right to take appropriate corrective action, up to and including **immediate** discharge.

For additional information, please see the I-Commit Performance Improvement Policy NH-HR-3121.

Team member complaint/concern resolution and appeals procedure

Novant Health encourages you to bring forth questions or concerns at any time. We also know it's important to have a procedure for those occasions when informal, on-the-job communication doesn't solve problems or settle differences of opinion. In brief, Novant Health provides these steps for problem resolution.

Please be aware that although this policy establishes certain suggested steps for complaints and appeals, nothing in this policy is intended to modify Novant Health's at-will employment policy. Novant Health reserves the right not to take any or all of the steps identified in this policy in a particular order, as all employment with Novant Health is at will. In all events, disciplinary action will be taken in the best interest of Novant Health.

Complaint/concern resolution process

Every team member is encouraged to take any problem, complaint, or suggestion, first, to his or her immediate supervisor. Should the complaint not be addressed to the satisfaction of the team member or if the complaint is directly related to the immediate supervisor, the following formal complaint/concern resolution process should be used.

The complaint/concern resolution process is an opportunity for team members to share their concerns and leaders to address the team member complaint/concerns within the leadership team. Team members must use the following process:

- The team member must access the team member complaint form via I-Connect under HR forms. Within five (5) calendar days of the occurrence of the event underlying the complaint/concern. The team member must put his/her complaint/concern in writing by completing the complaint/concern form and emailing it to the director/department leader of their area and copy it to the team member complaint/concern center mailbox.
- The team member may seek counsel and advice from HR/Employee Relations regarding the formal complaint/concern process.

- Within five (5) days after receiving the complaint/concern form, the director/department leader will meet with the team member to review the complaint and is responsible for ensuring with his/her direct report leadership team that the complaint/concern is investigated timely and thoroughly.
- All levels of leadership involved in the investigation are encouraged to seek the counsel and advice of HR/Employee Relations, as needed, at any stage of the investigation.
- The director/department leader is to communicate the complaint outcome to the team member within 10 days of the initial date of the team member meeting.
- The director/department leader is to report the final outcome of the complaint/concern to his or her vice president or one-up leader.
- The director/department leader is to forward investigative findings/complaint outcome to the team member complaint/concern center mailbox using the investigation of team member complaint/concern form.
- No team member will be penalized or experience reprisal for using the organization's complaint/concern resolution process.

Complaints/concerns alleging discrimination, harassment or any violation of any law prohibiting discrimination or harassment may be made directly to team member relations and/or the senior vice president of human resources and will follow the appeals procedure provided in Novant Health's complaints and appeals policy.

Complaints alleging unfair pay practices and/or compensation complaints may be made directly to compensation/ human resources, up to and/or including the chief administrative officer (with the exception of bonus and salary overpayment as explained below).

Appeals procedure

An appeal is defined as a team member's expressed feelings of dissatisfaction concerning conditions of employment or treatment by management, supervisors or other team members.

Examples of actions which **may** be causes for appeal include, but are not limited to:

- Discharge as a result of application of corporate policies, practices, rules, regulations and procedures believed to be to the detriment of a team member.
- Improper or unfair administration of team member benefits or conditions of employment such as paid time off (PTO), benefits, promotions, retirement, feedback sessions or seniority.

Actions which **may not** be appealed include:

- Bonus (amount or eligibility)
- Salary overpayment (repayment)
- Performance evaluations (coaching sessions/Improvement plans)
- Position eliminations (displacements)
- Job reclassifications / reassignments
- Organization-wide or group benefit administration decisions
- Discharges for Non-Negotiable violations (must have been investigated thoroughly in consultation with the HR/Employee Relations Department and discharge coordinated with HR/Employee Relations prior to action)
- Voluntary resignations (Including resignations under I-Commit)

No team member will be penalized or experience reprisal for using the organization's appeal procedure.

Any appeal filed will follow the procedures as outlined below and will refer to the provision(s) of Novant Health's policy, practice, procedure, rules or regulations alleged to have been violated and will adequately set forth the facts pertaining to the alleged violation. Employee Relations will coordinate all steps in the appeal procedure.

Appeals alleging discrimination, harassment or any violation of any law prohibiting discrimination or harassment may be made directly to the senior vice president of human resources. Appeals alleging unfair pay and benefit practices and/or compensation complaints will be made directly to compensation/human resources, up to and /or including the chief administrative officer (with the exception of bonus and salary overpayment as

explained above).

Step I – review by appeal leader level I

1. The appeal leader level I will review the appeal and meet with the team member. The appeal leader level I will provide a decision within five (5) calendar days to the Employee Relations Consultant who will communicate the decision to the team member.
2. If the team member is dissatisfied with the decision, he or she may request to proceed to the final step. The team member's decision to proceed to the final step must be made within two (2) business days of the date of the communication of the leader's decision.

Final step – review by human resources market leader and appeal leader level II

The human resources market leader and appeal leader level II may grant or deny the review. If the review is not granted, the decision of the appeal leader level I is final and binding on the team member and Novant Health, Inc. If the review is granted, the human resource market leader and appeal leader level II may or may not meet with the team member. The human resources market leader and appeal leader level II will provide a decision to Employee Relations Consultant who will communicate the decision to the team member.

The decision of the human resources market leader and appeal leader level II is final and binding on the team member and Novant Health, Inc.

Please see policy NH-HR- 3070 Team member Complaint/Concern Resolution and Appeals Policy for additional information.

Anti-Retaliation

Novant Health prohibits any form of retaliation against a team member who in good faith makes a complaint, raises a concern, provides information and/or otherwise assists in an investigation or proceeding regarding any conduct that he/she reasonably believes to be in violation of Novant Health's Rules of Engagement, any Novant Health policies, applicable state and/or federal laws, rules or regulations. Please see policy NH-HR-6066 Anti Retaliation policy for additional information.

Safety and health

This section of the Employed Team Member Handbook shares important information about the company's policies that promote safety, security and health.

All Novant Health facilities have comprehensive safety programs designed to benefit patients, guests, team members and the public. Your cooperation is essential to help maintain safety standards for your work area. Your leader will explain specific responsibilities that you may have. Prompt reporting of any safety hazard or practice will help Novant Health provide a safe, clean working environment.

First Do No Harm - the five safety behaviors

The five safety behaviors in our First Do No Harm program are evidenced-based, tied directly data that came out of a diagnostic assessment of past events of harm at Novant Health.

Adhering to the following **five safety behaviors and their supportive behaviors** is an absolute necessity for providing remarkable patient care:

1. **Practice with a questioning attitude:**
 - Stop, Reflect & Resolve in the face of uncertainty
2. **Communicate clearly:**
 - Use SBAR-Q to share information
 - Communicate using three-way repeat backs and read backs
 - Use phonetic and numeric clarifications
3. **Know and comply with the red rule:**
 - **Always identify patients using two forms of identification – name and date of birth**
4. **Self-check: Focus on task**

- Use the STAR technique
5. **Support each other**
 - Cross-check and Assist
 - Use 5:1 Feedback to encourage safe behavior
 - Speak up using ARCC – “I have a concern”

Professional conduct / culture of safety

Novant Health strives to provide a workplace in which everyone is free of threatening, intimidating, bullying, unlawfully harassing, or discriminatory behaviors. Accordingly, the following behaviors are strictly prohibited:

- Verbal or physical bullying, including attacks leveled at anyone that are personal, or maliciously false.
- Failure to exercise appropriate business decorum, including by using obscene language or gestures that are considered after an appropriate investigation, to be disrespectful, vulgar or to violate our policies on harassment.
- Inappropriate comments (or illustrations) in patient medical records or other official documents, falsely criticizing the quality of care, or attacking patients, practitioners, team members, or hospital policies;
- Criticism of a patient or coworker that is intended to intimidate or imply stupidity.
- Deliberate destruction or unauthorized appropriation of Novant Health property, including medical records.
- Engaging in discrimination or harassment of anyone on the basis of any status protected by law. This can include physical, verbal, visual, racial or sexual harassment or harassment based on genetic information (this statement is not intended to be all inclusive).
- Failure to respond in a timely and appropriate manner to team member, patient and/or family concerns.

Reporting disruptive behavior assessment and investigation

Team members, without fear of reprisal, should report any incidents of unlawful harassment, discrimination, threats of violence, abuse or inappropriate behavior to their one-up leader, department head, facility administration, employee

relations / human resources using HR Service on I-Connect, medical staff services or The Novant Health Alert Line at 800-350-0094. All information disclosed will be held in confidence and will be disclosed only on a need-to-know basis to others in order to investigate and resolve the matter.

Team members are assured that when they follow this complaint procedure they can do so without fear of reprisal.

For additional information, see HR Policy 2003 Professional Conduct and the Culture of Safety.

Public safety

Many Novant Health facilities have public safety team members who are responsible for the safety of the buildings and grounds. Learn the emergency procedure for contacting public safety in your facility. Other security matters may be reported at any time to public safety.

Workplace violence

Novant Health has a “zero tolerance” of violent or threatening conduct in the workplace. Any act of aggression or violence, including verbal and non-verbal threats of violence made by a Novant Health team member may result in immediate discharge.

Novant Health policy for workplace violence applies to all individuals who are on Novant Health premises. Novant Health may remove from its premises any individual or team member who engages in any act of aggression or violence. Human resources, together with public safety, will thoroughly investigate all harassment and workplace violence complaints and will make reasonable efforts to keep the investigation as confidential as possible.

If you observe any situation that involves violence or threats of violence, report the situation to your leader, public safety or human resources. If your facility does not have on site security, call 911 if there is an imminent risk of harm.

Protective orders

Team members who have taken out protective orders (50-Bs) should notify their facility’s public safety office or facility leader if there is no public safety

department. This will let public safety know that there is a potential problem and allows public safety to detain the subject of the order for arrest if he or she comes on the property.

Weapons in the workplace

Novant Health strictly prohibits weapons of any type on company premises (including parking areas) or at company-sponsored events. The only exception is for public safety officers in certain facilities or law enforcement officers who are authorized to carry weapons as a part of their job.

Weapons are defined as all firearms and replicas (including “air soft” guns), tasers, knives (other than small pocket knives not exceeding four inches in length), aerosol irritant projectors (chemical mace, liquid pepper, “OC,” etc.), impact weapons (batons, blackjacks, etc.) and explosives. This includes concealed weapons, even those for which the owner has obtained permits.

Anyone who violates this policy is subject to the I-Commit Performance Improvement Policy and including immediate discharge. If you are aware of anyone who may be in violation of this policy, report it to your leader or public safety officer immediately. Novant Health reserves the right to search a team member’s personal belongings if there is a suspicion of a weapon.

For additional information, please see HR Policies NH-HR-6050 Workplace Violence and NH-HR-7011 Weapons.

A tobacco-free environment

The mission of Novant Health is to improve the health of communities, one person at a time. In support of its mission, Novant Health provides an environment which is totally free of tobacco products and electronic cigarettes.

Smoking and the use of smokeless tobacco products and electronic cigarettes is prohibited:

- In Novant Health facilities, including, but not limited to, hospitals, physician practices, outpatient clinics and office buildings.
- Anywhere on Novant Health grounds, sidewalks and parking lots / decks.
- In facilities and on grounds leased by Novant Health.

- In company-owned vehicles at any time and in private vehicles on Novant Health property.

This policy applies to all persons, including but not limited to team members, non-employed workers, medical staff, volunteers, inpatients, outpatients, visitors, students, contractors, vendors and other guests on Novant Health premises. For additional information, please see HR Policy 6045 Tobacco Free Environment.

A drug-free workplace

Novant Health has a vital interest in maintaining a safe, healthy, and efficient working environment. Being under the influence of a drug or alcohol on the job poses serious safety and health risks to the patient, user and to all those who work with the user.

That's why unlawful and unauthorized use, possession, distribution or manufacture of alcohol or a controlled substance on the premises of any Novant Health facility is not allowed.

Novant Health recognizes that drug and alcohol dependency may be treated and controlled. Team members are encouraged to seek help voluntarily and confidentially through the team member assistance program (EAP) or their facility's team member occupational health department. For additional information, see HR Policy 3060 Fitness for Duty/Drug and Alcohol Testing.

Inspection and searches

Novant Health may conduct unannounced general inspections and searches (including lockers) for drugs, alcohol or other contraband on Novant Health premises or in Novant Health vehicles wherever they are located. Team members are expected to cooperate.

You and your personal property may be searched when there is reasonable belief that you are in violation of the substance abuse or other policy. Your consent to a search is required as a condition of employment, and a refusal to consent may be subject to the I-Commit Performance Improvement Policy, including discharge, even for a first refusal.

Illegal drugs, drugs believed to be illegal, and drug paraphernalia found on Novant Health property will be turned over to the appropriate law enforcement

agency and full cooperation will be given to any subsequent investigation.

Substances that cannot be identified as illegal drugs by a layman's examination will be turned over to public safety for appropriate evaluation, testing, or disposal.

Other forms of contraband, such as firearms, explosives and weapons will be subject to seizure during an inspection or search. A team member who is found to possess contraband on Novant Health property or while on Novant Health business will be subject to the I-Commit Performance improvement Policy up to and including discharge. If a team member is the subject of a drug-related investigation by Novant Health or by a law enforcement agency, the team member may be suspended pending completion of the investigation.

Hazard communication

Novant Health has a complete hazard communication program that identifies potentially hazardous substances in the workplace. You will learn more about this important safety feature in your department's orientation, if applicable.

Disaster plan

To coordinate Novant Health's many responsibilities in the event of a community disaster, a written disaster plan has been prepared. Your leader will explain your assignment to you and acquaint you with your designated area of responsibility. Novant Health facilities also maintain disaster recovery plans so we can continue to provide critical services to customers in the event of fire, flood or other damage to our facilities. Your department has its own plan with which you should become familiar. Your leader will explain your specific responsibilities, if any.

Fire

State laws require every healthcare facility to have a standing emergency program in the event of fire or a fire drill. Fire drills are conducted periodically. These drills apply to all team members and will be called at various and unspecified hours of the day or night. You are expected to respond as promptly to a fire drill as you would to a fire.

Each facility has its own code for a fire or fire drill.

You may be given specific responsibilities. You also should learn the procedure for reporting a fire in your facility and know the location of fire alarm boxes, fire extinguishers and fire hoses in your working area.

In case of a fire, remember **R.A.C.E.** - which stands for **R**escue, **A**ctivate alarm, **C**ontain the fire and **E**xtinguish the fire.

To use a fire extinguisher, remember **P.A.S.S.** - which stands for **P**ull the pin of the extinguisher, **A**im at the base of the fire, **S**queeze the handle and **S**weep the extinguisher from side to side at the base of the fire.

Reporting an injury or illness

Report any injury or illness that occurs on Novant Health premises, no matter how slight, to your leader immediately (but in no event longer than 24 hours after the incident). This is important not only to assure prompt medical attention but also to comply with requirements of Workers Compensation Insurance coverage.

Vehicle safety

If your position requires you to operate a vehicle on company business, please drive safely and courteously. This applies to company-owned vehicles as well as your own vehicle when it is used in the course of company business. Special rules apply if you drive a company owned vehicle. For additional information, see policy NH-LD-RM-3 Vehicles – Company-Owned/Leased.

Inclement weather

Novant Health provides critical services to our healthcare customers. Even in snow or other severe weather, we will continue operations. If your job is considered “critical” under your facility’s inclement weather plan, it is your responsibility to make every effort to come to work as scheduled.

The best way to prepare is to make arrangements **before inclement weather strikes**. Plans should include:

- Determining how you will get to work. This could include getting a ride with a coworker,

family member or neighbor.

- Making childcare arrangements if schools and day care facilities are closed.

It’s also your responsibility to let your department leader know if you need overnight accommodations. If you find it impossible to come to work, you must notify your department through your department’s call-in procedure. For additional information, see policy NH-HR-6005 Inclement Weather and your facility’s inclement weather policy, if applicable.

Compensation

Novant Health's goal is to ensure that you receive compensation that reflects the responsibilities of your job and what other organizations in our labor market and geographic region pay for a specific job. To help ensure that we meet this goal, we will:

- Provide you with a written job description
- Strive to maintain competitive pay levels
- Review pay and benefit levels periodically and grant increases warranted by market and economic considerations
- Provide bonus opportunities when system and regional strategic goals are met
- Administer the compensation program to assure the organization is in compliance with all legal requirements

About your compensation

Novant Health provides equitable and market-based pay for the work that you do. Our markets are determined by geographical location, business line and job responsibilities.

Your job description provides you and Novant Health with a clear, concise overview of the content, responsibility, physical requirements and impact of your job.

Salaries are reviewed and may be adjusted each year. Annual adjustments are market based. This means the adjustments are not based on individual performance.

Pay adjustments are determined after considering some key factors:

- What the market is paying for the job
- Where the team member is on the current pay scale
- Recruitment and retention issues within a job class

Once all of this information is evaluated, increases have to be allocated within the total dollars budgeted for pay adjustments in our company. No adjustment or increase is

automatic, and all pay actions will be taken at the discretion of Novant Health.

Performance Plan

Eligible team members participate in a performance plan that rewards team members if strategic goals are met. Your leader can give you more information about the performance plan.

Competency and performance reviews

30, 60 and 90-Day Reviews

Novant encourages 30, 60 and 90-day reviews for new and transferring team members to help assure an effective on-boarding process. Introductory reviews are useful for many reasons:

Evaluate skills

Identify training needs

Provide open communication and feedback

Identify mismatched team members

Clinical competencies

Ability to perform specific clinical skills is essential for competent and safe care. Novant Health conducts initial and on-going competency assessments. It is the department leader's responsibility to ensure that competency measurement tools/tests/observations required outside of the performance review are conducted and documented in the department file in a timely manner. Completion also should be indicated on the annual performance review.

Annual performance reviews

Full-time, part-time and PRN team members receive a performance review at least once each calendar year during the birthday month. Input for the annual performance review is collected and prepared in manager and team member self-service. The performance review is conducted with the team member and his or her one-up leader.

The performance review process for staff and supervisors

The performance review process focuses on Novant Health's values of compassion, diversity, teamwork and personal excellence as well as communication and safety. The annual performance review includes:

- Team member self-assessment
- Peer review
- Leader assessment
- Career Development plan

All team members, as a part of the evaluation, are required to create a development plan and goals for the year. Team members who have not met performance standards will use the development plan to improve performance and will be re-evaluated as stipulated in the plan. If the team member has not been deemed competent at the end of the career development plan he or she will be subject to the I-Commit Performance Improvement Policy up to and including termination of employment.

The performance review process for managers, directors, vice presidents and above

The review process for leaders consists of two parts:

- A 360 assessment including leader, peer and self-assessment every other year;
- A career development plan with action steps and progress assessment every year. The development plan serves as the performance evaluation for years in which the 360 is not completed.

A new leader may complete the 360 in an "off" year and then cycle to the regular schedule.

Pay procedures / payday

Novant Health has 26 two-week pay periods, which means you will be paid every other week. All team members are paid through a convenient direct deposit program. Each payday, your pay will be deposited directly into your account at a bank or other financial institution of your choice. You may view or print your current pay advice as early as

Thursday of pay week by going online to Team member Self Service on the Novant Health intranet.

Your pay advice

Information on your pay advice will help you keep track of what you have earned and where your money went. Each paycheck shows at least:

- The hours you worked during the pay period
- Your earnings for those hours
- How much was taken out for Social Security and taxes
- Your current rate of pay
- Paid time off balance
- Detailed deductions for the pay period and year-to-date
- The total amount Novant Health adds to your pay to help with the cost of the benefits you have selected

Payroll deductions

Novant Health is required to make the following deductions from your pay:

- Federal income tax (FIT): The amount withheld is determined by the amount of your pay, your marital status and the number of exemptions you claim on your W-4 form.
- Federal Insurance Contribution Act (FICA-Social Security): This is a tax on wages that is used in Social Security tax calculations (OASDI) and Medicare tax calculations (HI).

Novant Health also makes deductions that you have authorized in writing, such as for benefits and Retirement Plus contributions. Any court-ordered withholding, such as garnishments or child support payments, also will be deducted, as required by law.

Exempt/nonexempt positions

Team members at Novant Health are classified by the Fair Labor Standards Act as **exempt** or **non-exempt**. Your position classification depends on the nature and responsibilities of your job and the requirements of federal laws.

Exempt team members generally include those in managerial, professional and certain administrative

positions. If you are an exempt team members, you are paid a salary regardless of the hours worked and you are not eligible for overtime pay. This means that PTO, sick bank and other time away from work may be recorded only in increments of an entire day.

Only absences due to Family Medical Leave may be recorded for less than a full day.

Nonexempt team members are paid on an hourly basis. Therefore, deductions for PTO and sick bank may be recorded for an absence of 15 minutes or more. Time must be recorded exactly as it is worked. Nonexempt team members are entitled to an hourly rate of one and one-half times their average hourly pay for all hours worked over 40 in one work week.

Team members working a forty-hour week may take time off in lieu of overtime pay when time off can be taken within the same work week in which the overtime occurs. The work week is defined as Sunday through Saturday.

Breaks and meal time

Breaks within the workday may be scheduled or unscheduled, as determined by your leader. Breaks cannot be guaranteed, however. Although not required by law, rest breaks of 15 minutes in each work period of four or more hours are allowed based on departmental operational needs. Typically, breaks may not be taken at the beginning or end of the workday.

Team members are granted time during their daily schedule for meals. Length and timing of meal periods are determined by the administration of each affiliate. Your leader will provide additional information about breaks and meal periods. See NH-HR-3120 Time Keeping Policy for additional information.

Hours worked

In addition to the hours applied to the normal duties of your position, the following are considered to be hours worked:

- Rest breaks of 15 minutes in each work period of four hours or more.
- Meal periods during which you are not

completely relieved of all duties, active or inactive, while eating.

- Time spent during normal working hours in travel between the office and job-related business appointments.
- Time spent for annual required education.
- Time spent attending classes for job-required advanced cardiac life support (ACLS), pediatric advanced life support (PALS), basic life support (BLS) and neonatal resuscitation program (NRP) certifications.
- Required attendance at lectures, meetings, training programs, risk management depositions and other similar activities.
- Time spent during normal working hours waiting for and receiving medical attention on Novant premises or elsewhere at the direction of management.
- Time spent in civic and charitable work, if done at the request of Novant. See policy NH-HR-5090 Compensation at Company Sponsored Events for additional information.
- Time taken off by exempt team members for periods of less than one day, except for sickness or disability, in accordance with existing policies.

Overtime

So that you may balance your time between work and leisure, overtime is discouraged. Occasionally, however, overtime may be required to meet your department's workload. Nonexempt team members must not work overtime or take work home without advance approval from their leader.

On-call

Some nonexempt team members are required, as a condition of employment, to be "on-call" either occasionally or regularly and will be paid according to the call-pay policy established for their department. Your leader will explain the call pay policy for your department or facility.

Shift differential

A shift differential is provided to compensate nonexempt team members who work certain specified hours, usually second or third shift, and are in a job class that has been authorized to receive

shift differential. Not all jobs are authorized to receive shift pay. Shift pay is applicable only for hours worked and does not apply to paid time off. If you are eligible for shift differential, your leader will explain the amount.

Garnishment

A wage garnishment is a legal claim against your pay by a third party, and Novant Health regards this process as a serious matter. You are encouraged to make immediate arrangements to settle the debt and secure a release. If you are not successful in obtaining a release, we will honor the garnishment order or tax levy to the extent that the order or levy complies with the provisions of the Consumer Credit Protection Act of 1970 and applicable state laws regarding wage garnishment.

If a garnishment order is received again, you may be referred for financial counseling through the team member assistance program (EAP).

Novant Health Benefits

When we think of benefits, we often consider only the plans that provide protection and security. Yet the purpose of many benefits is to make our lives more enjoyable and rewarding.

This section of the Employed Team Member Handbook explains some of the many other benefits and services for which you may be eligible as a Novant Health team member.

Team member benefits

Novant Health offers a number of team member benefit plans that provide protection for today and help build future financial security. Information about these plans can be found on the benefit resource center.

This section provides information about some of the insurance and other benefits that Novant Health may make available to its eligible team members. The insurance and most of the other benefits we provide may be the subject of detailed written plan documents available for your inspection on request to the Human Resources Department.

The terms, restrictions, and eligibility requirements for these kinds of benefits may be determined only by reading the actual plan documents, under which Novant Health or the plan administrator, as applicable, may make certain administrative interpretations with discretion.

If a question arises regarding the nature and extent of particular insurance or other benefits, or if there is a discrepancy between the actual provisions of the plan documents and the information included in this handbook or any other communication to team members, the formal language of the plan documents is controlling.

Because insurance plans, premiums, coverages, and benefits change from time to time, Novant Health reserves the right to modify (or terminate) each of the insurance and other benefits and each plan's provisions.

Paid time off (PTO)

Paid time off is an important part of Novant Health's compensation and benefits program. You may use your Novant Health PTO for:

- Vacations

- Holidays
- Illness or injury
- Absences during the short-term or long-term disability waiting period (but not after the waiting period ends)
- Religious observances
- Doctor and dental appointments
- Caring for a sick family member
- Other personal matters that take you away from the job.

Full-time and part-time team members accrue PTO hours each pay period based on hours actually worked. For example, certain weekend schedules require only 36 hours but team members are paid for 40. These team members accrue PTO based on the 36 hours actually worked. You can find your accrual rate on our benefit resource center.

Scheduling PTO

PTO must be entered into API and approved by your leader. Please make your request as far in advance as possible. While every effort will be made to accommodate your request, departmental needs must be considered. Emergency requests should be made by telephone to the appropriate person in your department, according to your facility's attendance guidelines.

Options for unused time

If approved, you can use all of your PTO in the year in which you earn it. What if you don't use all of your PTO? You have two options:

- Continue to accumulate up to a maximum of 480 hours of PTO for future use;
- Donate PTO to another team member who has a FML or approved medical leave or to a company-approved charitable cause.

PTO upon termination of employment

The value of unused PTO, if any, that may be payable to you when if you terminate employment or change to a non-benefit eligible position is as follows:

- If you have fewer than 90 days of employment, any unused PTO will be forfeited upon termination of employment or change of status to non-benefit eligible position
- If you have at least 90 days but fewer than 10

years of service, the value of unused PTO accrued after January 1, 2003, may be paid out at 75 percent upon termination of employment or change of status to PRN.

- If you have 10 or more years of service, 100 percent of the value of the PTO balance may be paid out upon termination of employment or change to PRN status.

Any sick bank balance is forfeited upon voluntary or involuntary termination or death.

Other things you need to know

Team Members may begin using PTO once they begin accruing it, even if they are still within the 90-day introductory period and only if the team member has a sufficient balance to cover the amount of time they request to take off. Novant Health may cancel PTO for all or certain team members in the event of a pandemic or other emergency situation. See the PTO Policy, NH-HR 4015, for complete information.

Bereavement leave

Full-time and part-time team members who have completed their introductory period of employment will be granted bereavement leave as follows:

- 40 hours in the event of the death of a spouse, or child, including miscarriage;
- 24 hours in the event of the death of a parent, brother or sister, step-parent, step-child, step-sibling or guardian;
- 8 hours in the event of the death of a non-immediate family member which includes team members current father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparents and grandchildren. Bereavement leave as specified above will not be charged against paid time off (PTO).

Team Members who work a regular daily schedule that is more than 8 hours, i.e. 10-hour or 12-hour schedules, may record 8 hours for bereavement leave and any additional time as PTO

In the event of the death of a spouse, domestic partner or child, the 40 hours may be used as needed within 30 days of the death. For the death of a parent, brother or sister, legal step-parent and guardian, bereavement leave must be used within

fourteen days of death. The death of a non-immediate family member, bereavement leave must be taken within 7 days of the death.

A manager may grant additional time off when necessary. The additional time off may be charged to PTO if a balance exists.

Scheduling of bereavement leave must be coordinated and approved through the Hartford and your leader so that adequate staffing can be arranged. Team Members granted bereavement leave may be asked by their department leader to furnish proof of death before pay for the absence is granted.

Please see policy NH-HR-4050 Bereavement Leave for additional information.

Jury duty

Full-time and part-time team members will be excused from work if summoned to serve on jury duty or if summoned or subpoenaed to appear in a court of law on behalf of the company (except as a defendant in a criminal case).

- Team members who are summoned to serve on jury duty will be paid their regular pay; time away from work will not be charged against paid time off (PTO).
- Team members who are summoned or subpoenaed to appear in court for a work-related issue should notify risk management immediately. They will be paid their regular pay; time away from work will not be charged against PTO.
- Team members who are summoned or subpoenaed to appear in court as a defendant in a criminal case must take PTO or the absence will be unpaid.

In all cases team members must notify their leaders as soon as the summons or subpoena is received so that time off can be scheduled.

Here are some other things you need to know:

- You may keep any jury fees obtained for your service.
- Jury leave will be granted only for periods you are actually scheduled to work.
- If you are summoned to serve on a jury while on scheduled PTO, you will be paid jury leave

instead of PTO. You will **not** be eligible for jury leave pay while on an approved leave of absence, however.

- First shift team members serving jury on duty are expected to work as much of the regularly scheduled shift as the jury duty schedule permits, to the extent that the combined amount of time spent on jury duty and work does not exceed the amount of time originally scheduled to work. Time off for jury duty is not considered time worked for purposes of computing overtime.
- If a team member is dismissed early from jury duty and is needed at work, he or she is expected to return to work for the balance of the scheduled shift.
- Team members who work on second or third shifts are not expected to work their normal hours during the time they are serving on a jury. The team member may take the additional time as PTO or leave without pay (LW) in accordance with those policies.
- The department leader may request documentation confirming that jury duty was served.
- Please call the Hartford at 1-800-549-6514 to report your Jury duty time away from work.

Please see policy NH-HR-4055 Civic Duty Leave for additional information.

Tuition reimbursement

The Tuition Reimbursement Program is to reimburse Novant Health team members for college credit courses that are related to their present job and/or which help to prepare them for potential advancement within the Novant Health system. The Tuition Reimbursement Policy (NH-HR-4085) explains eligibility, application and approval process, maximum annual benefit, covered expenses and administration.

To be eligible, a team member must be continuously employed full time or part time for a minimum of one year with Novant Health, prior to the beginning date of the course. In addition, the team member must be classified as benefits

eligible. Full-time benefits eligible team member work 60-80 hours per pay period; part-time benefits eligible team members work 48-59 hours per pay period. The team member must remain benefits eligible for the duration of the course and through the date he/she files for tuition reimbursement. Please see Tuition Reimbursement policy NH-HR-4085 for more information.

Leaves of absence

Occasionally, circumstances may require you to be away from the job for an extended period of time. Novant Health provides leaves of absence to eligible team members to help meet this need. The following types of leaves are available to team members who qualify. Questions concerning leaves should be referred to The HR Service Center at 1-800-890-5420. Any classification of team member out for a medical reason is required to have the leave approved by the Hartford or the leave is considered unapproved.

Engaging in any other employment while on FMLA is prohibited and will result in termination of employment.

Family and medical leave

The FMLA entitles eligible team members of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the team member had not taken leave.

Team members are eligible for family medical leaves if they:

- Have at least 12 months of service within the last seven calendar years; and
- Have worked at least 1,250 hours in the previous 12 months; and
- Have a qualifying event.

Eligibility will be determined on the day the team member requests the leave.

Qualifying events include:

- Birth of a child of the team member, and to care for that child;
- Placement of a child with the team member for adoption or foster care.
- Caring for a spouse, domestic partner, child, or parent with a serious health condition;
- A serious health condition that makes the team member unable to perform the functions of the team member's job.
- Any qualifying exigency arising out of the fact that the team member's spouse, domestic partner,

son, daughter, or parent is a covered military member on active duty (or has been notified of an impending call or order to active duty) in support of a contingency operation.

- Caring for a covered service member with a serious injury or illness if the team member is the spouse, domestic partner, son, daughter, parent, or next of kin of the service member.

When both parents are employed by Novant Health, the 12-week limitation applies to both as a couple for birth or placement of a child for adoption.

Applying for family medical leave

You may call The Hartford at 1-800-549-6514 to request a leave of absence. You may also apply on with the Hartford at www.thehartfordatwork.com. You should provide at least 30 days advance notice to your department manager when the leave is foreseeable. In the case of an emergency, you must notify the manager as soon as the need for the leave becomes known.

If a team member needs to be out of work for any medical reason for intermittent or continuous reasons they should notify the Hartford for the leave to be approved. Unapproved leaves may be subject to the I-Commit Performance Improvement Policy. All leave as an accommodation must be applied for through the Hartford at 1-800-549-6514. If the team member is approved for Intermittent FMLA leave you must report your absence to your leader and also call the Hartford. Please see policy NH-HR-4057 Family Medical Leave for additional information.

Leave as an Accommodation

The American with Disabilities Act as Amended (**ADAAA**) became law in 1990. The **ADAAA** is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of life. Not everyone with a medical condition is protected by the law. In order to be protected, a person must be qualified for the job and have a disability as defined by the law.

A person can show that he or she has a disability in one of three ways:

- A person may be disabled if he or she has a physical or mental condition that substantially limits a major life activity (such as walking, talking, seeing, hearing, or learning).
- A person may be disabled if he or she has a

history of a disability (such as cancer that is in remission).

- A person may be disabled if he is believed to have a physical or mental impairment that is not transitory (lasting or expected to last six months or less) and minor (even if he does not have such an impairment).

Reasonable accommodation of protected disabilities and religious beliefs

Novant Health also will provide reasonable accommodations to any team member with a known disability who is otherwise qualified to perform the essential functions of his or her job. A team member who believes that he or she requires a reasonable accommodation because of a protected disability must notify the Hartford of the issue so that an interactive dialogue can begin on the subject of a proposed accommodation.

Each request for a reasonable accommodation due to a protected disability or because of a religious belief will be evaluated on a case-by-case basis. No team member will be retaliated against because he or she requests a reasonable accommodation due to a religious belief or because of a protected disability.

Team members may submit an accommodation request online or by contacting the Hartford at 1-800-549-6514 or request online at www.thehartfordatwork.com—The team member will be contacted by a Hartford representative once the request has been received.

Please see policy NH-HR- 8103 ADA (Americans Disabilities Act, as amended) Reasonable Accommodations for additional information.

The Pregnancy Discrimination Act

Congress enacted the Pregnancy Discrimination Act (PDA) in 1978 to make clear that discrimination based on pregnancy, childbirth, or related medical conditions is a form of sex discrimination prohibited by Title VII of the Civil Rights Act of 1964.

By enacting the PDA, Congress sought to make clear that "[p]regnant women who are able to work must be permitted to work on the same conditions as other team members; and when they are not able to work for medical reasons, they must be accorded the

same rights, leave privileges and other benefits, as other workers who are disabled from working." The PDA requires that pregnant team members be treated the same as non-pregnant team members who are similar in their ability or inability to work.

Fundamental PDA Requirements

- An employer may not discriminate against a team member on the basis of pregnancy, childbirth, or related medical conditions; and
- Women affected by pregnancy, childbirth, or related medical conditions must be treated the same as other persons not so affected but similar in their ability or inability to work.

For any questions pertaining to pregnancy leave contact the Hartford at 1-800-549-6514.

Paid time off

If you have accrued paid time off (PTO), it must be used according to the family and medical leave. If you are eligible for short-term or long-term disability benefits, PTO and/or Sick bank may be used during the benefit waiting period but may not be used after the waiting period ends. See Paid Time Off Policy NH-HR-4015.

You may use only those PTO hours accrued prior to date the leave began. PTO hours that accrue while PTO and sick bank are being used will be held in reserve until you return from leave.

Military leave of absence

Military leaves of absence at Novant Health are administered under the provisions of the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). If you are a full-time or part-time team member and enter the uniformed services and return within the time and conditions prescribed by law, you will be reinstated to your former position, or a comparable one. There are exceptions and limitations, however, please reference the Military Leave Policy NH-HR-4065.

Team members who are members of a reserve military organization or the National Guard may participate in weekend or annual training as required. Novant Health will attempt to coordinate your work schedule, to the extent possible, to allow you to meet your reserve obligations. You may use PTO if training occurs during time you were scheduled to work.

Otherwise the time will be unpaid. Submit your request for a military leave to The Hartford at 1-800-549-6514 as far in advance as possible, indicating the dates of duty. Novant Health will send you a packet informing you of your responsibilities prior to taking your leave. You will be asked by the Hartford to provide a copy of your military orders when you return (if not supplied prior to your leave).

Team Members' benefits during a leave of absence

This section explains how Novant Health benefits will be administered during a leave of absence.

Paid Leaves of Absence

A leave of absence is considered to be paid when you are using accrued PTO time or sick bank hours. PTO and sick bank hours may be used only in accordance with the policy in effect at your work location. During a paid leave of absence, Novant Health will continue to provide you with flex credits for benefits, and any contribution you were making towards your benefits will continue to be deducted from your paychecks on a pay period basis. This will continue as long as you are on an approved medical leave and have PTO or sick bank hours.

Unpaid Leaves of Absence

A leave of absence is considered to be unpaid after you have exhausted or have chosen to discontinue using PTO time or sick bank hours according to the policy in your work location. If you normally paid a portion of your benefits while you were working, you will continue to be responsible for that contribution.

Options for Paying Your Contributions

Human resources will contact you when you have benefit payments due. You can send a personal check or money order to the address on your notification for each unpaid pay period. Please do not mail or make your payment in cash.

If you are unable to make your benefit contribution, it is important that you contact human resources toll-free at 1-800-890-5420 to make other payment arrangements.

Employee Assistance Program

The Employee Assistance Program (EAP) demonstrates a commitment to the well-being of valued team members. It enables team members to discuss any specific needs they have with a counselor. Some common concerns the EAP can help with are:

- Stress management
- Marital/family issues
- Financial concerns
- Alcohol and other drug abuse
- Job/career issues
- Communication skills
- Parenting
- Legal issues
- Personal/emotional concerns
- Grief and loss

How EAP works

Team members may call the EAP to schedule an appointment with a counselor. The counselor will set reasonable goals to solve. Steps will include short-term counseling at the EAP office of up to six sessions; or may include a referral to a resource in the community. If there is concern about a team member's safety or job performance, a leader may request a team member to meet with the EAP.

Confidentiality

Each team member's privacy is carefully guarded and is protected by state and federal laws. Exceptions are made in cases when someone's safety may be at risk. The team member always will be notified if an exception is made. If a supervisor refers a team member, the EAP will release only information authorized by the team member.

Program advantages

The EAP is offered free of charge to team members and members of their household. Visits to the EAP are often all that is needed to resolve a problem. If a referral to a community resource is needed, the counselor will share these options with the team member. The team member is responsible for costs of such services, if any, but will be assisted in making the referral and using insurance. The counselor will follow up to ensure the referral is satisfactory and progress is being made.

Accessible

Every effort is made to make the EAP accessible and convenient for team members and their families. A variety of appointment times will be offered, and a counselor is available 24 hours a day in case of emergencies.

Call **1-800-828-2778** to speak with an EAP representative.

Workers' compensation and unemployment insurance

Workers' compensation provides benefits to team members who, while at work, sustain injuries that meet the legal definition of "compensable injuries" under state workers' compensation regulations. Therefore, not all injuries that occur during the course and scope of employment are covered by workers' compensation. You should immediately report any injury, no matter how slight, to your leader in writing. If you are unable to immediately report an accident or injury, you should provide written notice of the accident or injury as soon as practicable.

Failure to report within 30 days of the occurrence of the injury/accident may result in loss of benefits. Team members should follow facility guidelines for treatment locations. Team member benefits may be continued during a workers' compensation absence as explained under "team member benefits during a leave of absence."

All eligible team members are covered under the provisions of unemployment regulations which provide unemployment benefits to those who qualify. Novant Health pays the entire cost for this program.

Non-discrimination and access to healthcare

Novant Health does not discriminate against any person on the basis of race, color, religion, sex, national origin, age, disability, veteran's status, sexual orientation or any other characteristics or status protected by law with regard to admission, treatment or participation in its programs, services and activities, or in employment. Free foreign language interpreters are available for individuals who are limited English proficient. Free sign language and oral interpreters, TTY's and other services are available to deaf and hard-of-hearing persons. For further information about this policy, contact: Novant Health director of internal audit & compliance, 1-704-384-7638 or TDD 1-800-735- 8262.

Code of ethics

(Appendix A)

Novant Health maintains a reputation for integrity and honesty in dealing with patients, employees, vendors, and regulating agencies, and the public. We are proud of this reputation; it is our heritage and our future.

The Novant Health Code of Ethics establishes our commitment to the highest ethical standards. The Code of Ethics puts in writing the ethical principles we follow when conducting our business. It provides a clear statement of policy to Novant Health employees, medical staff members, our Board of Trustees, independent contractors, students, volunteers, and anyone representing Novant Health. Novant Health also maintains separate policies that provide additional guidance on various specific topics. The Code of Ethics and these separate policies are key parts of Novant Health's corporate compliance plan.

All representatives and team members are responsible for reading the Code of Ethics and abiding by its terms. The Code of Ethics is rigorously enforced. Anyone who willfully violates the Code of Ethics is subject to disciplinary action up to and including termination. Individuals should report any violations of the Code, or even situations that give the appearance of a violation. Reports can be made to your supervisor or the Corporate Compliance department. You may also report potential violations anonymously to The Alert Line at 1-800-350-0094 or <https://novanthealth.alertline.com>. Any person who makes a good faith report of suspected wrongdoing will not be penalized for reporting.

The Code of Ethics is organized into categories that explain related topics in greater detail:

- Patient Care;
- Compliance with Laws and Regulations;
- Proper Use of Funds;
- Avoiding Conflicts of Interest;
- Protecting Company Assets;
- Charitable Organization and Status; and
- Employment

Patient Care

a. Patient Rights

We are dedicated to providing quality patient care while respecting individual autonomy and dignity, as reflected in our Patient's Bill of Rights. We encourage patients and their families to participate in decisions regarding patient care, and to be familiar with advance directives in the event the patient is unable to make decisions.

We comply with all laws prohibiting discrimination on the basis of: race, color, religion, sex, age, national origin, disability, veteran status, genetic information, gender identity, or sexual orientation any. Patients are admitted to facilities and programs regardless of race, creed or ethnic origin.

We make decisions related to admission, on-going care, transfer, and discharges based on a patient's assessed needs and our ability to meet those needs. The integrity of the clinical decision-making process will be maintained at all times. Financial incentives will not impact decisions for needed services. Referrals are made based on patient need or diagnosis; any benefit to the facility for such a referral is disclosed to the patient. The appropriateness and safety of care, treatment, and services do not depend on the patient's ability to pay.

b. Emergency Treatment

We provide an emergency medical screening examination and necessary stabilization to all patients that present to our Emergency Departments regardless of that patient's ability to pay, in accordance with the Emergency Medical Treatment and Labor Act (EMTALA).

Patients with emergency medical conditions may be transferred to another facility at the patient's request, or if the patient's medical needs cannot be met at the Novant Health facility (e.g., we do not have the capacity or capability), and appropriate care is knowingly available at another facility. Likewise, we accept patients by transfer who are in need of our specialized services, based on our capacity and capability to treat, without regard to ability to pay or any other discriminatory basis.

c. Research, Investigations, and Clinical Trials

We protect patients and respect their rights during research, investigations, and clinical trials. We provide patients who choose to participate in these programs with a full explanation of expected benefits, potential discomforts and risks, and alternative services that might prove beneficial. We also fully inform these patients of procedures to be followed, especially those experimental in nature. A patient gives informed consent to participate in clinical research or investigations. A patient's choice not to participate in any research or investigation project will not compromise his or her access to services.

We comply with federal and state laws and regulations for all research, investigations, and clinical trials conducted within any of our facilities. Any facility or team member applying for or performing research of any type is responsible for following appropriate research guidelines. Any human subject research is done in conjunction with the Institutional Review Board and should be consistent with our policies regarding human subject research and IRBs.

We submit only true, accurate, and complete costs related to research grants.

d. Accreditation

We deal with accreditation and government survey bodies in a direct, open, and honest manner, whether before, during, or after any survey. We will never mislead accreditors or survey teams, either directly or indirectly.

Compliance with Laws and Regulations

e. Privacy and Security Requirements

We maintain policies and procedures to comply with the Administration Simplification Act of 1996 (HIPAA) and other applicable laws to ensure the appropriate protection of patient privacy and the security and integrity of personal information.

Pursuant to HIPAA, we provide patients with a written notice of our information practices. We also have processes for controlling access to, use, and disclosure of protected health information (PHI). Specifically, we maintain an information security program designed to safeguard PHI. We provide team member education on handling and safeguarding PHI and provide guidance on how complaints about privacy practices may be filed.

f. Bribes and Improper Payments

We cannot enter into any agreement or arrangement that involves a commission, rebate, bribe, kickback, or any other item of value, if it is known or reasonably suspected that the intent or likely result of that item of value is to improperly reward, either directly or indirectly:

- Any team member, official, or representative of the federal or state government or any of their departments or agencies;
- Any Medicare Administrative Contractor under contract with the federal or state government, or any of their departments or agencies for the administration of any health care insurance program in which Novant Health or any of its operating subsidiaries participates;
- Any officer, director, team member, shareholder, or other representative of a customer, supplier, or other institution with which Novant Health or any of its operating subsidiaries has existing or prospective business relations; or
- Any physician, health care provider, or any other person or company that is in a position to refer or encourage the referral of patients to Novant Health for the delivery of health care services by a Novant Health operating subsidiary.

Improper rewards include the giving or receiving of anything of value, not just money. Additionally, team members are prohibited from giving improper rewards (or something of value) to any individuals as an incentive to make decisions or take actions favorable to Novant Health, or to make referrals to a Novant Health operating subsidiary. It is not permissible to take any such action just because it appears to be customary in a certain location or a particular area of business activity.

To the extent possible, Novant Health requires that all business arrangements between it and possible sources of patient referrals conform to the safe harbor regulations under the federal Anti-Kickback Statute. Novant Health also requires that all compensation arrangements with physicians who make referrals to Novant Health conform with applicable exceptions to the federal Physician Self-Referral law, related regulations, and any similar state laws.

g. Interactions with Physicians

Two key principles govern our interactions with physicians:

1. We accept patient referrals and admissions based solely on the patient's medical needs and our ability to meet those needs. We do not pay or offer to pay or accept anything of value from anyone – colleagues, physicians, or other people or entities – for patient referrals.
2. We do not accept payment for patient referrals we make. We are not permitted to solicit or receive anything of value, directly or indirectly, in exchange for patient referrals. Similarly, when making patient referrals to another health care provider, we do not take into account the volume or value of referrals that the provider has or may make to us.

Federal and state laws and regulations govern the relationships between hospitals and physicians who refer patients to those facilities. In addition, the Internal Revenue Service prohibits people, including physicians, from receiving a private benefit as a result of their relationships with a tax-exempt health care organization.

Novant Health representatives who interact with physicians should be aware of the legal, regulatory, and policy requirements that address relationships between physicians and hospitals or health care systems. This is especially so when making payments to physicians for services rendered, leasing space, recruiting physicians to the community, acquiring physician practices, and arranging for physicians to serve in leadership positions.

Any business arrangement with a physician must be developed to ensure compliance with legal requirements, regulatory guidance, and our policies and procedures. All arrangements must be in writing and approved by the Novant Health Legal Department before making any payment to a physician. All contract payments or benefits provided to physicians should be supported with appropriate documentation reflecting the business purpose of the payments or benefits. Additionally, relationships with physicians must be diligently administered as agreed so as to avoid legal violations.

h. Physician Owners and Structuring of Joint Ventures

Health care providers that have physician investors or participants are subject to requirements designed to prevent physicians from benefitting from referrals to companies in which they have a financial or economic interest. The providers and physicians involved must ensure that the overall structure of the relationship complies with the requirements related to ownership interests, investment structure, and reporting.

i. Environmental Compliance

We comply with all environmental laws and regulations as they relate to our organization's operations. This means we:

- Act to preserve our natural resources to the fullest extent reasonably possible;
- Recycle where possible;
- Comply with requirements for the proper handling of hazardous materials;
- Comply with environmental laws and operate our facilities with the necessary permits, approvals, and controls;
- Diligently use proper procedures to prevent pollution and provide a beneficial environment of care;
- Immediately alert supervisors to any situation regarding the discharge of a hazardous substance, improper disposal of hazardous medical waste, or any situation that may be damaging to the environment; and
- Work with authorities to remedy an environmental contamination for which we may be responsible.

Proper Use of Funds

j. Charging, Coding, and Billing for Services

We have policies, procedures, and systems in place to facilitate accurate billing to patients, government payers, and commercial payers, which conform to related federal and state laws and regulations.

We do not knowingly present or cause to be presented claims for payment or approval which are false, fictitious, or fraudulent. Team members who perform billing, coding, or charge entry shall take every reasonable precaution to ensure that their work is accurate, timely, and in compliance with our policies, and federal and state laws and regulations.

Individuals who add to a patient's medical record must provide accurate information and not destroy any information considered part of the official medical record. Accurate and timely documentation also depends on the diligence and attention of physicians who treat patients across our locations. We expect those physicians to provide us with complete and accurate information in a timely manner, including the documentation of medical necessity.

Any subcontractors engaged to perform billing or coding services are expected to have the necessary skills, quality control processes, and appropriate systems and procedures to ensure that all billings for patients, government programs, and commercial insurance programs are accurate and complete.

Additionally, we implement and maintain a system of controls to ensure an appropriate charge capture process, including the continual updating of fee schedules and charge lists.

Examples of unacceptable billing and coding practices include: presenting, or causing to be presented, a claim for services that were not provided; or submitting bills with improper billing and coding practices, such as “upcoding” and “unbundling.” Upcoding is the process of using a code to increase the reimbursement for a particular medical procedure, even though available evidence suggests another code with a lower reimbursement value is more appropriate. Unbundling is the process of billing various parts of one medical procedure separately in an effort to increase reimbursement.

Our team members are obligated to notify their supervisor or a member of management of any requests to deviate from accepted billing practices, or with any questions they may have in this area.

k. Collection of Medicare Deductible and Coinsurance Amounts

Our policy is to bill patients promptly for the services provided and to take all necessary and appropriate action to collect patient accounts. We are also required to collect deductible and coinsurance amounts from most patients.

l. Cost Reports

We maintain a system of internal controls to ensure compliance with federal and state laws, regulations, and guidelines relating to cost reports, which define what costs are allowable and how to claim reimbursement for the cost of services provided to program beneficiaries.

m. Financial Reporting

We maintain a high standard of accuracy and completeness in documenting, maintaining, and reporting financial information. This information serves as a basis for managing our business and is important to meeting our obligations to patients, colleagues, stakeholders, suppliers, and others. It is also necessary for compliance with tax and financial reporting requirements.

All financial information must reflect actual transactions and conform to generally accepted accounting principles in the United States. We maintain a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management’s authorization and are recorded in a proper manner to maintain accountability of the organization’s assets.

n. Quality Initiatives

Novant Health participates in various quality initiatives that rewards providers based on the quality of care delivered to patients. The programs are offered or sometimes mandated by government or non-government payers. Novant Health is mindful and strives to fulfill the duties and responsibilities associated with these programs. We maintain accuracy in reporting and adhere to protocols that govern these programs.

Avoiding Conflicts of Interest

o. Conflicts of Interest

Actual or potential conflicts of interest could detract from our mission as an ethical, effective and efficient healthcare organization. A conflict of interest occurs when a team member, in the course of his or her job duties, has a financial or personal interest that may compromise or have the appearance of compromising his or her effectiveness or objectivity in the performance of his or her job duties.

Any circumstance that might lead to the appearance of a conflict of interest should be disclosed and reviewed to determine whether an actual conflict of interest exists. In addition, certain team members must annually disclose actual or potential conflicts of interest. Anytime a potential conflict of interest arises, the annual disclosure should be updated. Our Conflict of Interest policy explains conflicts of interest and the disclosure process in more detail.

p. Gifts and Business Courtesies

Any gifts, favors, or hospitality, whether given or received by any team member, should contribute to our mission, vision, and values with highest regard for patient care. We should neither accept nor keep anything of value that has the potential to materially affect the ability to make decisions in the interests of patients. Additionally, we do not solicit vendors and manufacturer representatives for gifts for any purpose, including door prizes, except as allowed under Novant Health Foundations, or for company approved or endorsed fundraising. Our Gifts and Business Courtesies policy provides additional guidance on relationships with referral sources, vendors, industry groups, professional organizations, trade organizations, vendor sponsored conferences, and patients. Good judgment and decisions appropriate to the situation and reflecting the intent of the policy should be used when specific guidance is not found in the policy.

q. Speaking Engagements

We encourage s to participate as a faculty member or speaker at educational programs and functions. Team members who participate in speaking engagements may accept reimbursement from the sponsoring party for expenses related to travel and registration fees that are required as part of the speaking engagement. Any honorarium may be kept by the team member if the team member prepares for and participates in the speaking engagement on his or her own time. Otherwise, the honorarium should be directed to the appropriate Novant Health Foundation

All speaking engagements should be disclosed in accordance with the Novant Health Conflicts of Interest policy, and if under contract, in compliance with any terms or conditions regarding honoraria.

r. Vendors, Suppliers, and Contractors

Our relationships with contractors, vendors, and suppliers must be managed in a fair and reasonable manner, free from conflicts of interest, and consistent with applicable laws and good business practices.

We promote competitive purchasing to the fullest extent practicable. We use the highest ethical standards in business practices for source selection, negotiation, determination of contract awards, and the administration of all purchasing activities.

Our contractor, vendor, and supplier selections will be made on the basis of objective criteria, including: quality, technical excellence, prices, delivery, and adherence to schedules, service, and maintenance of adequate supply sources. Our purchasing decisions will be made on the supplier's ability to meet our needs, not on personal relationships and friendships.

During the selection process, we may find it beneficial to visit other facilities that purchased the vendor's products, or to consult with various technical experts. We should pay for the cost of any such trips, not the vendor. Budgeting and purchasing negotiations should accommodate travel and other expenses required to obtain the best products or services.

We do not communicate to any third-party confidential information given to us by our suppliers unless directed to do so in writing by the supplier. We do not disclose contract pricing and information to any outside party. Appropriate commissions, rebates, discounts, or other allowances are permissible if they are compliant with applicable laws and our policies.

We provide all vendors with access to our Code of Ethics and other pertinent policies. Contractors, vendors, and suppliers are expected to comply with this Code and healthcare laws, rules, and regulations.

s. Engagement of Independent Contractors, Agents, and Consultants

At times, we need services offered by contractors or consultants who are not team members of the company. We may enter into independent contractor agreements to acquire services that are necessary for legitimate business purposes at a reasonable cost. All independent contractor arrangements will be covered by a written contract, approved by our legal department. These contracts shall provide us with access to the contractor's records in accordance with applicable laws.

t. Marketing Practices

▪ Marketing and Advertising

We may use marketing and advertising to provide information to our communities, educate the public, increase awareness of our services, and recruit team members. We present only truthful, fully informative, and non-deceptive information in these materials.

▪ Antitrust

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing Novant Health business with a competitor. Examples of this may include: discussing how our prices are set; disclosing terms of supplier relationships; communicating market allocation among competitors; or agreeing with a competitor to refuse to deal with a supplier.

Additional subjects that must not be discussed with competitors include: any aspect of our pricing; our services in any market; key costs, such as labor costs; and our marketing plans. If a competitor raises any of these prohibited subjects, team members must end the conversation immediately and contact the Legal Department.

▪ Gathering Information about Competitors

It is not unusual to obtain public information about other organizations, including our competitors, through various legal and ethical means. These may include public documents and presentations, journal and magazine articles, or other published or spoken information. However, team members should avoid seeking or receiving information about a competitor through any inappropriate means.

Protecting Assets

u. Record Management

Effective corporate compliance requires a clear and complete documents system. Our record management policy establishes a system for the creation, distribution, retention, and destruction of corporate records.

v. Company Assets

We strive to preserve and protect company assets by making sensible and effective use of resources, and by properly and accurately reporting the company's financial condition. The company's assets and our team members' services are intended to be used only for our business purposes.

Disclosing or using confidential, special, or inside information of or about Novant Health, for personal profit or advantage, or to provide an advantage to any vendor or supplier, is prohibited.

w. Copyrights

Our team members may not copy for their own use documents, computer programs, or other materials in violation of copyright laws or licensing agreements.

Charitable Organization and Status

x. Commitment to Charitable Purpose

Novant Health is a non-profit, tax-exempt organization committed to operating in a manner that furthers its charitable purposes, in compliance with all requirements related to tax-exempt healthcare organizations.

y. Charity Care

We provide patients and their families with information about charity care and various financial assistance programs. Our financial counselors work with patients and their families and sponsors to ensure that patients are appropriately qualified and referred to these programs. All discounts, relief from collection proceedings, and other financial arrangements are made only within the context of established programs.

z. Government Relations and Political Activities

We comply with all federal, state, and local laws governing participation in government relations and political activities. We are nonpartisan with respect to the nomination or election of candidates to public office, and do not support or take positions on political parties or the nomination or election of individual candidates to a political office.

However, we may from time to time take public positions on issues that are important to our welfare, that of our team members, the public, or other stakeholders. We may publically offer recommendations concerning proposed legislation or regulations when our experience might be helpful. We may also analyze and take public positions on issues that have a relationship to our operations when our experience contributes to the understanding of the issues. We will, however, refrain from taking a public position on an issue when doing so could be construed as an implied endorsement of a candidate for political office. However, we may employ and consider for employment elected officials and candidates for office.

We have many contacts and dealings with government bodies and officials and may invite elected officials and candidates for office to address leadership groups for the purpose of education about government issues and challenges. Electioneering or fundraising activities are prohibited at such events.

Our contacts and transactions with government bodies and officials must be conducted in an honest and ethical manner. Any attempts to influence the decision-making process of a government official by an improper offer of any benefit are absolutely prohibited. Any requests or demands by a government representative for any improper benefit should be immediately reported to the Legal Department.

We may not use corporate funds, properties, or services, whether directly or indirectly, for the purpose of influencing the nomination or election of any candidate to public office. This includes financial and non-financial donations, such as using work time and telephones to solicit for a political cause or

candidate, or loaning Novant Health property for use in a political campaign. This prohibition also includes indirect payments, loans, deposits or guarantees, the performance of services, and the furnishing of anything of value by a team member as part of his or her duties for Novant Health or its operating subsidiaries.

We encourage team members to participate in the democratic process of voting and may promote voter registration. We recognize that encouraging individual voter responsibility may include electioneering and personal finance contributions to election campaigns or political organizations on the part of our team members. However, these activities are at the team member's sole expense and we will not provide reimbursement in any form. Further, no electioneering or political activities by team members shall be conducted on the premises or time of Novant Health, or under any circumstance which may create the appearance that such activity is sponsored by Novant Health.

aa. Workplace Fund-raising and Charitable Activities

We support a variety of charitable activities, including: fundraising, community events, health and wellness promotions, and various social activities intended to support specific community charities.

When the company or a facility decides to support a charitable organization, no team member should be compelled to contribute to the charitable organization. Neither should there be any workplace consequences for non-participation.

Employment

bb. Controlled Substances

Many of our team members have routine access to prescription drugs, controlled substances, and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. To minimize risks to patients and our team members, prescription and controlled medications and supplies must be handled properly and only by authorized individuals.

If anyone becomes aware of inadequate security of drugs or controlled substances, or the diversion of drugs from the company, the incident must be reported immediately.

cc. License and Certification Renewals

Team members, independent contractors, and privileged practitioners in positions requiring professional licenses, certifications, or other credentials, are responsible for maintaining the current status of their credentials. They shall comply at all times with federal and state requirements applicable to their respective disciplines. We do not allow any team member, independent contractor, or privileged physician to work without a valid, current license or credential.

dd. Health and Safety

Our facilities comply with government rules and regulations that promote workplace health and safety. Policies and procedures exist to protect our workers from potential workplace hazards. Workers must become familiar with and understand how these policies apply to their specific job responsibilities and seek advice from their supervisor whenever they have a question or concern. It is important that any worker immediately notify his or her supervisor of any serious workplace injury or any situation presenting a danger.

ee. Diversity and Equal Employment Opportunity

The success of Novant Health depends in large measure on our ability to work together to fulfill our vision and goals. This means we treat team members, patients, and other persons fairly, and without regard to race, color, religion, sex, ethnic origin, age, disability, veteran status, genetic information, sexual orientation, gender identity, or any other characteristics or status protected by law.

No form of harassment or discrimination on the basis of race, color, religion, sex, ethnic origin, age, disability, veteran status, genetic information, sexual orientation or any other characteristic or status protected by law will be tolerated. Every allegation of harassment or discrimination will be promptly investigated in accordance with applicable human resource policies. For additional information, refer to our policies regarding sexual other unlawful harassment, discrimination, and Equal Employment Opportunity.

ff. Harassment and Workplace Violence

Every team member has the right to work in an environment free of unlawful harassment. We do not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us. Degrading or humiliating jokes, slurs, intimidation, or other harassing conduct (as prohibited by our policy on harassment) is not acceptable in our workplace.

Sexual harassment is also prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment has no place at Novant Health.

Harassment also includes incidents of workplace violence. Workplace violence includes robbery and other commercial crimes, stalking, violence directed at an employer, terrorism, and hate crimes committed by current or former team members. Team members who observe or experience any type of harassment or violence should report the incident to their supervisor, a member of management, the Human Resources Department, or the Novant Health Alert Line.

gg. Substance Abuse and Mental Acuity

We are committed to an alcohol and drug-free workplace. All workers must be free of the influence of alcohol and illegal drugs when reporting for work. Using, possessing, or selling controlled substances or illegal drugs while on work time or on Novant Health property may result in I-Commit Policy, up to and including termination.

hh. Hiring of Former/Current Government Agency or Contractor Employees

We may hire former or current federal or state employees. However, their recruitment and employment, including independent contractor arrangements, may be impacted by conflict of interest regulations. Hiring employees directly from a government agency or contractor requires certain regulatory notifications. Corporate Human Resources and the Legal Department should be consulted by management prior to entering into any such employment negotiations.

10 ways you can embrace diversity and practice inclusion

(Appendix B)

By being more aware of the diverse individuals you work with in your department, across the organization, outside of our organization and customers you serve, you'll see a change in how you live your life. For some people, that's a great undertaking. But you're likely to find it's worth the effort.

Diversity is a core competency that involves:

- Recognizing that our differences are our strengths
- Creating an environment that values and celebrates individual differences
- Encouraging each individual to achieve her/his maximum potential
- Working together with a shared mission, vision and value; valuing our customers and business partners

Cultural competency is the willingness and ability to understand and work with people from different backgrounds. Cultural competency involves having culturally sensitive attitudes and behaviors.

Becoming aware of the diversity of people around you and using that knowledge in a helpful manner is part of your job. Knowing how to practice good diversity awareness, like good customer relations, is expected of every team member at Novant Health.

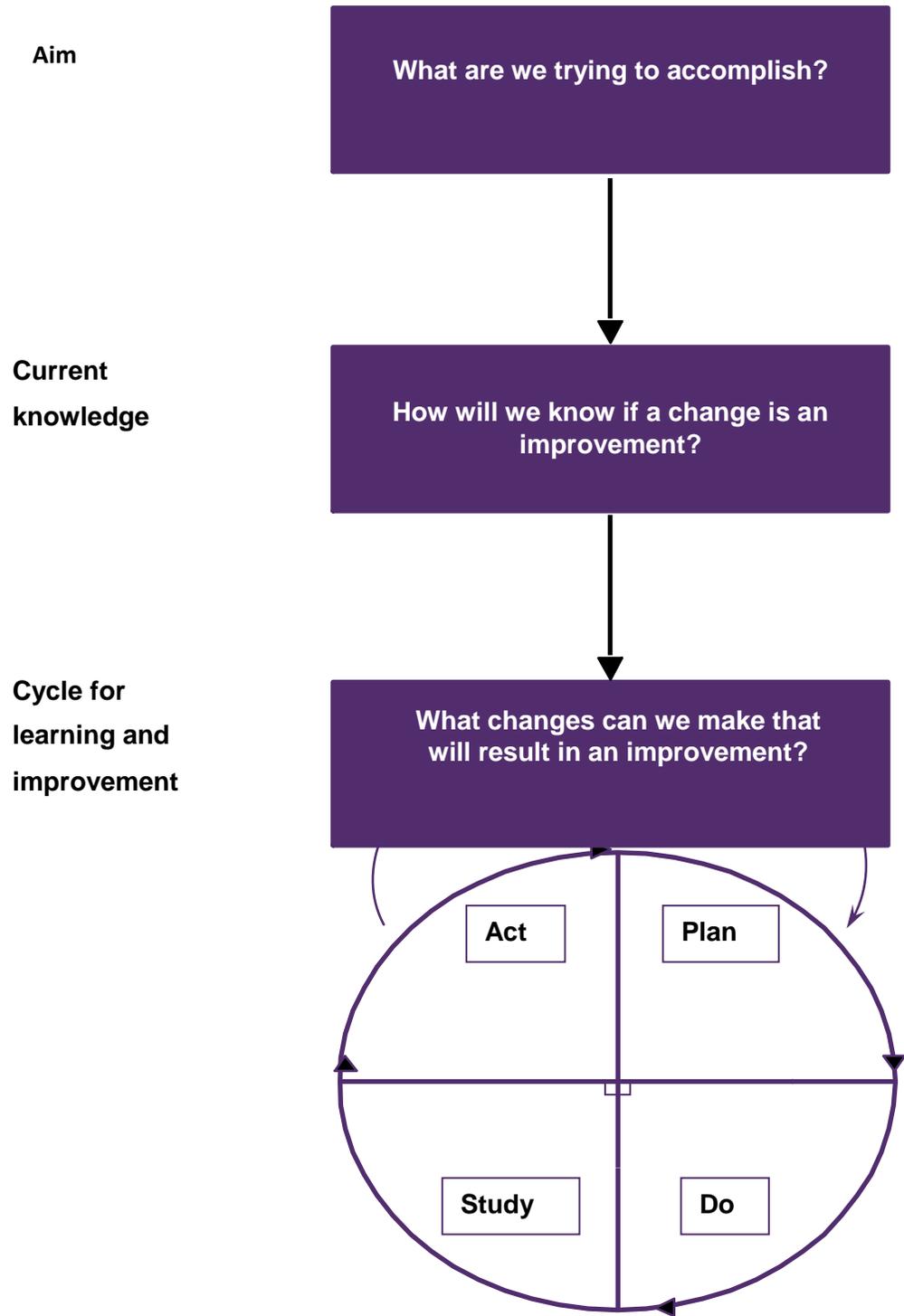
Although diversity is one of the four stated values, practicing diversity awareness throughout the organization won't happen overnight. You can begin practicing diversity awareness today.

Human behavior research has shown that it takes 28 days to break a bad habit or form a good one. And habits are a matter of practice. Try at least one of the following tips every day for the next month and you'll likely see a difference in yourself and your work.

1. **Adjust your attitude.** It's easy to stereotype an individual; but don't assume you understand someone just because of where she/he was born or the color of her/his skin.
2. **Be inclusive.** If you have a project to work on, be sure your team is assembled well. Research shows that if you include people who will bring different perspectives, you'll likely get a better result.
3. **Talk about it.** Be willing to openly discuss diversity issues, such as gender bias or cultural differences, without getting upset. If views differ, you can agree to disagree agreeably.
4. **Get to know someone "diverse."** Make a point of getting to know someone this week who differs from you. Share a cup of coffee and learn a thing or two.
5. **Seek first to understand.** Don't jump to conclusions based on what you think you know about someone; but don't ignore what you do know.
6. **Speak out.** When someone makes offensive comments or tells offensive jokes, let him or her know that it's not appropriate and if necessary, walk away.
7. **Don't assume.** Don't think someone thinks the way you do about an issue; you could be very wrong and cause misunderstandings or undue conflict.
8. **Expand your horizons.** Visit a restaurant that serves "ethnic" food or take in a multicultural art exhibit. Add books or videos that demonstrate diversity to your family collection.
9. **Volunteer.** Call the United Way Volunteer Center and find out how you can reach out and help others who may be different from you.
10. **Be diverse yourself and educate others.** Apply diversity awareness when you're away from work. If you're aware of diversity in your personal life, your life will change as your outlook changes.

Model for continuous improvement

(Appendix C)



Notice of COBRA Continuation Coverage Rights
**** Continuation Coverage Rights Under COBRA ****

(Appendix D)

Introduction

You are receiving this notice because you have recently become covered under a group health plan (the Plan). This notice contains important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. **This notice generally explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect the right to receive it.**

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you when you would otherwise lose your group health coverage. It can also become available to other members of your family who are covered under the Plan when they would otherwise lose their group health coverage. For additional information about your rights and obligations under the Plan and under federal law, you should review the Plan’s Summary Plan Description or contact the Plan Administrator.

You may have other options available to you when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse’s plan), even if that plan generally doesn’t accept late enrollees.

What is COBRA Continuation Coverage?

COBRA continuation coverage is a continuation of Plan coverage when coverage would otherwise end because of a life event known as a “qualifying event.” Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a “qualified beneficiary.” You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you are a team member, you will become a qualified beneficiary if you lose your coverage under the Plan because either one of the following qualifying events happens:

- You lose benefit eligibility, or
- Your employment ends for any reason other than your gross misconduct.

If you are the spouse of a team member, you will become a qualified beneficiary if you lose your coverage under the Plan because any of the following qualifying events happens:

- Your spouse dies;
- Your spouse’s hours of employment are reduced;

- Your spouse's employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because any of the following qualifying events happens:

- The parent-team member dies;
- The parent-team member's hours of employment are reduced;
- The parent-team member's employment ends for any reason other than his or her gross misconduct;
- The parent-team member becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the plan as a "dependent child."

When is COBRA Coverage Available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred.

You Must Give Notice of Some Qualifying Events

For the other qualifying events (divorce or legal separation of the team member and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to: Novant Health Human Resources; 4020 Kilpatrick Street; Winston Salem, NC 27104.

How is COBRA Coverage Provided?

Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered team members may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children.

COBRA continuation coverage is a temporary continuation of coverage. When the qualifying event is the death of the team member, the team member's becoming entitled to Medicare benefits (under Part A, Part B, or both), your divorce or legal separation, or a dependent child's losing eligibility as a dependent child, COBRA continuation coverage lasts for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the team member's hours of employment, and the team member became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the team member lasts until 36 months after the date of Medicare entitlement. For example, if a covered team member becomes entitled to Medicare 8 months before the date on which his employment terminates, COBRA continuation coverage for his spouse and children can last up to 36 months after the date of Medicare entitlement, which is equal to 28 months after the date of the qualifying event (36 months minus 8 months). Otherwise, when the qualifying event is the end of employment or reduction of the team member's hours of employment, COBRA continuation coverage generally lasts for only up to a total of 18 months. There are two ways in which this 18-month period of COBRA continuation coverage can be extended.

Disability extension of 18-month period of continuation coverage

If you or anyone in your family covered under the Plan is determined by the Social Security Administration to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to receive up to an additional 11 months of COBRA continuation coverage, for a total maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of continuation coverage.

Second qualifying event extension of 18-month period of continuation coverage

If your family experiences another qualifying event while receiving 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if notice of the second qualifying event is properly given to the Plan. This extension may be available to the spouse and any dependent children receiving continuation coverage if the team member or former team member dies, becomes entitled to Medicare benefits (under Part A, Part B, or both), or gets divorced or legally separated, or if the dependent child stops being eligible under the Plan as a dependent child, but only if the event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

If You Have Questions

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit the EBSA website at www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.)

Keep Your Plan Informed of Address Changes

In order to protect your family's rights, you should keep the Plan Administrator informed of any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Plan Contact Information

Novant Health Human Resources
Attn: COBRA Coordinator
4020 Kilpatrick Street
Winston Salem, NC 27104
Phone: 1-888-820-2294

HIPAA Privacy Notice

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Summary: The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires health plans to notify plan participants and beneficiaries about its policies and practices to protect the confidentiality of their health information. This document is intended to satisfy HIPAA's notice requirement with respect to all health information created, received, or maintained by Novant Health Inc.'s Group Benefit Plan (the "Plan"), as sponsored by Novant Health, Inc. (the "Company"). The Plan needs to create, receive, and maintain records that contain health information about you to administer the Plan and provide you with health care benefits. This notice describes the Plan's health information privacy policy with respect to your self-insured Medical, Dental, EAP and Health-Care FSA. The notice tells you the ways the Plan may use and disclose health information about you, describes your rights, and the obligations the Plan has regarding the use and disclosure of your health information. However, it does not address the health information policies or practices of your health care providers.

Novant Health's Pledge Regarding Health Information Privacy

The privacy policy and practices of the Novant Health Inc. Group Benefit Plan, EIN 56-1376950, Plan No. 501 (Medical, Dental, Vision, EAP and Health-Care FSA, as applicable to you) protects confidential health information that identifies you or could be used to identify you and relates to a physical or mental health condition or the payment of your health care expenses. This individually identifiable health information is known as "protected health information" (PHI). PHI does not include individually identifiable health information in employment records held by the Company, in its role as an employer. The information that is held in employment records includes drug testing results; sick leave requests and a doctor's statement documenting sick leave; and medical information needed for processing FMLA leave requests.

Privacy Obligations of the Plan

The Plan is required by law to:

- make sure that health information that identifies you is kept confidential as required by HIPAA;
- give you this notice of the Plan's legal duties and privacy practices with respect to health information about you; and
- follow the terms of the notice that is currently in effect.

Further, when and as required by HIPAA, the Plan will notify you in the event of a breach of your unsecured PHI.

Uses and Disclosures That Require Your Written Authorization

Your PHI will not be used or disclosed without an authorization from you, except as described in this notice or as otherwise permitted by federal and state health information privacy laws. Your written authorization is also required for:

- **Use or disclosure of psychotherapy notes.** Except as provided in HIPAA Section 164.508(a) (2), your authorization is required for use or disclosure of psychotherapy notes, as they are defined under HIPAA, about you.

If you authorize the Plan to use or disclose your PHI, you may revoke your authorization at any time by submitting a written request to the Novant Health manager of benefit operations. If you revoke your authorization, the Plan will no longer use or disclose your PHI for the reasons covered by your written authorization. However, your revocation will not affect any uses or disclosures the Plan has already made prior

to the date the Plan receives written notice of the revocation, nor will it affect the Plan's right to use your PHI in accordance with federal and state health information privacy laws.

How the Plan May Use and Disclose Health Information About You

The following are different ways the Plan and its business associates may use and disclose your PHI without your consent, authorization or opportunity to agree or object:

- **For Treatment.** Treatment is the provision, coordination or management of health care and related services. It also includes, but is not limited to, consultations and referrals between one or more of your providers. The Plan may disclose your PHI to a health care provider who renders treatment on your behalf. For example, if you are unable to provide your medical history as the result of an accident, the Plan may advise an emergency room physician about the types of prescription drugs you currently take.
- **For Payment.** Payment includes but is not limited to actions to make coverage determinations, provide benefits, and payment (including billing, claims management or adjudication, claims appeals determinations, coordination of benefits with another health plan, subrogation, Plan reimbursement, reviews for medical necessity and appropriateness of care, utilization review, pre-certification or pre-authorizations). The Plan may use and disclose your PHI so claims for health care treatment, services, and supplies you receive from health care providers may be paid according to the Plan's terms. For example, the Plan may receive and maintain information about surgery you received to enable the Plan to process a hospital's claim for reimbursement of surgical expenses incurred on your behalf.
- **For Health Care Operations.** Health care operations include, but are not limited to, quality assessment and improvement, reviewing competence or qualifications of health care professionals, evaluating health plan performance, underwriting, enrollment, premium rating and other insurance activities related to creating, renewing or replacing a health insurance or health benefits contract or a stop-loss or excess loss insurance contract. It also includes disease management, case management, conducting or arranging for medical review, legal services and auditing functions including fraud and abuse compliance programs, population-based activities related to improving health or reducing health care costs, business planning and development, business management, and general administrative activities. The Plan may use and disclose your PHI to enable it to operate or operate more efficiently or make certain all of the Plan's participants receive their health benefits. For example, the Plan may use your PHI for case management or to perform population-based studies designed to reduce health care costs. In addition, the Plan may use or disclose your PHI to conduct compliance reviews, audits, actuarial studies, and/or for fraud and abuse detection. The Plan may also combine health information about many Plan participants and disclose it to the Company in its role as a Plan Sponsor in summary fashion so it can decide what coverages the Plan should provide. Except as provided below, the Plan must remove information that identifies you from health information disclosed to the Company so it may be used without the Company learning who the specific participants are.
- **To the Company.** The Plan may disclose your PHI to designated Company personnel so they can carry out their Plan-related administrative functions, including the uses and disclosures described in this notice. Novant Health is the Plan Sponsor of the Plan and disclosures mentioned in this section are disclosures to the Plan Sponsor. Such disclosures will be made only to the Plan Administrator, Benefits Review Committee, Manager, Benefits Administration, Privacy Official, Novant Health Benefits Department personnel, and Business Unit Human Resources and Benefits Administrators. These individuals will protect the privacy of your health information and ensure it is used only as described in this notice or as permitted by law. Unless authorized by you in writing, your health information: (1) may not be disclosed by the Plan to any other Company, team member, or department and (2) will not be used by the Company for any employment-related actions and decisions or in connection with any other team member benefit plan sponsored by the Company.
- **To a Business Associate.** Certain services are provided to the Plan by vendors and other consultants known as "business associates." The Plan may use Novant Health Care Connections, which is a part of

the Company, as a business associate for certain case management and population-based activities, and Novant Health Care Connections may not share PHI with human resources personnel of the Company. The Plan may input information about your health care treatment into an electronic claims processing system maintained by the Plan's business associate so your claim may be paid. In so doing, the Plan will disclose your PHI to its business associate so it can perform its claims payment function. The Plan may also utilize the electronic medical record systems and staff of Novant Health, as a business associate, in order to document case management and population-based activities for the benefit of you and other enrollees. The Plan will require its business associates, through contract, to appropriately safeguard your health information.

- **Treatment Alternatives.** The Plan may use and disclose your PHI to tell you about possible treatment options or alternatives that may be of interest to you.
- **Health-Related Benefits and Services.** The Plan may use and disclose your PHI to tell you about health-related benefits or services that may be of interest to you.
- **Individuals Involved in Your Care or Payment of Your Care.** The Plan may use or disclose PHI to your family member, other relative, your close personal friend, or other person you identify, if the PHI is directly relevant to such person's involvement in your health care or payment related to your care. The Plan may use or disclose your PHI to notify a family member, your personal representative, or another person responsible for your care, about your location, condition, or death. In these situations, when you are present and not incapacitated, the Plan will either (1) obtain your agreement; (2) provide you with an opportunity to disagree to the use or disclosure; or (3) using reasonable judgment, infer from the circumstances that you do not object to the disclosure. If you are not present, or you cannot agree or disagree to the use or disclosure due to incapacity or emergency circumstances, the Plan may use professional judgment to determine that the disclosure is in your best interests and disclose PHI relevant to such person's involvement in your care, payment related to your health care, or notification purposes.
- **As Required by Law.** The Plan will disclose your PHI when required to do so by federal, state, or local law and the use or disclosure complies with the law and is limited to the relevant requirements of such law, including those that require the reporting of certain types of wounds or physical injuries.

Note: The Plan does not use or disclose PHI that is genetic information for underwriting purposes. Underwriting purposes means: (1) rules for, or determination of, eligibility (including enrollment and continued eligibility) for, or determination of, benefits under the Plan (including changes in deductibles or other cost-sharing mechanisms in return for activities such as completing a health risk assessment or participating in a wellness program); (2) the computation of premium or contribution amounts under the Plan (including discounts, rebates, payments in kind, or other premium differential mechanisms in return for activities such as completing a health risk assessment or participating in a wellness program); (3) the application of any pre-existing condition exclusion under the Plan, coverage, or policy; and (4) other activities related to the creation, renewal, or replacement of a contract of health insurance or health benefits. However, underwriting purposes does not include determinations of medical appropriateness where an individual seeks a benefit under the Plan.

Special Use and Disclosure Situations

The Plan may also use or disclose your PHI without your consent, authorization or opportunity to agree or object under the following circumstances:

- **Lawsuits and Disputes.** If you become involved in a lawsuit or other legal action, the Plan may disclose your PHI in response to a court or administrative order, a subpoena, warrant, discovery request, or other lawful due process provided certain conditions are met.
- **Law Enforcement.** The Plan may release your PHI if asked to do so by a law enforcement official, for example, to identify or locate a suspect, material witness, or missing person or to report a crime, the crime's location or victims, or the identity, description, or location of the person who committed the crime.
- **Workers' Compensation.** The Plan may disclose your PHI to the extent authorized by and to the extent necessary to comply with workers' compensation laws and other similar programs.
- **Military and Veterans.** If you are or become a member of the U.S. armed forces, the Plan may release medical information about you as deemed necessary by military command authorities.

- **To Avert Serious Threat to Health or Safety.** When consistent with applicable law and standards of ethical conduct, the Plan may use and disclose your PHI when necessary to prevent a serious threat to your health and safety, or the health and safety of the public or another person.
- **Public Health Activities.** The Plan may disclose health information about you for public health activities, including to assist public health authorities or other legal authorities to prevent or control disease, injury or disability; reporting births and deaths; reporting child abuse or neglect; or reporting reactions to medication or problems with medical products or to notify people of recalls of products they have been using.
- **To Assist Victims of Abuse, Neglect, or Domestic Violence.** As required by law.
- **Health Oversight Activities.** The Plan may disclose your PHI to a public health oversight agency for oversight activities authorized by law. This includes audits, investigations, inspections, and licensure necessary for the government to monitor the health care system and government programs (for example, to investigate complaints against providers or investigate Medicare or Medicaid fraud).
- **Research.** Under certain circumstances, the Plan may use and disclose your PHI for medical research purposes as provided under the HIPAA privacy regulations.
- **National Security, Intelligence Activities, and Protective Services.** The Plan may release your PHI to authorized federal officials: (1) for intelligence, counterintelligence, and other national security activities authorized by law and (2) to enable them to provide protection to the members of the U.S. government or foreign heads of state, or to conduct special investigations.
- **Organ and Tissue Donation.** If you are an organ donor, the Plan may release medical information to organizations that handle organ procurement or organ, eye, or tissue transplantation or to an organ donation bank to facilitate organ or tissue donation and transplantation.
- **Coroners, Medical Examiners, and Funeral Directors.** The Plan may release your PHI to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or to determine the cause of death. The Plan may also release your PHI to a funeral director, as necessary, to carry out his/her duty.
- **For law enforcement custodial situations.** We may disclose PHI about you to a correctional institution that has custody of you.
- **Disaster Relief.** Under certain circumstances, the Plan may use or disclose your PHI to a public or private entity authorized by law or by its charter to assist in disaster relief efforts.

Your Rights Regarding Health Information About You

Your rights regarding the health information the Plan maintains about you are as follows:

Right to Inspect and Copy Your Protected Health Information. You have the right to inspect and copy your PHI that is maintained in a designated record set for so long as the Plan maintains your PHI. A “designated record set” includes medical information about eligibility, enrollment, claim and appeal records, medical and billing records maintained by or for the Plan, but does not include psychotherapy notes, information intended for use in the civil, criminal, or administrative proceeding, or information that is otherwise prohibited by law.

If your PHI is maintained in one or more designated record sets electronically and if you request an electronic copy of your PHI, then the Plan will provide you with access to PHI in the electronic form and format you requested, if it is readily producible in such form or format. If it is not readily producible, then access will be provided in a readable electronic form and format that is mutually agreed upon.

You may request that the Plan provide a copy of your PHI to another person that you designate. Your request must be in writing, be signed by you, and clearly identify the designated person and where to send the copy of your PHI.

To request to inspect and/or copy health information maintained by the Plan, submit your request in writing to:

Attention: Manager of Benefit Operations
Novant Health, Inc.
4020 Kilpatrick St., Suite 201
Winston-Salem, North Carolina 27104
800-890-5420

Your request must include the form or format of access that you want, a description of the PHI that the request applies to, and appropriate contact information for you.

The Plan may charge a fee for the cost of copying and/or mailing your request. In limited circumstances, the Plan may deny your request to inspect and copy your PHI. Generally, if you are denied access to health information, you may request a review of the denial.

- **Right to Amend.** If you feel that health information the Plan has about you is incorrect or incomplete, you may ask the Plan to amend it. You have the right to request an amendment to your PHI or a record about you in a designated record set for as long as the information is kept by or for the Plan. To request an amendment, send a detailed request in writing to the manager of benefit operations. The written request must be submitted on a Novant Health approved request form, which is available from [insert]. You must provide the reason(s) to support your request. The Plan may deny your request if you ask the Plan to amend health information that was: accurate and complete, not created by the Plan; not part of the designated record set; or not information that you would be permitted to inspect and copy.
- **Right to an Accounting of Disclosures.** If you ask in writing, you can get a list of some, but not all, the disclosures the Plan made of your health information. For example, the list will not include disclosures made for treatment, payment, healthcare operations or disclosures you specifically authorized. You may ask for disclosures made in the last six (6) years. To request an accounting of disclosures, submit your request in writing to the manager of benefit operations. Your request must state a time period, which may not be longer than six years prior to the date the accounting was requested. If you request more than one accounting within a 12-month period, the Plan may charge a reasonable, cost-based fee for each subsequent accounting. You will be notified in advance of the cost involved, and you may choose to withdraw or modify your request at that time before any costs are incurred.
- **Right to Request Restrictions.** You have the right to request a restriction on the health information the Plan uses or disclosures about you for treatment, payment, or health care operations. You also have the right to request a limit on the health information the Plan discloses about you. For example, you could ask that the Plan not use or disclose to a family member or friend information about a surgery you had. To request restrictions, make your request in writing to the manager of benefit operations. You must advise us: (1) what information you want to limit; (2) whether you want to limit the Plan's use, disclosure, or both; and (3) to whom you want the limit(s) to apply.

Note: *The Plan is not required to agree to your request, but will notify you of the determination.*

- **State Privacy Rights.** You may have additional privacy rights under state laws, including rights in connection with mental health and psychotherapy reports, pregnancy, HIV/AIDS related illnesses, and the health treatment of minors.

- **Right to Request Confidential Communications.** You have the right to request that the Plan communicate with you about health matters in a certain way or at a certain location. For example, you can ask that the Plan send you explanation of benefits (EOB) forms about your benefit claims to a specified address. To request confidential communications, make your request in writing to the manager of benefit operations. The Plan will make reasonable attempts to accommodate reasonable requests for confidential communications.
- **Right to a Paper Copy of this Notice.** You have the right to a paper copy of this notice at any time, even if you received this notice previously or agreed to receive this notice electronically. You may write to the manager of benefit operations to request a written copy of this notice at any time. You may also view this notice on the Company's Intranet site, under team member resources > benefits > benefit resource center.

Changes to this Notice

The Plan reserves the right to change this notice at any time and to make the revised or changed notice effective for health information the Plan already has about you, as well as any information the Plan receives in the future. The Plan will post a copy of the current notice on the Company Intranet site, under Benefits > Benefits Resource Center > Compliance and Regulatory (NovantHealth.org/careers/benefits)

Complaints

If you believe your privacy rights under this policy have been violated, you may file a written complaint with the Plan Administrator at the address listed below. Alternatively, you may complain to the Secretary of the U.S. Department of Health and Human Services, generally, within 180 days of when the act or omission complained of occurred.

Note: You will not be penalized or retaliated against for filing a complaint.

Other Uses and Disclosures of Health Information

Other uses and disclosures of health information not covered by this notice or by the laws that apply to the Plan will be made only with your written authorization. If you authorize the Plan to use or disclose your PHI, you may revoke the authorization, in writing, at any time. If you revoke your authorization, the Plan will no longer use or disclose your PHI for the reasons covered by your written authorization; however, the Plan will not reverse any uses or disclosures already made in reliance on your prior authorization.

Contact Information

If you have any questions about this notice, please contact the manager of benefit operations as shown below:

Attention: Manager of Benefit Operations
Novant Health, Inc.
4020 Kilpatrick St., Suite 201
Winston-Salem, North Carolina 27104
800-890-5420

Notice Effective Date: January 1, 2013, and is updated effective as of September 29, 2017.

**Starting Line: Computer Resources
Reference Guide for New Team Members**

Starting Line



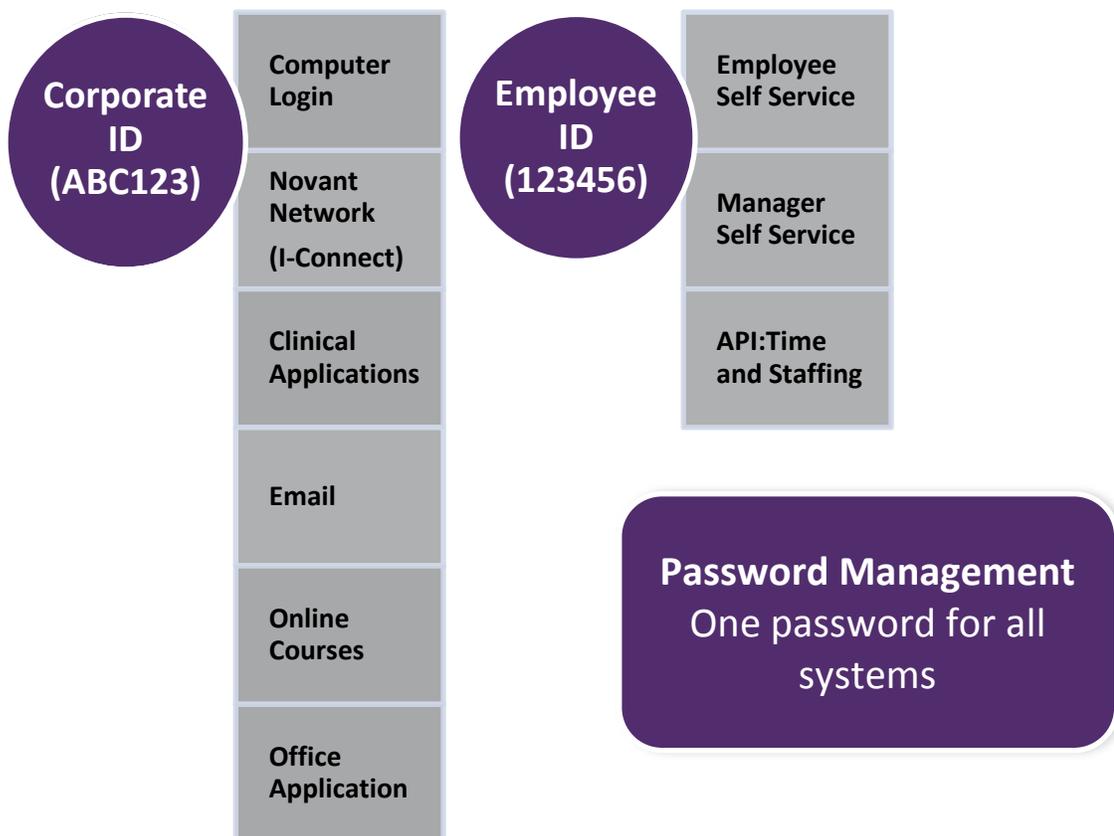
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Novant Health resources for team members

User IDs

- **Corporate ID** – This is a 6-digit alpha-numeric number (ABC123) used to access programs/applications related to your job. Usually it is your initials plus three or four numbers. The Corporate ID is not case sensitive.
- **Employee ID** – This is a 6-digit number used to access programs/applications related to you as an employee. (Found on the back of your ID badge.)
- To locate your Corporate ID, you must be on the Novant Health network. Go to *I-Connect*, click *Directories* (on right), then click *Information Central*. The reporting structure for your department will appear and your picture will be in the top left corner of the screen. Click *About Me* and a screen with your job information will open. Your Corporate ID (ABC123) is listed on the Employee ID line and your Employee ID is listed on the Employee Number line.



Need Help with a Computer/Software Problem? Call the Support Center from work or home 365/24/7

Toll free 1-866-966-8268
Thomasville area 336-472-2597

Charlotte area 704-384-3100
Winston-Salem area 336-718-9000

MyPassword

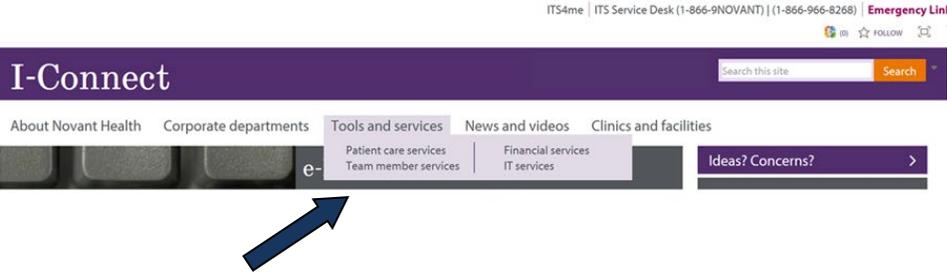
Password Management is an application that allows employees to synchronize and set their passwords. The directions for Password Management are shown below:

You must change your password every 90 days.

Note: you will receive an email prompting you to change your password in MyPassword.

Registration

- This is a **ONE-TIME** event - Registering includes creating questions and answers that you will come back and answer each time you need to change your password
- Once you finish these instructions, be sure to continue with the “Change/Synchronize” Instructions to create a unique password

<p>To access Password Management:</p> <p>1. Using Internet Explorer, go to the I-Connect home page, click on Tools and Services under the aubergine bar. Select Team member services from the drop-down menu.</p>	
<p>2. Click on Password management in the menu.</p>	<p>Team member services</p> <ul style="list-style-type: none">• API time and staffing• API time and staffing resources• BrandHub (online templates, photos, brand standards)• Choices and champions• Clinical equipment management program (CEMP) work request form• eCards - recognize being remarkable• e-Travel<ul style="list-style-type: none">◦ Booking online business travel◦ Requesting log in and view training materials• Food service menus - Morrison menus online• Hand hygiene observations• HR-Connect• I-Learn• Inadvertent exposure reporting link (excluding needlesticks and splashes)• Information Central - online phone directory• Krames on-line health information• MyChart• Novant Health online store• Outlook web mail• Password management• Plant engineering services work request• Self service (PeopleSoft)• Self service resources for team members and managers (PeopleSoft)• Team member discounts• The Alert Line - online reporting system for ethical and legal concerns• Vendormate• Ventiv/IVOS employee incident reporting

3. Enter your Corp ID (e.g. abc123) in the appropriate field on the Manage your password screen

Note that throughout the screens a red checkmark to the right of a field indicates required information. Also hovering on the red question mark will give helpful hints.

4. Click **Next**.

Manage your password

MyPassword has been redesigned! This newly enhanced user experience will minimize the time required to set-up and manage your password.

 : Help  : Required Input Field  : Numeric Field  : Read Only Field  logout

Welcome to MyPassword

To begin, please enter your Corp ID (i.e. abc123) to login to MyPassword. Click "Next" to continue.



Corporate ID (Such as ABC123)  

Next



Please contact the ITS Service Desk at 1-866-9Novant (1-866-966-8268) for assistance.

© Copyright. Courion Corporation. All rights reserved.

The **MyPassword Start Registration** screen appears.

5. Enter your birthdate using MMDD format (e.g. January 12 would be entered 0112) in the appropriate field.
6. Enter the last 4 digits of your Social Security Number (e.g. 1234) in the appropriate field.
7. Click **Next** and follow directions on screen to create security questions and answers.

Work Re

Manage your password

MyPassword has been redesigned! This newly enhanced user experience will minimize the time required to set-up and manage your password.

 : Help  : Required Input Field  : Numeric Field  : Read Only Field  logout

MyPassword Start Registration

We show that you have not yet registered with MyPassword. We can do that here in a few short steps.

So that we can verify your identity, please enter the month and day you were born and the last 4 digits of your social security number.

Click Next when finished to continue.

Enter the Month (MM) and day (DD) of your birthday using numeric values (i.e. January 12 would be entered as 0112)*  

Enter the last 4 digits of your Social Security Number (i.e. 1234). If you are a student, enter the last 4 digits of your StudentID  

Previous **Next**

Once you have selected the security questions and answers, you will see the **MyPassword Setup Complete** screen. You have successfully set up your profile and will receive a confirmation email.
Note: You do not need to do this setup again unless you want to edit your questions/answers in the future.

You are now ready to set up your Password which will synchronize your Corporate ID and your badge (employee) number for many of the applications you use.

8. Click on **Reset Password** and follow the prompts.

Manage your password

MyPassword has been redesigned! This newly enhanced user experience will minimize the time required to set-up and manage your password.

: Help : Required Input Field : Numeric Field : Read Only Field : Logout

MyPassword Setup Complete

You're almost done! - Profile Successfully Created

Congratulations, **Emma White**, you have successfully completed the profile setup for MyPassword. You will not have to complete this setup again. You may edit these questions and answers at any time.

An email will be sent to you shortly confirming this setup. If you make changes at any time to this profile you will receive a confirmation email.

If you ever receive a confirmation email when you did **not** update or change your profile, please notify your manager and ITS immediately.

Now that your profile has been setup, it is time to set a password. Click the Reset Password button to continue.

Reset Password

Change/Sync

To Change/Synchronize your Password

- **Always** create/change your password **here** so that it **synchronizes** (creates the same password for multiple systems within Novant Health).
- If you **forget** your password, come here and reset it.

Users will be able to:

- Login to the My Password application by authenticating their identity
- Create a unique password following the rules

You may reset your password at any time but you must reset it before it expires every 90 days.

If you have forgotten your Password, you use this same process to reset it yourself by authenticating your identity in MyPassword and then choosing a new password.

Create a password in the password field that meets the rules that appear on the screen.

You will know you have met a rule when the text turns green as you type.

Passwords must contain:

- EXACTLY 8 characters
- At least 1, no more than 5 UPPERCASE characters
- At least 1, no more than 7 lowercase characters
- At least 1, no more than 5 numbers
- Must **NOT** contain special characters (/,*^,\$)
- Must **NOT** use more than 3 sequential characters (abcd, wxyz, 1234)
- Must match the Verify Password field

Re-enter your password in the Verify Password field

Click **Next** for the **MyPassword Results** screen.

When the **MyPassword Results** screen appears, review the status of each of your accounts/applications listed in the Success Details table. If any of the applications failed to synchronize, please contact the:

ITS service desk - 1-866-9Novant
(1-866-966-8268)

Note: To finalize and verify that your password works:

- Log off the computer
- Log back on using your Corporate ID and new password.

This ensures your password is setup properly.

Manage your password

MyPassword has been redesigned! This newly enhanced user experience will minimize the time required to set-up and manage your password.

: Help : Required Input Field : Numeric Field : Read Only Field logout

MyPassword Set New Passwords

Emma White, next please enter your new password in the boxes below. Be sure to enter the same password in both boxes, and that your chosen password meets all the criteria described. When all the rules have turned green, click Next to continue.

Please use a password you have not previously used.

- Must be exactly 8 characters in length, including numbers.
- Must contain at least 1 UPPER CASE character.
- Must contain at least 1 lower case character.
- Must contain at least 1 number.
- ✓ May NOT contain special characters.
- ✓ Must not use more than 3 sequential characters. (abcd, wxyz, 1234, etc.)
- ✓ Must not include your first name, middle name, or last name
- ✓ Must not include your Corp ID, employee number, or the word Novant
- Must match the verify password field.

New Password:

Verify New Password:

You will know that you have met a rule when the text turns green as you type.

The last rule will turn green if you re-entered your password correctly.

Manage your password

MyPassword has been redesigned! This newly enhanced user experience will minimize the time required to set-up and manage your password.

: Help : Required Input Field : Numeric Field : Read Only Field logout

MyPassword Results

Thank you, Emma White, you have completed the resetting and synchronization process. Please review the status of each of your accounts/applications listed in the table below. Please contact ITS Service Desk at 1-866-9Novant (1-866-966-8268) if you have any status failures

Success Details		
System	Account ID	Status
API Time and Staffing/Peoplesoft	166790	Success
Active Directory	EWV005	Success



API Time & Staffing by Centricity



If you have difficulty logging in, please contact the Novant Health DPS Support Center by phone at 1-866-9Novant (866-966-8268) or by email to the Support Center in Outlook.

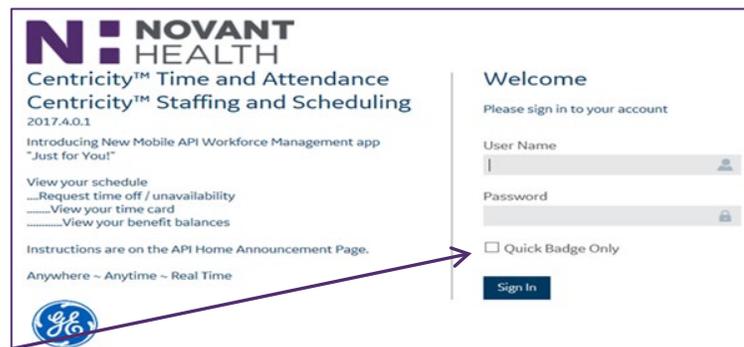
This guide helps you to:

- Clock in and out using a computer
- Submit requests for time off
- Correct missed clockings
- Approve your time

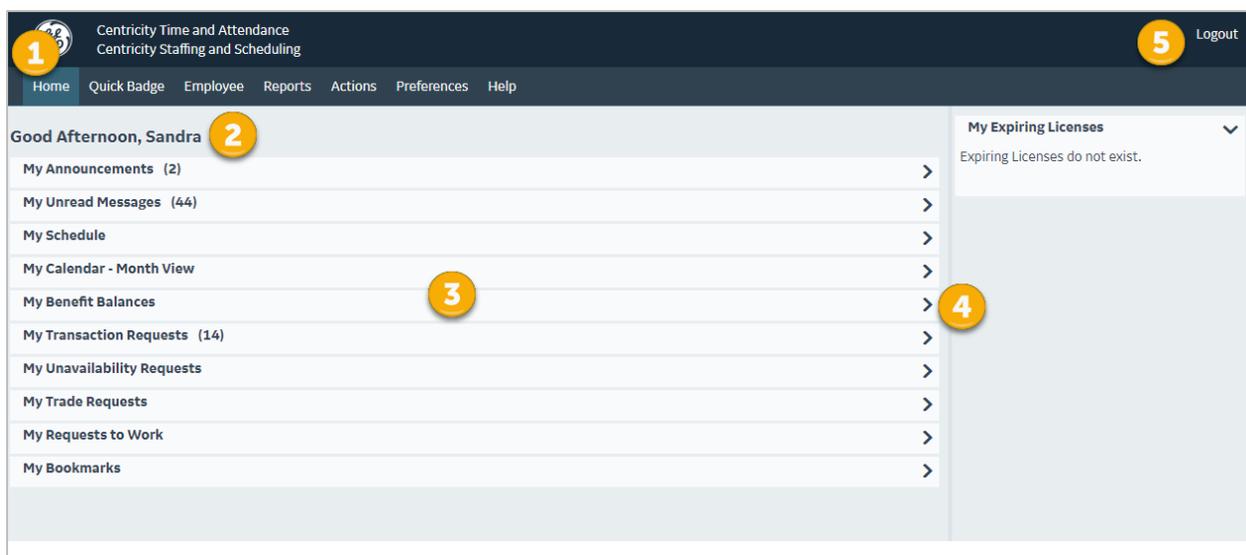
Login

1. In the User Name box, enter your **Employee ID/Badge Number**.
2. In the Password box, enter your current **password** (created in MyPassword.).
3. Click the **Login** button.

If you do not have access to a badge reader, you can clock in and out by clicking **Quick Badge Only**.

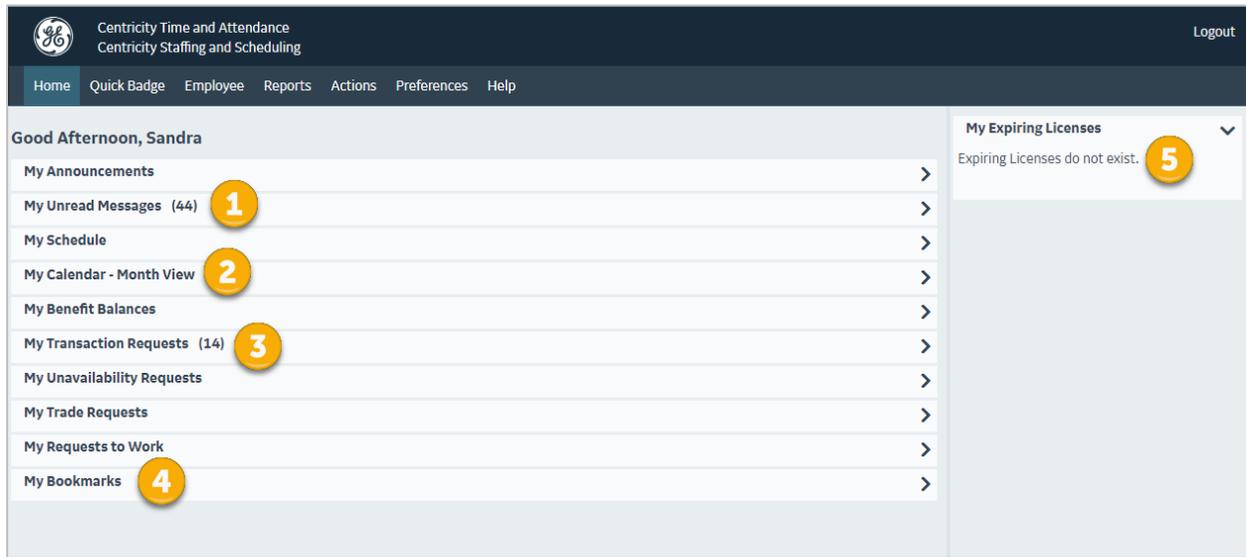


Home



1	The Toolbar is used to navigate to other sections.	4	Click the arrow to show details for that “card”.
2	A greeting displays along with your name.	5	Use this button to log out.
3	“Cards” that show time & attendance information.		

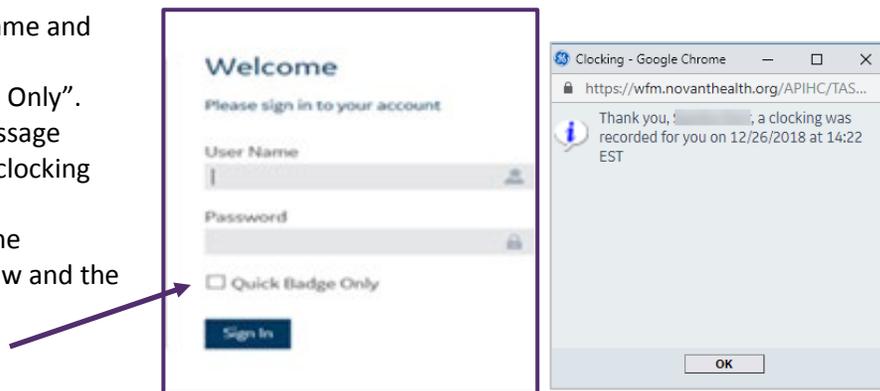
Home Section Cards



1	My Unread Messages card contains messages to you personally from within the API Time and Staffing Portal.	4	My Bookmarks will display any quick links that you have set up in the system. The Bookmarks is displayed in the left pane of all screens.
2	My Calendar Month View will display another version of the month's transactions. Hover over a transaction to see a white "informational tag" that includes a description of the item.	5	Under My Expiring Licenses , you may check if you currently have any expired licenses or have licenses that are about to expire.
3	The My Transactions Requests will display the status and details of all requests in the pay period.		All remaining cards (My Schedule, My Requests to Work, My Trade Requests, My Unavailability Requests) display information when using Staff Scheduling.

To Clock In and Out

1. Enter your User name and Password.
2. Click "Quick Badge Only".
3. Click Login. (A message indicates that the clocking was accepted.)
4. Click OK to close the information window and the login screen.



Employee tab: The Time Card Screen (TCS) view

The screenshot shows the Centricity Time and Attendance system interface. At the top, there's a header with the Centricity logo and navigation links: Home, Quick Badge, Employee, Reports, Actions, Preferences, Help, and Logout. The main content area is divided into several sections:

- Employee Navigator (1):** A sidebar on the left containing fields for Employee Name, Name, and Pay Period (12/23/2018 - 01/05/2019), along with buttons for 'Back to Search Results', 'Add Calendar', 'Add Clocking', and 'Add Unavailability'.
- Transaction List Items:** A section with checkboxes for 'Calendars', 'Clockings', 'Adjustments', 'Retro Calculator Adjustments', 'Pay Period Only', and 'Show Requests'.
- Transaction List Actions:** Buttons for 'Cancel Selected' and 'Delete Selected'.
- Transactions (List):** A table with columns: Transactions, Source, Date, Time, Hours, Code, Department, and Job Class. It lists several transactions for the pay period.
- Exceptions (4):** A section indicating 'Exceptions do not exist for this pay period.'
- Benefit Balances, Requests, Employee General Information, Labor Distributions:** Summary sections with expandable arrows.
- Pay Distributions (Actual Hours):** A table showing 'AH: 80.00 Total: 80.00' with rows for EXMPT (Exempt Regular, 64.00) and PTOSE (Scheduled PTO, 16.00).
- Pay Distributions (Daily Hours):** A section showing 'AH: 80.00 Total: 80.00' with an expandable arrow (3).
- Pay Distributions (Transactions):** A section with an expandable arrow.
- Schedule:** A section with an expandable arrow.

1	Employee Navigator: Displays the name, number and date of the pay period information in the screen.	3	Pay Distributions Actual Hours: Displays hour totals by pay code for the pay period. Pay Distributions Daily Hours: Breaks the pay period into weekly totals, as well as pay distribution totals, for each employee.
2	Transaction List: Contains your clockings and calendars as well as any clocking and calendar requests.	4	Exceptions: Contains pay period exceptions, details of pay period request, current benefit balances, labor distributions, etc.

Correcting a Missed Punch "Add Clocking"

To add a missed in or out punch:

1. On the TCS (on left under Employee Actions), click **Add Clocking**.
2. Enter date and time.
3. Click **Save**.

The request will appear on the Time Card Screen. It then needs to be reviewed and approved (or denied) by your timekeeper.

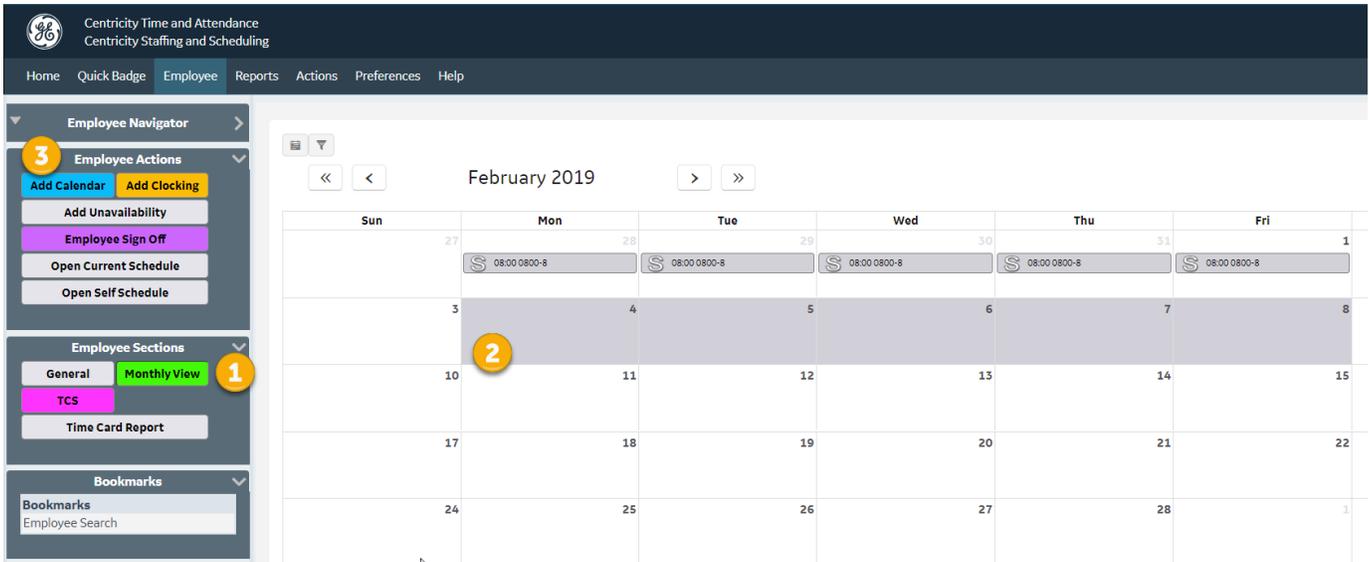
Requesting Time Off "Add Calendar"

To ask for PTO or to record sick time:

1. On the TCS (on left under Employee Actions), click **Add Calendar**.
2. Enter **Hours/Units** of time off (ie. 8.0)
3. Enter a **Paycode** (ie PTOSE - PTO scheduled excused)
4. Enter the **Time** (start time of your shift) – (ie 08:00)
5. **Requested Reason** – enter any addition information as needed
6. Click **Save**.

The request will appear on the Time Card Screen. It then needs to be reviewed and approved (or denied) by your leader.

Use the Monthly View screen to add calendars for more than one day at a time.



To add a **Calendar Request** using the Monthly View screen:

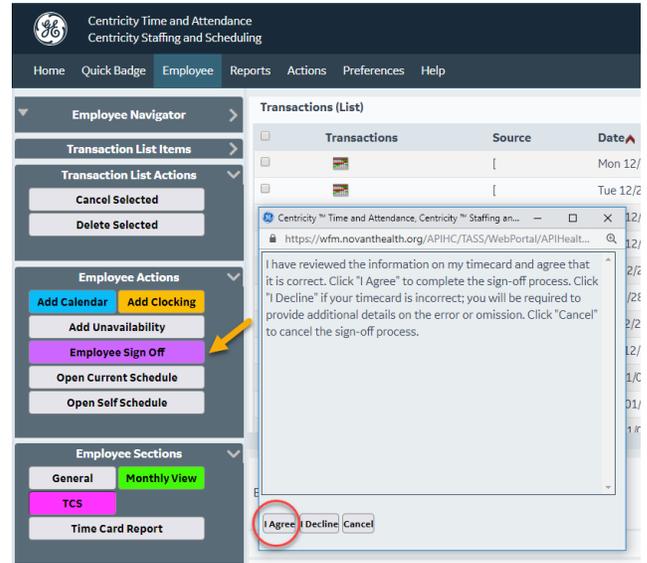
1. In the Employee tab, click on the **Monthly View** button.
2. Select the dates you wish to request off.
3. Click **Add Calendar**.
 - a. Enter **Hours/Units** of time off (ie. 8.0).
 - b. Enter a **Paycode** (ie PTOSE - PTO scheduled excused)
 - c. Enter the **Time** (start time of your shift) – (ie 08:00)
 - d. **Requested Reason** – enter any addition information as needed.
 - e. Click **Save**.

Employee Sign Off

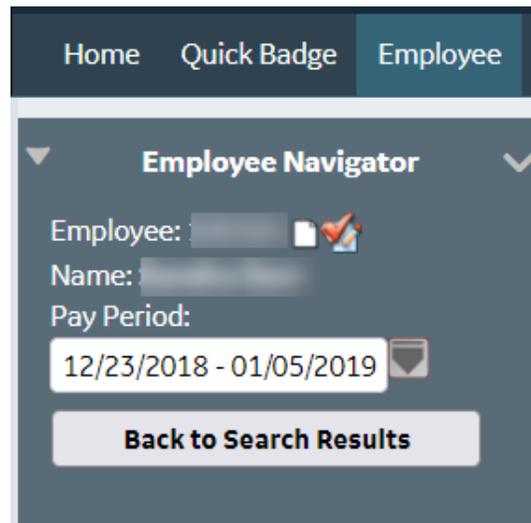
Employee Sign-Off allows you to alert your timekeeper to problems you see with your time card or to communicate that what you see is accurate. Team members must sign off on their time every two weeks.

To Sign Off or Decline Sign Off on your Time Card:

1. From the TCS, click the Employee Sign-Off button. Select the **I Agree** button from the pop up box OR select the **I Decline** button if you do not approve of your time card and wish your timekeeper to look into some issues.
 - a. If you decline, contact your timekeeper to make them aware of the issues.



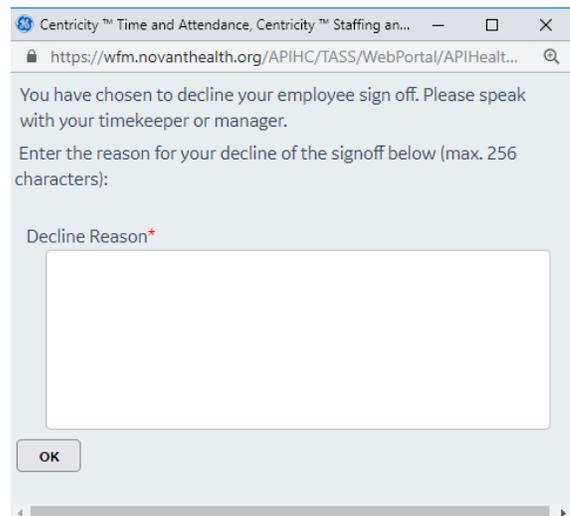
After **Approving your time card**, you will see a Red Check Mark icon by your name on the TCS.



If you Decline your time card:

1. An additional window will appear
2. Enter a specific reason for declining.
3. Click OK

Remember to alert your timekeeper that you declined to sign off on your timecard.



Deleting Clocking and Calendar Request

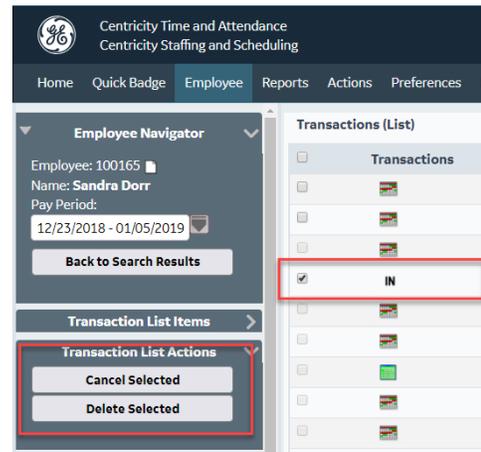
If the current pay period is still open, you can request to delete a PTO request or a clocking in error. The process is the same for a clocking or calendar request.

- Requests for deletion of clockings are reviewed and approved (or denied) by timekeepers as appropriate.
- Requests for deletion of calendars are reviewed and approved (or denied) by the employee's leader.

Note: Talk to your leader about the procedure for deleting a calendar request after the current pay period is closed.

To **delete** a (clocking or calendar) request:

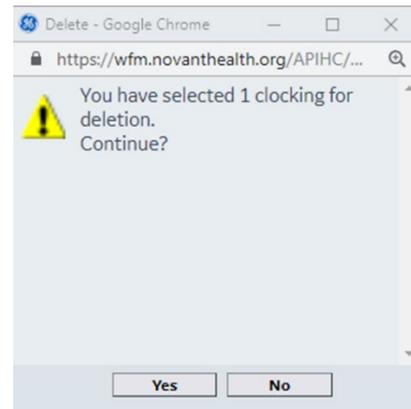
- Check the box next to the calendar or clocking request you wish to delete.
- Select **Cancel Selected** or **Delete Selected** from the left pane.



You will receive a message asking you to confirm the transaction.

Click **Yes** to delete the request.

The request for deletion will be reviewed and approved (or denied) by your timekeeper or leader as appropriate.



ALWAYS logout when you are done to ensure confidentiality

Complete online modules NH Computer, I-Connect/I-Learn

Located at I-Connect>Tools and Services>Team Member Services>I-Learn:

- z2088 API All Employees: Introduction to Time & Staffing
- z2083 API All Employees: Time & Attendance
- z1255 API Badge Reader Time Clock Training
- z2089 API All employees: Introduction to Staff Scheduling (only if applicable in your dept.)

API Mobile App: Centricity Workforce

Download the Centricity Workforce app to your mobile device.

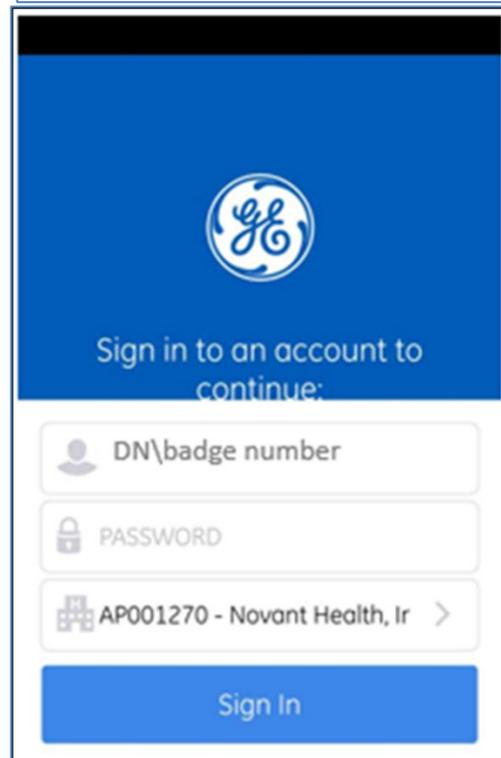
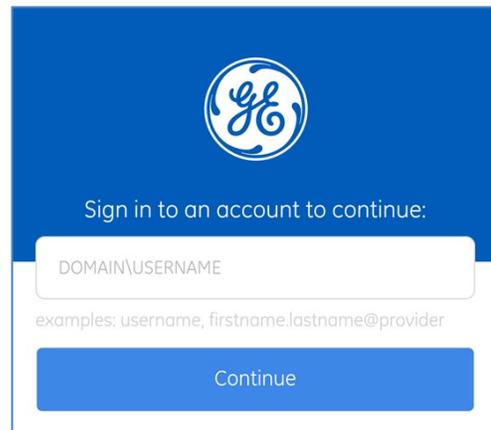


The **DOMAIN\USERNAME** = DN\badge number

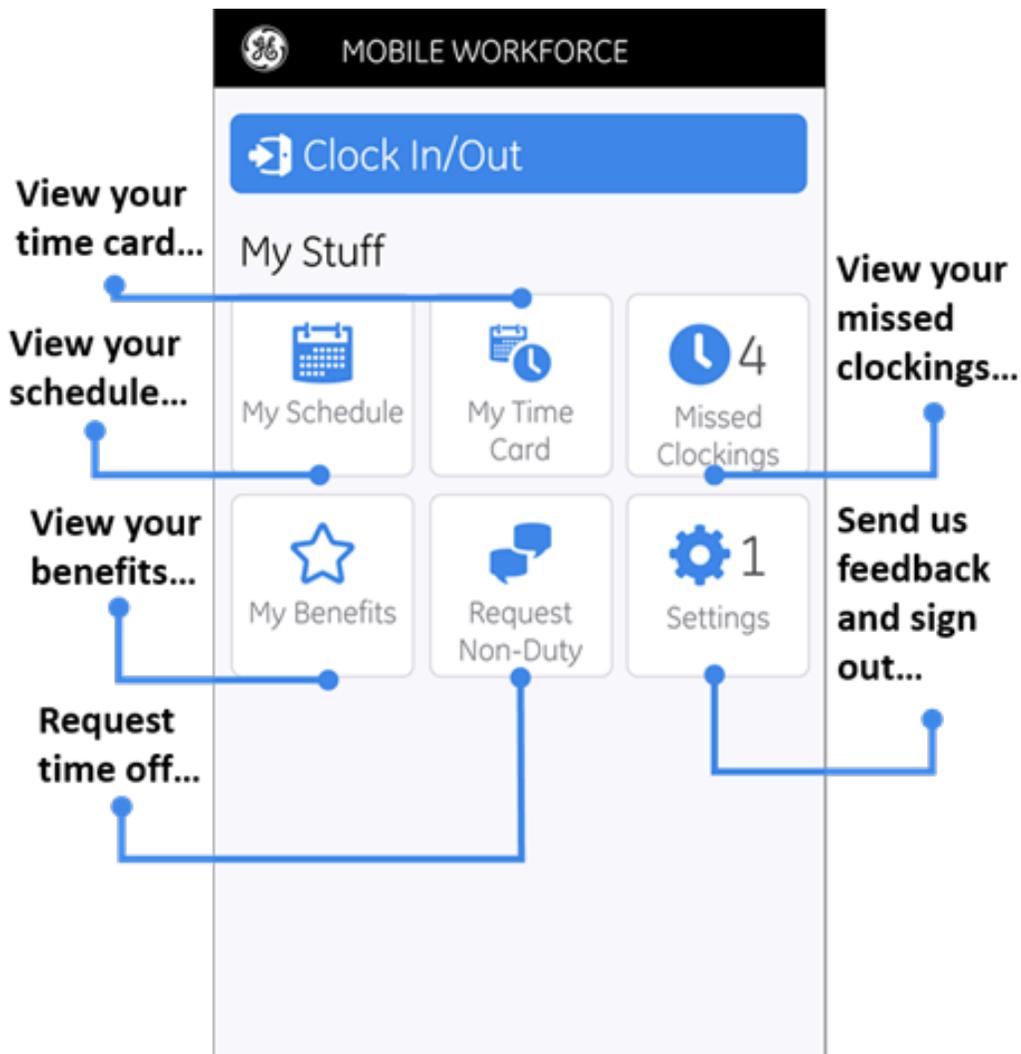
- Example: DN\123456

Password = Your NH password (created in Password Management)

Company code = AP001270 (for everyone)



Main Screen of App



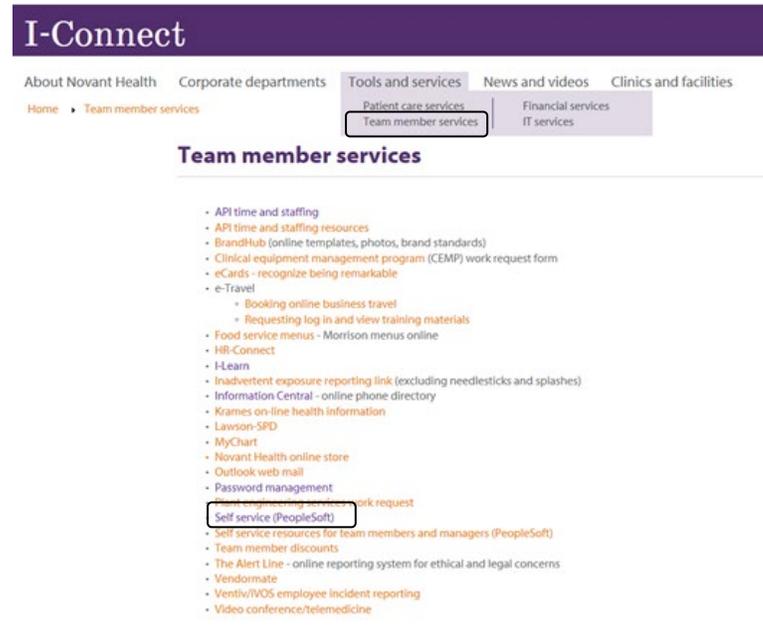
For more detailed instructions, use the following pathway to visit the API time and staffing resources page on I-Connect.

I-Connect > Tools and services > Team member services > API time and staffing resources > Time and Attendance Documentation (on the left side of the page) > Team Member Quick start guide with healthcare system code.pdf

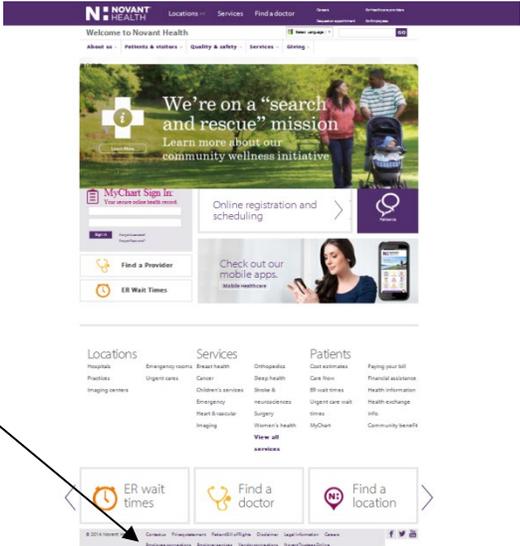
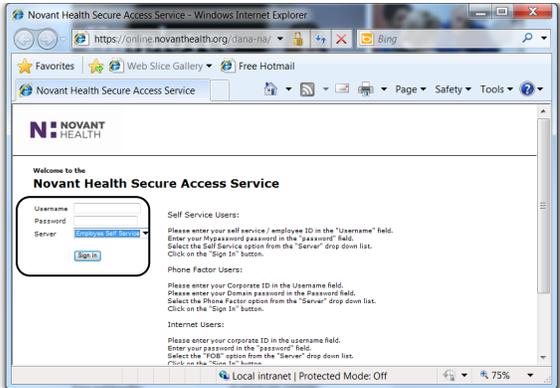
Self-Service (PeopleSoft) – Log In

Every employee has access **from work and home** to manage personal information, look at paycheck, enroll in benefits, complete tax forms, etc.

Access at work

<p>If at work:</p> <ol style="list-style-type: none">1. From the I-Connect homepage point to Tools and Services and then click:<ul style="list-style-type: none">• Team Member Services• Self Service (PeopleSoft)	 <p>I-Connect</p> <p>About Novant Health Corporate departments Tools and services News and videos Clinics and facilities</p> <p>Home > Team member services</p> <p>Patient care services Team member services Financial services IT services</p> <h3>Team member services</h3> <ul style="list-style-type: none">• API time and staffing• API time and staffing resources• BrandHub (online templates, photos, brand standards)• Clinical equipment management program (CEMP) work request form• eCards - recognize being remarkable• e-Travel<ul style="list-style-type: none">• Booking online business travel• Requesting log in and view training materials• Food service menus - Morrison menus online• HR-Connect• I-Learn• Inadvertent exposure reporting link (excluding needles and splashes)• Information Central - online phone directory• Krames on-line health information• Lawson-SPD• MyChart• Novant Health online store• Outlook web mail• Password management• Self service (PeopleSoft)• Self service resources for team members and managers (PeopleSoft)• Team member discounts• The Alert Line - online reporting system for ethical and legal concerns• Vendomate• Ventiv/IVOS employee incident reporting• Video conference/telemedicine
<ol style="list-style-type: none">2. The Employee Self Service log-in window appears:<ul style="list-style-type: none">• Enter your User ID (6-digit employee ID number)• Enter Password (created in Password Management)• Click Sign In <p>The Employee Self Service page opens.</p>	 <p>NOVANT HEALTH</p> <p>User ID</p> <p>Password</p> <p>Select a Language</p> <p>English</p> <p>Sign In</p> <p>Enable Accessibility Mode</p> <p>Copyright © 2000, 2015, Oracle and/or its affiliates. All rights reserved.</p> <p>Enter your 6 digit badge number and your password.</p>

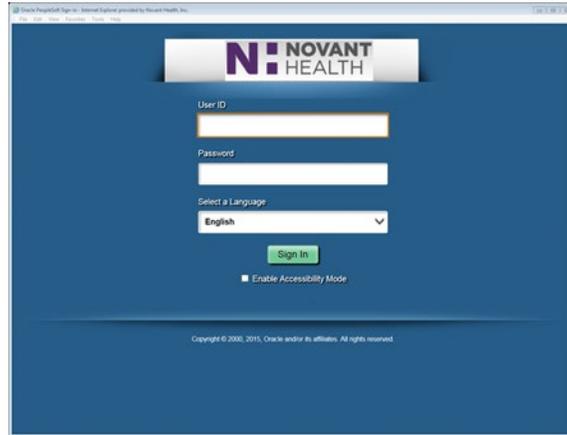
Access at home

<p>If at home:</p> <ol style="list-style-type: none"> From the internet, enter www.novanthealth.org in the address bar, then click Go/Enter. Click Employee Connections at the bottom of the page. 	
<ol style="list-style-type: none"> Under Remote access, click Self service. The Novant Health Secure Access Service screen appears. 	
<p>Note: From home, you will need to Sign In on 2 different login screens (always).</p> <p>Be sure your pop-up blockers are off!</p> <ol style="list-style-type: none"> At the 1st login (white Novant Health Secure Access Service) screen, enter: <ul style="list-style-type: none"> User ID - 6-digit Employee ID (i.e. 123456) Password – your password created in Password Management Server - select Employee Self Service from the down menu Click Sign In 	

Access at home (cont.)

5. At 2nd login, enter your:

- **User ID** - 6-digit Employee ID (i.e. 123456)
- **Password** – type in the password you created in Password Management
- Click **Sign In**



Self-service (PeopleSoft) topics include:

- **Personal Information** – Review and update address, phone numbers, emergency contacts, and personal e-mail address. (Name is view only)
- **Payroll and Compensation** – View paychecks, compensation history and change W-4 and state tax information.
- **Benefits** – Review health/dental insurance, update beneficiary information and enrollment
- **Learning and Development** – Update licenses and certifications; add personal professional training, education and memberships
- **Performance Management** – Access to performance evaluation documents to complete your evaluations or give feedback to coworkers
- **Employee Forms** – Forms to decline the flu vaccine, TB assessment and PTO sellback

Personal Information	Payroll and Compensation	Benefits	Learning and Development	Performance Management	Employee Forms
Review and update your personal information. Personal Information Summary Immunization Summary	Review your pay and compensation history. Update your direct deposit and other deduction or contribution information. View Paycheck Add/Change Direct Deposit Info My Total Rewards 6 More...	Review health, insurance, savings, pension or other benefits information. Review and update dependent and beneficiary personal information. Dependent Verification Benefits Summary Dependent/Beneficiary Info Benefits Enrollment	Add or review information about profiles of skills and competencies, interest lists, training and development. My Current Profile Training Summary Professional Training	Access your performance and development documents, and evaluations you have done for others. My Performance Documents Other's Performance Documents My Development Documents Performance Notes	Self Service forms to be filled out by employees. Influenza Confirmation Form TB Assessment Form PTO sell back request form

I-Learn

I-Learn is the learning management system (LMS) that houses training events for Novant Health. A variety of events are available, including: webinars, instructor-led and online courses. I-Learn tracks completions and provides a dynamic connection to education required for your continued employment.

How to Log In

When logged in to the network, click on the Chrome browser 

- Go to the I-Connect homepage. You may land on the Google search page and not I-Connect. If you do, click in the address bar at the top of the page and type <http://iconnect.novanthealth.org>

Follow this path:

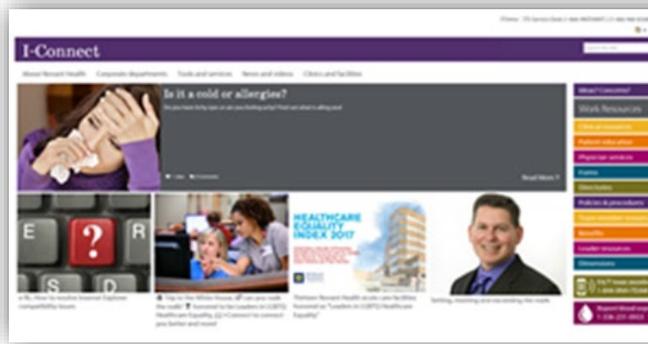
- Work Resources
- Team member resources
- I-Learn
- Select “Click Here to Launch I-Learn”. If prompted, log in with: novant\corporate ID (for example;
novant\abc123)
- Enter your MyPassword

When accessing from a generic workstation, you must use the Chrome browser 

- Go to the I-Connect homepage. You may land on the Google search page and not I-Connect. If you do, click in the address bar at the top of the page and type <http://iconnect.novanthealth.org>

Follow this path:

- Work Resources
- Team member resources
- I-Learn
- Select “Click Here to Launch I-Learn”
- Log in using: novant\Corporate ID
Example: novant\abc123
- Enter your MyPassword



When logging in from home:

- From **novanthealth.org**
- Navigate to **Employee Connections** at the bottom of the page
- Scroll down to **Online education classes**
- A login window will appear
- Log in using: novant\Corporate ID
Example: novant\abc123
- Enter your MyPassword

How Do I?	Quick Steps:
Course Enrollment	
To start a computer based learning (CBL) or enroll in an instructor-led training (ILT)	<ul style="list-style-type: none"> • From the I-Learn home screen, click in the Search box (top, right of page) and enter the course code or a keyword associated with the topic. • Click on the title. • Click Request to enroll (for ILT, click beside the preferred date/location). • For CBL, click Open Curriculum. • Beside the name, click Launch to begin (if multiple parts, start each one by clicking Launch beside the name).
Course Withdrawal	
Un-enroll from a CBL or Curriculum	<p><i>Note: I-Learn does not allow you to withdraw from a CBL, but the training can be archived. See steps below:</i></p> <ul style="list-style-type: none"> • Click View My Transcript. • Beside the course name, click the down arrow beside Launch/Open Curriculum and then click View Training Details. • Click Move to Archived Transcript (upper right side of screen).
Withdraw from an ILT	<ul style="list-style-type: none"> • Click View My Transcript. • Beside the name of the course, click the down arrow next to View Training Details and click Withdraw. • Select the reason for the withdrawal. • Click Submit.
CBL Completion	
Complete an online CBL course	<ul style="list-style-type: none"> • After launching the CBL, click forward/back to review all the pages of the CBL. <p><i>Note: If screen is stuck saying "loading title", disable or turn off pop-up blockers; if unsure of steps, google directions for your browser type (Internet Explorer, Google Chrome, or MAC)</i></p> <ul style="list-style-type: none"> • At end of course, locate and click in the blue box. A swirling starburst  will appear. • Click Submit. • Close the window (click "x" in upper right corner or red stop light on MAC computers). • Wait for screen to close (10 second delay).
Test Completion	
Complete the test for the course	<ul style="list-style-type: none"> • After closing the window (by clicking the "x" in upper right corner or red stop light on MAC computers), wait for screen to close (10 second delay) and the test will auto-launch with instructions showing first. <ul style="list-style-type: none"> ○ If test does not auto-launch, return to your transcript and click Launch test. • Click Continue. • Click in the circle to the left of the correct answer for each test question. • Click Summary to ensure all questions have been answered.

	<ul style="list-style-type: none"> Click Submit. <p>To see the questions missed:</p> <ul style="list-style-type: none"> Beside review test, click Review. Click the box beside Show Details to view all questions, the answers chosen and the other choices. <p><i>Note: If the test was failed, review questions missed and CBL content before retaking test. You may retake the test as many times as necessary to pass.</i></p> <ul style="list-style-type: none"> Click Close. Beside the name of the test, click Retake.
Completion Verification	
Verify completion	<ul style="list-style-type: none"> Click View My Transcript. Beside the word Active, click the down arrow and click Completed. Course will be in list and will remain there until archived (for future review if needed)
Course Evaluation	
Complete evaluation	<ul style="list-style-type: none"> Click View My Transcript. Beside the word Active, click the down arrow and click Completed. Locate course name, click Evaluate (or click the down arrow beside Course Details and click Evaluate). Type in feedback.
View/Print Transcript	
View my transcript	<ul style="list-style-type: none"> Click View My Transcript (Active transcript – lists current courses in progress or to be taken soon). Beside the word Active, click the down arrow and click Completed. <p><i>Note: The completed transcript lists courses completed since August 2016. To view all education completed prior to 1/1/19, go to the Self Service system and view your historic education.</i></p>
Print my transcript	<ul style="list-style-type: none"> Click View My Transcript. In the upper right hand corner of transcript, click Options (designated by 3 dots) Click Print Transcript.

Connect
All Communities
Knowledge Bank
Live Feed
All Teams

Additional Resources are available in the I-Learn Knowledge Bank including:

- Login and Navigate ILearn
- View transcripts in ILearn
- How to search and enroll/register in an instructor led training (ILT)
- Learner Home Page (LHP) guide - QRG
- I-Learn: Getting started as a new leader
- Leaders How to Assign Training Event vs Session Level
- Cornerstone Learn Mobile App frequently asked questions (FAQ)

I-Learn Mobile App (Cornerstone Learn)

Supported Devices

Apple devices: iPad, iPhone and iPod Touch running iOS 10+ or later

Android devices: Tablets and phones running Marshmallow (ver. 6+)

* Courses will resize based on the device. Tablets are recommended for the best viewing experience. Future courses will be optimized for smartphones.

Download Instructions

Screens may vary based on device and software version installed
Once installed, the app will be listed as Learn in your list of apps.

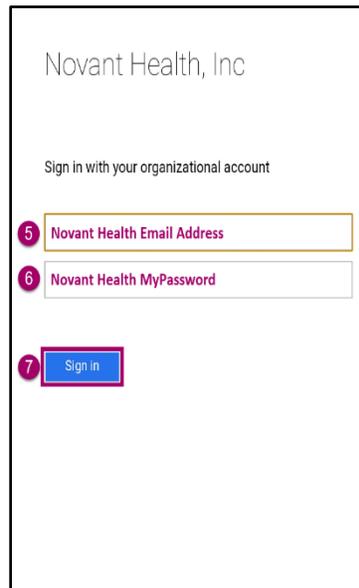
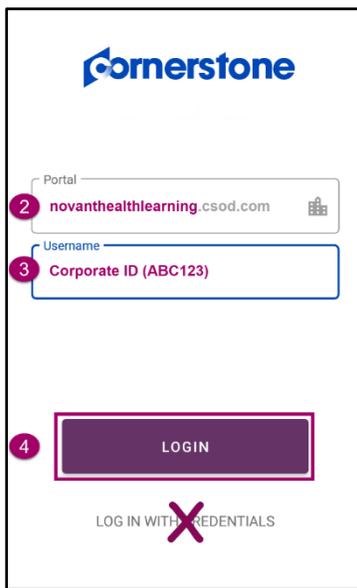
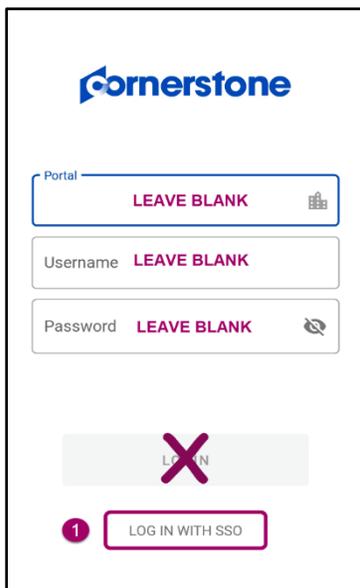


Cornerstone Learn
Cornerstone OnDemand, Inc.

Install the **Cornerstone Learn** app from the **Apple Store** or **Google Play**

Note: There are 2 apps for Cornerstone, make sure to select **Cornerstone Learn**, not Cornerstone Mobile.

1. On the Cornerstone Learn Log In screen, leave all fields blank and select **LOG IN WITH SSO** on the bottom of the screen.
2. On the 2nd screen, enter **novanthealthlearning** for the Portal name. (.csod.com will be added automatically).
3. Enter your **Corporate ID** for the User Name (ex. ABC123)
4. Tap **LOGIN** (Future login will open this screen)
5. On the **Sign in with your organizational account** screen, enter your **Novant Health email address**
6. Enter your **Novant Health Password**
7. Tap **Sign In**



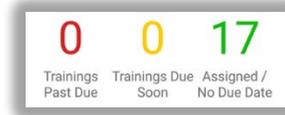
Note:

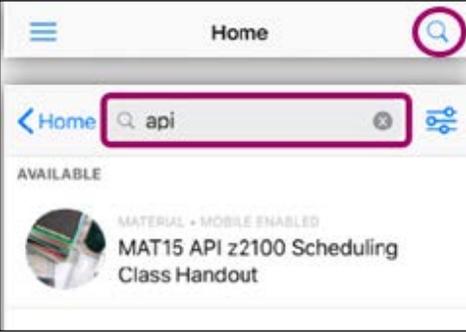
- Once installed, the app will be listed as **Learn** in your list of apps.
- Courses will resize based on the device. Tablets are recommended for best viewing experience. (Future classes will be optimized for smartphones.)

Learner Home Page / Search for and Launch Training

The Learner Home Page will display as the landing page for the app, allowing mobile learners to browse, search for and request training.

1. Training metrics detail mobile **Trainings Past Due, Due Soon** and training **Assigned / No Due Date**. Select one of the choices to see the items on your mobile transcript.
2. Below the training metrics, several carousels display mobile-enabled training. These sections populate and change based on use. Swipe left in each section to view more training.

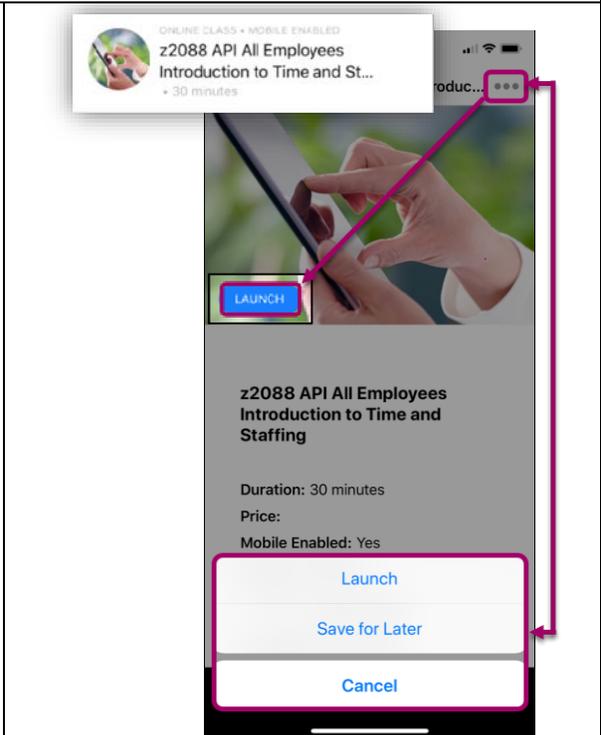
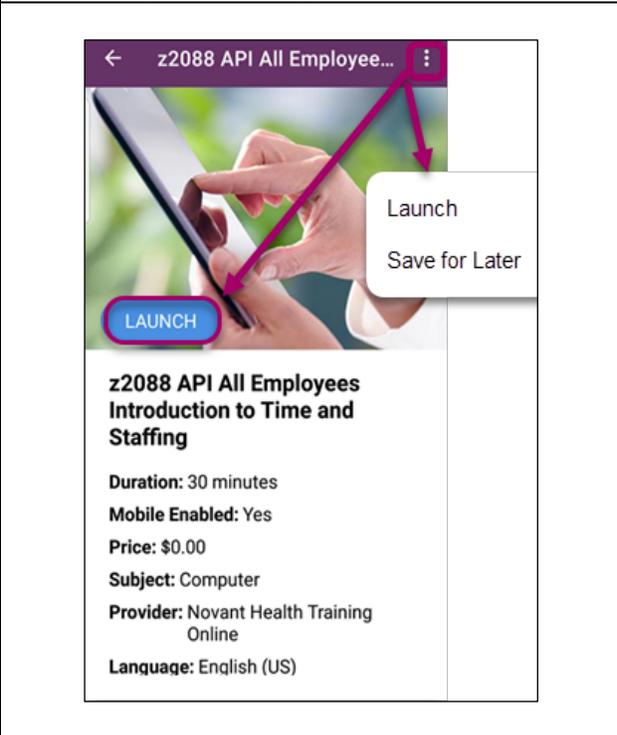


Android Devices	Apple iOS Devices
<i>Screens may vary based on software version and device.</i>	
View Transcript & Access Additional Options	
<p>Select the hamburger menu in the top left corner of the screen.</p> 	<p>Select one of the menu items at the bottom of the screen.</p> 
Search for Training	
	<ol style="list-style-type: none"> 1. Click the magnifying glass at the top of the app window to open the search field. 2. Search for mobile-enabled training by entering keywords, course code or title in the search field. 3. The search results will show a thumbnail image, the training type, title and duration (when applicable). 4. Tap an item in the search results to open the training details.

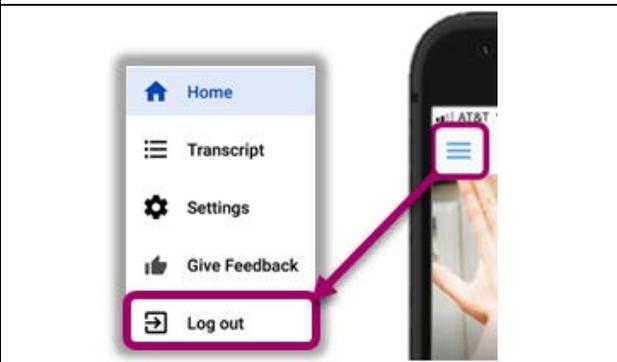
Android Devices	Apple iOS Devices
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Launch Training

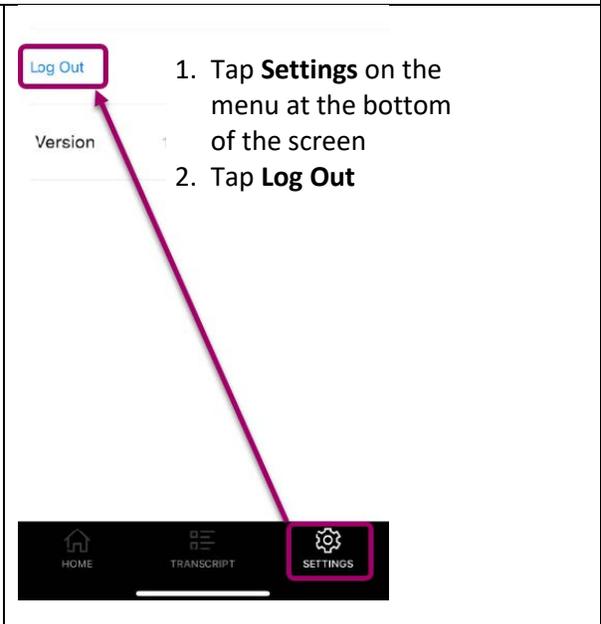
1. **Tap course** in the search results
2. **Tap Launch** on the image or click the ellipsis in the top right corner and choose **Launch**.
3. **To Save for Later**, click the ellipsis in the top right corner and select Save for Later from the menu options that appear.



Log Out



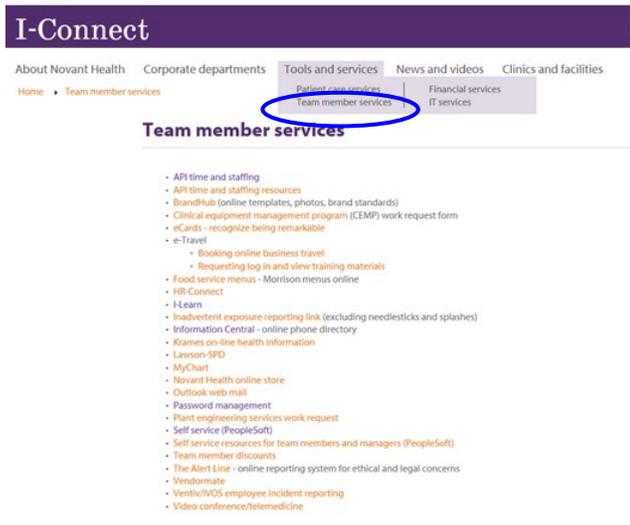
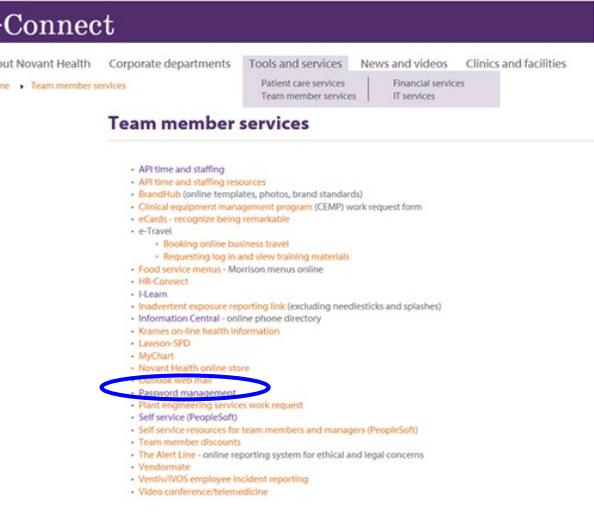
1. Tap the **hamburger menu** in the top left corner of the screen
2. Tap **Log out**



Outlook emails

Outlook Web Mail is the system that allows to you to send and receive emails from within the Novant Health system.

- If you are assigned a Novant Health computer at your work site that you alone use, you will have the system **Outlook** on your computer and will use that system to access your emails.
- If you are in a manager role or above, you can get access to the Novant Health systems from your **smart phone** or **home computer** by submitting a work request through the ITS4Me portal.

<p>If you do not have a computer that you use alone, follow these instructions to access your emails:</p> <ol style="list-style-type: none"> 1. On a Novant Health computer, go to I-Connect. 2. On the blue toolbar, hover over Tools and services 3. Click on Team member services. 	 <p>The screenshot shows the I-Connect website. At the top, there is a navigation bar with 'Tools and services' highlighted. Below it, a dropdown menu is visible with 'Team member services' selected and circled in blue. The main content area lists various services under the heading 'Team member services'.</p>
<ol style="list-style-type: none"> 4. Click Outlook web mail. 	 <p>This screenshot is similar to the previous one, but now 'Outlook web mail' is highlighted with a blue circle in the 'Team member services' list.</p>
<ol style="list-style-type: none"> 5. User Name - enter your Corporate ID (ex. abc123) 6. Password - The password that you created in Password Management. 7. Click Sign in. 	 <p>The screenshot shows the Microsoft Outlook Web App sign-in page. It includes a 'Security' section with radio buttons for 'This is a public or shared computer' (selected) and 'This is a private computer'. There are input fields for 'User name' and 'Password', and a 'Sign in' button. At the bottom, it says 'Connected to Microsoft Exchange' and '© 2010 Microsoft Corporation. All rights reserved.'</p>



2020



Benefits Enrollment Overview

Your Benefits Your Choice

We are glad to be able to provide this summary* of Novant Health's benefits program that, now or later, will be of real value to you and your family. For more detailed information, please visit the Benefit Resource Center at [NovantHealth.org/benefits](https://www.novanthealth.org/benefits).

With Flexible Benefits, you make selections for medical, dental and life insurance coverage for yourself and your family. Short-term and long-term disability benefits add an extra measure of protection. You have the opportunity to save taxes on certain health care and dependent care expenses through Flexible Spending Accounts. And to help provide an income in your retirement years, there is a 403(b) retirement plan - Retirement Plus.

2020 Benefits enrollment

When and how to enroll:

New hires and/or team members experiencing a change in their employment status that allows for enrollment in, or a change to their benefits, **have 31-days to enroll** and submit required documentation if enrolling dependents in medical coverage. **Failure to enroll in benefits within 31-days will result in the default benefits package being assigned, which is basic life insurance and long term disability insurance. In addition, all other benefit elections will default to "waive."** Therefore, if you intend to have medical coverage with Novant Health, you **MUST "take action"** and actively elect a medical plan. Failure to elect a medical plan will result in you not having medical coverage with Novant Health.

There are two ways team members enroll in Flexible Benefits. The way you enroll will depend on your employment status. If you are a **new hire** to Novant Health, you will **enroll online** using self-service (Peoplesoft); and if you are a team member **experiencing a change in your employment status**, you will be provided with an **individualized enrollment form** that you will complete and return.

- **New hires - if completing your enrollment at work**
 - From the I-Connect homepage, select **Tools and Services > team member services > Self service (Peoplesoft)**
 - Enter your **User ID** (6-digit employee ID number)
 - Enter **Password** (previously created in Password Management)
 - The **Employee Service** page opens. Under Main Menu, select **Self service > Benefits > Benefits Enrollment**.
- **New hires - if completing your enrollment from home**
 - From the internet, enter **novanthealth.org** in your browser's address bar. Scroll to the bottom of the web page and select team member connections.
 - Under **Remote access**, select **Self service**. The **Novant Health Secure Access Service** screen appears.
 - **Note: When accessing Self service from home, you will need to Sign In on 2 different login screens.**
 - At the **1st login** screen, enter:
 - **User ID** - 6 digit Employee ID (i.e. 123456)
 - **Password** - your password created in Password Management
 - **Server** - select **Employee Self service** from the drop down menu
 - Click **Sign in**
 - At the **2nd login**, enter:
 - **User ID** - 6-digit employee ID (i.e. 123456)
 - **Enter Password** previously created in Password Management
 - The **Employee Service** page opens. Under Main Menu, select **Self service > Benefits > Benefits Enrollment**.

If you have questions or require assistance, please contact the DPS service desk at 1-866-966-8268.

Preparing for your enrollment:

Please be prepared with information for yourself, your dependents and your life insurance beneficiaries, including full names, dates of birth and Social Security numbers. Note: If you will be enrolling dependents in the Novant Health medical plan, you must provide documentation as noted below:

- **Spouse:** Copy of marriage certificate AND proof of joint debt/ownership. The proof of joint debt/ownership must show both the team member and spouse's names and be dated within the past 90 days.
 - **Spouse mandate for medical** (see call out box below)
 - Copy of current proof of receipt of unemployment benefits, or;
 - A letter from your spouse's employer validating they are not eligible for medical coverage through their employer, or;
 - 2018 or 2019 Federal Income tax return that verifies spouse is self-employed, retired, disabled or unemployed.
- **Children** (up to age 26)
 - Copy of front page of current federal tax return that includes the child(ren) being enrolled (you may black out/remove all financial information and all but the last 4 of the Social Security Number)
 - If child(ren) are not listed on your tax return, you must provide a copy of the birth certificate showing the team member's name.

Questions? You can submit a request via HR Connect, or call the HR Service Center at 1-800-890-5420.

When coverage begins

If a new hire: Flexible benefits begin on the first day of the month following one full month of employment.

If a team member with an employment status change or a new hire via a physician practice affiliation: Flexible benefits take effect on the date of the employment status change and/or practice affiliation.

Spouse mandate for medical coverage

If your spouse is employed, and where they work they **are eligible** for employer sponsored group medical coverage, they cannot be enrolled in the Novant Health medical plan. However, if your spouse is self-employed, unemployed/retired/disabled, or their employer does not offer group medical coverage to its employees, your spouse may be eligible for medical coverage with Novant Health. Satisfactory documentation that verifies a spouse is not eligible for group medical coverage somewhere else is required before a spouse is enrolled in Novant Health medical coverage. **The spouse mandate requirement only applies to medical.** A spouse can be enrolled in dental, vision and life insurance regardless of eligibility for these plans somewhere else.

Medical benefits

You can choose from three medical plan options – the Cigna premium and standard plans or the Bind medical plan. All three plans include prescription drug coverage through WellDyneRx and have out-of-pocket maximums that place a cap on what you pay for covered services in a plan year.

Cigna

The **Cigna premium and standard plans** require higher team member contributions per paycheck and have deductibles, copays, and coinsurance.

Premium plan participants in certain coverage tiers receive an initial employer-funded health reimbursement arrangement (HRA)* deposit; however, both plans include the opportunity to earn money in an HRA through the wellness incentive.

If you choose the Premium Plan, an amount of money is allocated to your HRA. The amount depends on the effective date of your coverage as well as the coverage tier.

Your Coverage Effective Date Falls Between	Employee Only	Employee / Child(ren)	Employee / Spouse	Family
Jan. 1 through Mar. 31	\$0.00	\$375.00	\$450.00	\$750.00
Apr. 1 through Jun. 30	\$0.00	\$281.25	\$337.50	\$562.50
Jul. 1 through Sept. 30	\$0.00	\$187.50	\$225.00	\$375.00
Oct. 1 through Dec. 31	\$0.00	\$93.75	\$112.50	\$187.50

Bind

Bind is a \$0 deductible health plan that is entirely copay based. The Bind plan keeps 31 plannable procedures out of its core coverage to keep paycheck contributions low, but you can add them at anytime during the year when and if you need them.

If you intend to have medical coverage, you MUST elect a medical plan. Failure to elect a plan will result in you NOT having medical coverage.

**Team members who select the Premium Plan and who have a base annual salary greater than \$150,000 do not receive a fixed contribution to the HRA.*

Accident insurance

Accident insurance pays a benefit directly to you if you or an eligible dependent suffer a covered injury. This benefit can help cover out-of-pocket expenses related to these injuries – such as hospitalization, physical therapy, transportation and more. There are no health questions or physical exams required.

Coverage is portable. You can take your policy with you if you change jobs or retire. You pay the full cost of coverage through payroll deductions.

For questions and to learn more, please call a You Decide Consumer Advisor at 1-800-923-4609.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Critical illness insurance

Critical illness insurance reduces the financial impact of a major illness, such as a heart attack, stroke or cancer. The policy pays a lump sum benefit directly to you once you or a covered family member is diagnosed with a covered condition. You choose the benefit amount when you enroll. Coverage is portable. You can take your policy with you if you change jobs or retire. You pay the full cost of coverage through payroll deductions. For questions and to learn more, please call a You Decide Consumer Advisor at 1-800-923-4609.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Dental benefits

The dental plan is administered by MetLife and offers in network and out-of-network coverage. Preventive care is covered at 100%, basic care at 80% and major restorative services at 50%. Orthodontia is covered at 50% for **children and adults** and provides a **lifetime orthodontia maximum of \$1,500** per covered patient.

Vision benefits

The vision plan is administered by MetLife and covers annual eye exams, lenses and frames, or contact lenses in lieu of eyeglasses. Many in-network services are covered in full or require a copay, and a plan allowance is associated with many out-of-network services. Discounts are available on laser vision correction, additional glasses and sunglasses and on lens enhancements.

Flexible spending accounts

Flexible spending accounts (FSAs) allow you to set aside pre-tax money to pay for eligible out-of-pocket health care or dependent care expenses. The health care FSA, administered by Discovery Benefits, allows you to set aside up to \$2,700 for eligible expenses, and the dependent care FSA allows you to set aside up to \$5,000 (\$2,500 if married and filing separately) for child care or adult dependent care expenses. Be sure to calculate your expenses conservatively. IRS regulations require that you forfeit any money left in the account after the claims submission deadline.

Basic life

Novant Health provides 1x your base pay in basic life insurance, at no cost to you, up to a maximum coverage amount of \$1,000,000. Enrollment is automatic. Please be sure to enter beneficiary information into self-service.

Supplemental life and AD&D insurance

You may choose to purchase supplemental life and AD&D insurance in addition to the company-paid life insurance benefit. Supplemental life insurance can be purchased in the following increments:

1x base pay, 2x base pay, 3x base pay, or 4x base pay. The maximum amount of supplemental life insurance is \$500,000.

Dependent life insurance coverage options for your spouse and children are also available.

Accidental death and dismemberment coverage is available as employee only or family coverage. Coverage options range from \$25,000 to \$500,000.

Whole life insurance

Whole life insurance is designed to provide a death benefit to your beneficiaries when you pass away, but it can also build cash value that you can use while you are still living. Whole life is permanent – it never expires as long as you make the payments, which means the premiums won't go up. You can take your policy with you if you change jobs or retire.

To learn more and to enroll, call the Enrollment Center at 1-855-874-0211 to speak with a Benefits Counselor who can answer your questions and/or take your enrollment elections.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Important benefit resources

For information about...	Call this number
Novant Health's benefits program	HR Service Center / 1-800-890-5420
Bind (medical)	1-833-997-1078
Cigna (medical)	1-800-244-6224
WellDyneRX (pharmacy)	1-855-288-5206
Novant Health Pharmacy (pharmacy)	1-888-718-9044
MetLife (dental and vision)	1-855-638-8370
Discovery Benefits (flexible spending accounts and COBRA coverage)	1-866-451-3399
Fidelity (Retirement Plus)	1-800-343-0860
Hartford (group life and disability)	1-860-843-8957
Voya (voluntary whole life insurance)	1-855-874-0211
You Decide (critical illness and accident insurance)	1-800-923-4609 Client ID: NOV668
UNUM (voluntary long-term care insurance)	1-800-227-4165

For plan details, plan rates, and all required compliance notices, visit NovantHealth.org/benefits.

NOTE: This statement is intended to summarize the benefits you receive from Novant Health. The actual determination of your benefits is based solely on the plan documents provided by the carrier of each plan. This summary is not legally binding, is not a contract, and does not alter any original plan documents. For additional information, please contact your Human Resources Department.

Disability

Novant Health offers short term disability*, which pays a benefit of 60% of your base pay, up to \$1,500 per week. You can select the 30-day waiting period or the 15-day waiting period.

Novant Health provides long term disability at no cost to you. The plan pays a benefit of 60% of your base pay, after a 90-day waiting period, with a maximum benefit of \$15,000 per month.

** Directors and above do not elect short term disability.*

You pay the cost of these benefits through payroll deductions. All supplemental life, AD&D, whole life and disability insurance benefits are guaranteed issue if elected within the first 31 days of eligibility. Electing outside of your initial eligibility window will require evidence of insurability.

Long-term care insurance

Whether it's due to an accident or serious illness, you or a dependent may need assistance in performing basic activities of daily living. Long term care insurance provides benefits to help pay for care provided in a long term care facility, assisted living facility or professional home care.

For questions and to learn more, contact UNUM customer service at 1-800-227-4165 or at <http://unuminfo.com/Novant/index.aspx>.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Cigna Medical plans

Medical	Premium plan 2020			Standard plan 2020		
	Novant Health Network	Cigna Network	Out-of-network	Novant Health Network	Cigna Network	Out-of-network
Deductible — Copays do not apply to the deductible. Deductibles cross-accumulate.						
Employee only	\$680	\$1,925	\$1,925	\$850	\$2,200	\$2,200
Employee/child(ren)	\$1,000	\$2,900	\$2,900	\$1,275	\$3,300	\$3,300
Employee/spouse	\$1,200	\$3,400	\$3,400	\$1,500	\$3,850	\$3,850
Employee/family	\$1,360	\$3,850	\$3,850	\$1,700	\$4,400	\$4,400
Annual maximum	None			None		
Lifetime maximum	Unlimited			Unlimited		
Out-of-pocket maximum — Includes deductible, coinsurance and copays. All out-of-pocket tiers cross-accumulate. Medical and pharmacy OOP are separate limits.						
Employee only	\$2,550	\$3,600	\$6,700	\$4,200	\$4,700	\$7,800
Employee/child(ren)	\$4,000	\$5,600	\$8,700	\$6,500	\$7,300	\$10,400
Employee/spouse	\$4,500	\$6,300	\$9,400	\$7,400	\$8,200	\$11,300
Employee/family	\$5,100	\$7,200	\$10,300	\$8,400	\$9,400	\$12,500
Medical OOP limit any one member	\$2,550	\$3,600	N/A	\$4,200	\$4,700	N/A
Medical and pharmacy limit any one member	\$4,150	\$5,200	N/A	\$5,800	\$6,300	N/A
Employer-funded HRA	Fixed with salary <\$150,000	Fixed with salary >\$150,000	Wellness incentive up to	Fixed with salary <\$150,000	Fixed with salary >\$150,000	Wellness incentive up to
Employee only	\$0	\$0	\$900	\$0	\$0	\$900
Employee/child(ren)	\$375	\$0	\$900	\$0	\$0	\$900
Employee/spouse	\$450	\$0	\$1,175	\$0	\$0	\$1,175
Employee/family	\$750	\$0	\$1,175	\$0	\$0	\$1,175
All coinsurance amounts in-network and out-of-network are after the calendar year deductible, except where noted.						
Services	Novant Health Network	Cigna Network	Out-of-network	Novant Health Network	Cigna Network	Out-of-network
Hospital inpatient services	5%	20%	40%	10%	25%	40%
Hospital outpatient services	5%	20%	40%	10%	25%	40%
Physician inpatient visits	5%	20%	40%	10%	25%	40%
Physician surgery, office	\$75	20%	40%	\$85	25%	40%
Physician surgery, IP and OP	\$100	20%	40%	\$200	25%	40%
Hospital emergency room	15%	15%	15%	20%	20%	20%
Urgent care facility	\$20	20%	20%	\$35	25%	25%
PCP office services, excluding surgery	\$10	20%	40%	\$25	25%	40%
Specialist office services, excluding surgery	\$50	20%	40%	\$65	25%	40%
X-rays and lab services, including interpretation at office or OP lab facility	5% no deductible*	20%	40%	10% no deductible*	25%	40%
Advanced radiology (MRI, PET, CT), office	\$125	20%	40%	\$200	25%	40%
Anesthesia (IP or OP)	5%*	20%	40%	10%*	25%	40%
Preventive care	\$0	\$0	40%	\$0	\$0	40%
Hospital IP MH and SA	5%	5%	40%	10%	10%	40%
Physician office MH and SA	\$10	\$10	40%	\$25	\$25	40%
PT, OT and ST, no visit limit	\$10	\$25	40%	\$25	\$40	40%
Maternity, hospital	5%	20%	40%	10%	25%	40%
Maternity, physician global	\$100	20%	40%	\$200	25%	40%

For full plan information visit the benefits home page on I-Connect > Cigna summary benefit coverage

*Not all hospital-based providers at Novant Health facilities are in the Novant Health Network, so you will receive the Cigna network benefit if the hospital-based provider is not in the Novant Health Network. Novant Health is seeking to expand the number of hospital-based providers in the Novant Health Network.

2020 MotivateMe quick reference guide—all Cigna plans

Goal type	Description	Subscriber	Spouse	Timing
Health assessment	Complete a personalized health assessment on mycigna.com	\$100	\$30	4 days
Achieve a healthy outcome	BMI < 30 or improve by 10% Fasting blood sugar < 100 mg/dl LDL cholesterol ≤ 129 mg/dl Blood pressure ≤ 139/89	\$75 \$75 \$75 \$75	\$25 \$25 \$25 \$25	60-90 days
Complete preventive care appointments	Annual physical with NH network PCP Annual physical Annual OB/GYN visit Cervical cancer screen Colonoscopy (preventive or diagnostic) Mammogram (preventive or diagnostic)	\$175 \$125 \$75 \$50 \$50 \$50	\$60 \$40 \$20 \$20 \$20 \$20	30 days 30 days 30 days 30 days 2 months 2 months
Complete a screening	Skin cancer screening Prostate cancer screening	\$50 \$50	\$20 \$20	30 days 30 days
Get a flu shot	Receive flu vaccine in 2020	n/a	\$20	30 days
Telephonic lifestyle coaching	Talk to a health coach to improve: Stress Eliminate tobacco Loose weight	\$50 \$50 \$50	\$25 \$25 \$25	Varies based on goals set with the coach
Lifestyle management courses online or by phone	Complete courses: Improve your nutrition Quit tobacco Manage your stress Work towards a healthier you Maintain a positive mood Exercise for better health	\$50 \$50 \$50 \$50 \$50 \$50	\$25 \$25 \$25 \$25 \$25 \$25	10-15 days
Novant Health living healthy programs	Living healthy events —ex. wellness challenges or community walks (limit 4) Living healthy wellness webinars (limit 4)	\$75 \$75	n/a n/a	Updated quarterly

Team members can earn up to \$900 in HRA incentive dollars and spouses can earn up to \$275. Incentive awards are HRA dollars placed in your Novant Health medical plan. **To access your MotivateMe information visit myCigna.com > wellness > incentive awards.**

Biometrics—LDL values can be dated from 1/1/18 to 12/31/20 and fasting blood sugar values can be dated from 1/1/19 to 12/31/20 to apply towards 2020 incentives. BMI and BP must be submitted with a 2020 date for 2020 incentives.

Biometrics will be processed in one of the following ways:

1. If a team member and/or covered spouse sees a Novant Health provider and their information is documented in Dimensions the data will be transferred via file transfers monthly for processing.
2. If a non-Novant Health provider is seen the team member and/or covered spouse will need to have his or her provider complete a wellness screening form and submit it following the instructions on the form. The form can be located at mycigna.com > wellness > incentive awards.
3. If you do not meet a biometric outcome goal a reasonable alternative is available through myCigna.com. You can submit biometric values at any time during the 2020 calendar year.

Preventive care—Annual physicals must be submitted by a primary care provider (PCP), ob-gyn visits must be submitted by an ob-gyn provider and cervical cancer screens can be submitted by either a PCP or OB/GYN provider.

Annual physical with a NH network PCP—this goal is awarded when you complete your annual physical with a Novant Health network PCP, general medicine or internal medicine provider.

Screening exams—these goals can be submitted from a preventive care appointment OR a specialist appointment. PCPs or a specialist can submit these claims for incentives.

Living healthy programs—these can be found in our well-being portal, livehealthynovanthealth.com, and are advertised on I-Connect and in newsletters.

Novant Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-890-5420

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-890-5420

Bind medical plan

Medical	Bind medical plan 2020		
	Novant Health Network	Bind Network	Out-of-network
Deductible — there are no deductibles with the Bind medical plan			
Out-of-pocket maximum (OOP) — includes all core and add-in copay costs. Add-in payroll deduction amounts do not accumulate towards OOP maximum amounts. OOP amounts accumulate between Novant Health and Bind networks. In-network accumulates to out-of-network, but out-of-network amounts do not cross accumulate with in-network. Medical and pharmacy OOP are separate limits.			
Individual	\$3,400	\$4,400	\$8,800
Family	\$6,800	\$8,800	\$17,600
Medical OOP limit any one member	\$3,400	\$4,400	\$8,800
Medical and pharmacy limit any one member	\$5,000	\$6,000	N/A
Core Services	Novant Health Network	Bind Network	Out-of-network
Video Visit	\$30	Not covered	Not covered
E-Visit Consultation	\$30	Not covered	Not covered
Hospital inpatient services	\$1,000	\$3,000	\$6,000
Hospital outpatient services	\$800	\$2,000	\$4,000
Transplant services, inpatient	\$1,000	\$3,000	Not covered
Transplant services, outpatient	\$800	\$2,000	Not covered
Physician inpatient visits (PCP / Specialist)	Included in Hospital inpatient services		
Physician surgery, office	Most surgical fees are covered in the copay for your place of service. There are some surgeries that need to be purchased as an add-in**		
Physician surgery, IP and OP	Most surgical fees are covered in the copay for your place of service. There are some surgeries that need to be purchased as an add-in**		
Hospital emergency room	\$400	\$400	\$400
Urgent care facility	\$75	\$200	\$400
Ambulance	\$500	\$500	\$500
PCP office services, excluding surgery	\$30	\$50-\$220	\$400
Specialist office services, excluding surgery	\$70	\$50-\$220	\$400
Complex office visit	\$175	\$500	\$1,000
Complex drug administration	\$1,000	\$2,400	\$4,800
X-rays and lab services, including interpretation at office or OP lab facility	\$0	\$0	\$0
Advanced radiology (MRI, PET, CT)	\$200	\$500-\$1,500	\$3,000
Anesthesia (IP or OP)	\$0	\$0	\$0
Preventive care	\$0	\$0	\$300
Non-screening colonoscopy	\$0	\$800-\$2,000	\$4,000
Hospital IP MH and SUD	\$1,000	\$3,000	\$6,000
Physician office MH and SUD	\$30	\$30	\$400
PT, OT and ST, 60 visit limit each	\$25	\$50-\$300	\$600
Maternity, care and delivery	\$1,000	\$1,500-\$3,000	\$6,000

For full plan information visit the benefits home page on I-Connect > Bind summary benefit coverage

** "Add-in" is short for "additional insurance", which can be purchased separately and paid for via a combination of copay and payroll deductions. Add-in copay and payroll deductions are outlined in a separate schedule

Bind add-ins

Category	Add-ins	Minimum member obligation			Maximum member obligation				
		*Total cost of add-in =	Copay +	Total payroll deduction	Payroll deduction amount and duration	*Total cost of add-in =	Copay +	Total payroll deduction	Payroll deduction amount and duration
Musculoskeletal	Ankle Arthroscopy and Ligament Reconstruction	\$ 850 =	\$0 +	\$850	\$50 for 17 pay periods	\$ 4,750 =	\$2,200 +	\$2,550	\$150 for 17 pay periods
	Back Surgery, Cervical Spine Disc Decompression	2,500 =	0 +	2,500	100 for 25 pay periods	7,400 =	2,400 +	5,000	200 for 25 pay periods
	Back Surgery, Cervical Spine Fusion	2,400 =	0 +	2,400	100 for 24 pay periods	7,100 =	2,300 +	4,800	200 for 24 pay periods
	Back Surgery, Lumbar Spine Disc Decompression	1,700 =	0 +	1,700	100 for 17 pay periods	5,800 =	2,400 +	3,400	200 for 17 pay periods
	Back Surgery, Lumbar Spine Fusion	3,750 =	0 +	3,750	150 for 25 pay periods	7,400 =	2,400 +	5,000	200 for 25 pay periods
	Bunionectomy and Hammer toe Surgery	850 =	0 +	850	50 for 17 pay periods	3,700 =	2,000 +	1,700	100 for 17 pay periods
	Carpal Tunnel Procedure	800 =	0 +	800	50 for 16 pay periods	3,800 =	2,200 +	1,600	100 for 16 pay periods
	Ankle and Foot Bone Fusion	900 =	0 +	900	50 for 18 pay periods	4,900 =	2,200 +	2,700	150 for 18 pay periods
	Ganglion Cyst Surgery	800 =	0 +	800	50 for 16 pay periods	3,700 =	2,100 +	1,600	100 for 16 pay periods
	Hip Arthroscopy and Repair	900 =	0 +	900	50 for 18 pay periods	4,900 =	2,200 +	2,700	150 for 18 pay periods
	Hip Replacement and Revision	2,400 =	0 +	2,400	100 for 24 pay periods	5,800 =	2,200 +	3,600	150 for 24 pay periods
	Knee Arthroscopy and Repair	800 =	0 +	800	50 for 16 pay periods	4,600 =	2,200 +	2,400	150 for 16 pay periods
	Knee Replacement and Revision	2,400 =	0 +	2,400	100 for 24 pay periods	5,800 =	2,200 +	3,600	150 for 24 pay periods
	Morton's Neuroma Surgery	700 =	0 +	700	50 for 14 pay periods	3,200 =	1,800 +	1,400	100 for 14 pay periods
	Plantar Fasciitis Surgery	800 =	0 +	800	50 for 16 pay periods	3,500 =	1,900 +	1,600	100 for 16 pay periods
	Shoulder Arthroscopy and Repair	1,900 =	0 +	1,900	100 for 19 pay periods	5,050 =	2,200 +	2,850	150 for 19 pay periods
	Shoulder Replacement and Revision	2,400 =	0 +	2,400	100 for 24 pay periods	5,800 =	2,200 +	3,600	150 for 24 pay periods
Cardio-vascular	Carotid Endarterectomy and Stents	\$ 4,800 =	\$0 +	\$4,800	\$200 for 24 pay periods	\$ 7,100 =	\$2,300 +	\$4,800	\$200 for 24 pay periods
	Coronary Artery Bypass Graft Surgery	5,200 =	0 +	5,200	200 for 26 pay periods	7,700 =	2,500 +	5,200	200 for 26 pay periods
	Coronary Catheterization and Percutaneous Coronary Interventions	800 =	0 +	800	50 for 16 pay periods	5,500 =	2,300 +	3,200	200 for 16 pay periods
	Ear Tubes	\$ 800 =	\$0 +	\$800	\$50 for 16 pay periods	\$ 4,600 =	\$2,200 +	\$2,400	\$150 for 16 pay periods
	Sinus and Nasal Septum Surgery	900 =	0 +	900	50 for 18 pay periods	5,900 =	2,300 +	3,600	200 for 18 pay periods
	Tonsillectomy and Adenoidectomy	800 =	0 +	800	50 for 16 pay periods	4,400 =	2,000 +	2,400	150 for 16 pay periods
	Bariatric Surgery	\$ 2,300 =	\$0 +	\$2,300	\$100 for 23 pay periods	\$ 5,650 =	\$2,200 +	\$3,450	\$150 for 23 pay periods
	Hernia Repair	750 =	0 +	750	50 for 15 pay periods	4,450 =	2,200 +	2,250	150 for 15 pay periods
	Reflux and Hiatal Hernia Surgery	1,700 =	0 +	1,700	100 for 17 pay periods	4,750 =	2,200 +	2,550	150 for 17 pay periods
	Upper GI Endoscopy	600 =	0 +	600	50 for 12 pay periods	4,000 =	2,200 +	1,800	150 for 12 pay periods
Women's Health	Sling Surgery for Female Urinary Incontinence	\$ 850 =	\$0 +	\$850	\$50 for 17 pay periods	\$ 4,650 =	\$2,100 +	\$2,550	\$150 for 17 pay periods
	Breast Reduction Surgery	850 =	0 +	850	50 for 17 pay periods	4,750 =	2,200 +	2,550	150 for 17 pay periods
	Hysterectomy	800 =	0 +	800	50 for 16 pay periods	4,500 =	2,100 +	2,400	150 for 16 pay periods
	Hysterectomy and Endometrial Ablation	850 =	0 +	850	50 for 17 pay periods	3,700 =	2,000 +	1,700	100 for 17 pay periods
Copay	Min \$0 - Max \$2,500								
Paycheck Deduction	Min \$0 - Max \$200 for 1 Add-in / Max \$300 for >1 Add-in								
Paycheck Duration	Min 12 pay periods - Max 26 pay periods								
<p>*The total cost of an add-in is comprised of the copay (if applicable) plus the cost of the add-in which is paid through payroll deduction. Only copays (core and copays when an add-in is purchased, if applicable) count towards the out-of-pocket maximum. The cost of an add-in does not count towards the out-of-pocket maximum.</p>									

Have questions? We have answers.

Who is Bind?

Bind is a company that helps your employer administer health benefits. Bind is also a health plan and experience created by a close-knit team of veteran health insurance innovators passionate about making health insurance work for the people to whom it belongs—you and us. We formed Bind by asking people—a lot of people—what they wanted, needed and were missing from health insurance. They told us—affordability, simplicity, flexibility and partnership. So, we took health insurance apart. And we built that.

What is on-demand health insurance?

Our lives are on-demand. And with the Bind plan, now your health insurance is, too. You have immediate coverage answers, clear costs and can flex elements of your coverage to your own health needs as they change.

The Bind plan also goes to work for you immediately. You don't have to chip away at a deductible (ours is \$0) before your coverage ramps up. With Bind on-demand health insurance, you get the power on your benefit every time you use it—from day one to day 365.

How does the Bind Plan work?

The Bind plan is simple. No deductible. No coinsurance. It's a copay plan, and you can find out your complete cost of care before you step foot in the doctor's office. No waiting weeks or months for the bill to arrive.

Not having a deductible means you don't have to chip away at a deductible before your plan kicks into action.

When you're dealing with chronic conditions or a life-changing health crisis, or if your family is welcoming a newborn, you tap the power of your benefit when you need it and use it. Every time.

With Bind, you're automatically covered for the care 95% of people need annually—from preventive to emergency, from colds to cancer. And you can add coverage for a small list of plannable treatments and tests fewer people need, if and when you do (as long as you purchase the Add-In coverage at least three business days before obtaining the service).

Does the Bind experience differ from other health plans?

Quite a bit—yes. We designed Bind to work like other useful services of our modern daily lives:

- Treatment costs are clear and simple
- You can compare your options easily
- We show you where and when you can save
- You pay less for cost-effective treatments
- The MyBind app or website give you clear answers in real-time

The Bind plan makes people the center of our design. Not doctors, clinics and drugs. With Bind, people shape their cost and coverage around their own health needs—and the health care marketplace becomes their marketplace.

Does Bind have an easy-to-use app?

Absolutely, we do! We designed the digital Bind

Have questions? We have answers.

experience to fit your life and your pocket. Download the MyBind app. Drive it around the block. And get used to having a health insurance partner on your side, and in your pocket.

Because we're all about on-demand, you get helpful information in real-time—immediate coverage answers, precise treatment costs, nearby doctors and clinics and important savings opportunities. When you can, we encourage you to check MyBind before you get care.

Is it really true I don't have a deductible with Bind? Or coinsurance? Ever?

Yes, it's true. Health insurance was meant to be a benefit—we redesigned it so it is. The Bind Plan has \$0 deductible and no coinsurance. We make it easy for you to know your full cost of care in advance. And for most treatments, your cost is a single copay—and some copays are \$0.

When you need clear and immediate cost and coverage answers, just tap the MyBind app, log on to MyBind.com or call Bind Help. Find out what things cost and explore your options before you step foot in the doctor's office.

Is the Bind Plan a “skinny” plan?

Quite the opposite. The Bind plan was designed to give you **more** coverage from day one for the things you may need, from routine visits to major emergencies, from common colds to cancer. We began by getting rid of the **deductible**, which under a traditional plan usually means you pay several thousand dollars out of your pocket before your plan helps offset your out-of-pocket costs. It also means your coverage might kick in the first few months of the year, or not until the final few weeks, depending on when you pay off your deductible. That's a skinny plan.

With Bind, you don't chip away at anything before your plan powers up. It's ready to go to work day one, dollar one, claim one—and all the way to day 365.

Does Bind cover the same things as my current plan does?

Yes, probably. We might not know all the things your current plan covers, but chances are the Bind plan covers those same things, and maybe more. With the Bind plan, you're automatically covered for the care 95% of people need annually—from preventive visits to emergency care, from colds to cancer. And you can add coverage for

plannable procedures fewer people need—at least three business days before the procedure—if and when you do.

With Bind, you can personalize your coverage so it fits your health needs.

Can I keep my same primary care doctor? Am I required to have a primary?

With the Bind plan, you choose your doctors. And you're not required to designate a primary doctor. The Bind plan has a broad national network. Use our Search tool to find the network doctors who meet your needs.

Do I need a referral to see a specialist?

No. You don't need a referral to see a specialist. You select the network doctors who best meet your needs. And the Bind network is broad, not narrow. Use our Search tool to find the network specialist doctors you need.

Can my dependents be covered if they live in different state than me?

Yes. Bind partners with national and regional provider networks to give you broad access to doctors, clinics, hospitals and pharmacies—including those in different states. Use our Search tool to find network providers in any state.

Does the Bind Plan have an out-of-pocket maximum? How do my costs apply to it?

Yes, the Bind plan has an out-of-pocket max that provides you with a safety net for your annual copay costs for care—should you or your family have an unusually high health cost year. All copays for in-network covered services, including routine care, inpatient, outpatient, Add-In treatments, etc., count toward your in-network out-of-pocket max. Similarly, copays for covered out-of-network services count toward your out-of-network, out-of-pocket max. Your premium payments and out-of-pocket costs for any non-covered services do not count toward your out-of-pocket maximums.

Have questions? We have answers.

I can't find my condition, treatment or provider using the Search tool. Does that mean it isn't covered?

Not necessarily! Contact the Bind Help Team for more support. We can help you confirm the options available to you. Or, help you find other options you may not know about.

What's an Add-In, or Add-In coverage?

Add-In coverage is optional coverage you can literally "add in" to your plan if you need it during the year for additional premium. Add-Ins cover a small set of plannable treatments and tests few people need annually, if at all—like knee replacements or upper GI endoscopies. It's simple—keep the coverage out of your plan, and your premium lower, without the Add-In coverage. Add it if and when you do. Please note: Add-In coverage must be purchased at least three business days prior to the covered procedure.

Can I purchase an Add-In after I've received the Add-In covered service?

No. You can't purchase Add-In coverage for a treatment or test you've already received, because insurance doesn't work in reverse. Add-In coverage must be purchased at least three business days in advance of the Add-In covered treatment or service. Call the Bind Help Team if you have questions about how Add-In coverage works.

What's a virtual visit?

Virtual visits are online or phone visits with treating providers. Virtual visits are performed as a standalone service, not to be confused with a follow-up or related service your treating provider may complete with you online or by phone in tandem with an office visit.

What's a retail clinic?

Retail clinics are clinics located within a retail setting or store such as a drug store or "big box" store. Retail clinics, also known as convenience care clinics, provide a select set of primary care services.

Does Bind cover pre-existing conditions?

Yes. Bind offers you coverage regardless of any pre-existing medical conditions you may have. Whatever your health care needs, use our Search tool and quickly see your cost and coverage options.

Can I submit my copay expenses to my HRA, FSA or HSA for reimbursement?

Yes. You can submit your copay expenses to your HRA, FSA or HSA for reimbursement. Because Bind is a copay plan without a deductible, neither you nor your employer can contribute to an HSA with the Bind plan.

The Bind Plan almost sounds too good to be true. Is there a catch?

We don't think so. Bind was developed out of our own health care experiences and the desire to make the system work better for the people it's meant to serve—all of us. That means giving everyone more opportunity to define their health and health care choices with clear costs in advance of care, easy ways to compare options and the ability to adjust coverage when needs change. You'll likely get more out of Bind by checking on things through the MyBind app before you get treatment for yourself or your family. If there absolutely has to be a catch, maybe it's that. But we think that's a good catch. Take us with you, and we'll be there for you. How's that for a positive "catch"?

Pharmacy benefits: Cigna

Prescription drug benefits are provided through WellDyne Rx. Call toll-free 1-855-288-5206.

Pharmacy	Tier 1 retail pharmacies up to 30-day supply	Tier 2 retail pharmacies up to 30-day supply	Home delivery up to 90 day supply
Deductible - Applies to RX OOP	None	\$150 applies to brand drugs	None
Tier 1 – generic	\$5 (minimum \$3)	\$10 (minimum \$3)	\$12 (minimum \$7)
Tier 2 – preferred brands	\$25	\$30 + 20%	\$65
Tier 3 – brands	\$45	\$55 + 40%	\$135
Tier 4 – value specialty	\$70	Not covered	\$70 (30-day limit)
Tier 5 – preferred specialty	\$100	Not covered	\$100 (30-day limit)
Tier 6 – non-preferred specialty	\$200	Not covered	\$200 (30-day limit)
OOP maximum per claim	N/A	\$145	N/A

Mandatory generics with a DAW waiver. Difference between cost of brand and generic is not covered under the copay limit or the out-of-pocket limit. Infertility drugs must be purchased from a tier 1 retail pharmacy or through home delivery and are limited to a 30-day supply. There is a \$10,000 lifetime maximum benefit for infertility drugs.

OOP maximum per calendar year – \$1,600 employee only; \$3,200 family (\$1,600 OOP limit for any one member).

Pharmacy benefits: Bind

Prescription drug benefits are provided through WellDyne Rx. Call toll-free 1-855-288-5206.

Pharmacy	Tier 1 retail pharmacies up to 30-day supply	Tier 2 retail pharmacies up to 30-day supply	Home delivery up to 90-day supply
Deductible — Applies to RX OOP	None	None	None
Tier 1 - generic	\$5	\$10	\$15
Tier 2 - preferred brands	\$25	\$30	\$65
Tier 3 - brands	\$100	\$160	\$250
Tier 4 - value specialty	\$200	Not covered	\$200 (30-day limit)
Tier 5 - preferred specialty	\$250	Not covered	\$250 (30-day limit)
Tier 6 - non-preferred specialty	\$300	Not covered	\$300 (30-day limit)

Mandatory generics with a DAW waiver. Difference between cost of brand and generic is not covered under the copay limit or the out-of-pocket limit. Infertility drugs must be purchased from a Tier 1 retail pharmacy or through Home delivery and are limited to a 30-day supply. There is a \$10,000 lifetime maximum benefit for infertility drugs.

OOP maximum per calendar year - \$1,600 employee only; \$3,200 family (\$1,600 OOP limit for any one member).

2020 Health plan bi-weekly premiums

Your premiums for medical, dental and vision care are made on a before-tax basis. This means your contributions are automatically deducted from your paycheck before taxes are withheld. As a result, you save money on taxes.

Full-time employees – classified as 30 hours or more per week

Cigna Premium plan	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
Cigna Premium plan	Total cost	\$349.25	\$782.28	\$729.90	\$1,103.58
	Minus NH dollars	-293.46	-596.28	-590.89	-859.81
	Your net cost	\$55.79	\$186.00	\$139.01	\$243.77
Cigna Standard plan	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
	Total cost	\$322.02	\$721.31	\$673.01	\$1,017.57
	Minus NH dollars	-292.07	-588.79	-583.59	-849.96
Your net cost	\$29.95	\$132.52	\$89.42	\$167.61	
Bind	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
	Total cost	\$317.70	\$711.62	\$663.96	\$1,003.89
	Minus NH dollars	-293.86	-606.19	-592.82	-870.54
Your net cost	\$23.84	\$105.43	\$71.14	\$133.35	

Part-time employees – classified as 24 to 29 hours or more per week

Cigna Premium plan	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
Cigna Premium plan	Total cost	\$349.25	\$782.28	\$729.90	\$1,103.58
	Minus NH dollars	-227.20	-465.38	-459.73	-671.26
	Your net cost	\$122.05	\$316.90	\$270.17	\$432.32
Cigna Standard plan	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
	Total cost	\$322.02	\$721.31	\$673.01	\$1,017.57
	Minus NH dollars	-233.11	-472.35	-466.89	-682.21
Your net cost	\$88.91	\$248.96	\$206.12	\$335.36	
Bind	Coverage level	Employee only	Employee/spouse	Employee/Child(ren)	Family
	Total cost	\$317.70	\$711.62	\$663.96	\$1,003.89
	Minus NH dollars	-246.96	-513.55	-499.97	-737.08
Your net cost	\$70.74	\$198.07	\$163.99	\$266.81	

Dental

Coverage level	Employee only	Employee/spouse	Employee/child(ren)	Family
Total cost	\$17.90	\$37.19	\$38.69	\$63.18
Minus NH dollars	-10.12	-12.17	-13.12	-29.30
Your net cost	\$7.78	\$25.02	\$25.57	\$33.88

Vision

Coverage level	Employee only	Employee/spouse	Employee/child(ren)	Family
Your cost	\$4.39	\$6.89	\$7.05	\$11.34

For 2020, your deductions will be taken over 26 pay periods.



Novant Health Retirement Plus Plan

Your benefits package at Novant Health includes the Novant Health Retirement Plus Plan. The Plan is recordkept by Fidelity Investments so you can contact them for assistance or with any questions. **You will be automatically enrolled in the Plan starting with your first full bi-weekly paycheck* at a pretax contribution rate of 4% of your gross pay.** Your contributions will be directed to a State Street Target Retirement Fund** based on your date of birth unless you direct otherwise. **You have 90 days in which to opt out of the Plan** by contacting Fidelity and changing your deferral rate to 0%. If you opt out within 90 days, any contributions, adjusted for market gains and losses while deferred to the Plan, can be requested to be returned to you.

You can access your account at Fidelity by logging on to Fidelity NetBenefits® at www.netbenefits.com/novanthealth. Click *Register* at the top of the screen to establish your Username and Password.

The screenshot shows a login interface with fields for 'Username' and 'Password', a 'Log in' button, a 'Remember Me' checkbox, a 'Register' button (circled in red), and a 'Need Help?' link.

Screen shots are for illustrative purposes.

If you already have other accounts with Fidelity, you can use your existing log in information to access your Novant Health account. After logging in, choose *Contribution Amount* from the Quick Links menu for your Plan and change your deferral rate to 0% if you do not wish to participant in the Plan.

The screenshot shows a 'Quick Links' dropdown menu with the following options: Summary, Transaction History, Statements, Contribution Amount (circled in red), and Investment Performance and Research.

Screen shots are for illustrative purposes.

You can also contact the Fidelity Retirement Service Center at 800-343-0860. Service Representatives are available from 8:30a.m. to midnight ET Monday through Friday except for New York Stock Exchange holidays excluding Good Friday.

While you are not required to participate in the Plan, we hope you will choose to remain enrolled and take an active role in your retirement planning.

Here are some features of the Plan:

Contributions: You can contribute 1-60% of your salary on a pretax basis to the Plan in 0.1% increments. Novant Health contributes to your retirement through a dollar for dollar match of the first 6% you contribute to the Plan. You are eligible for the matching contribution after completing one year of service from your date of hire. Match is contributed to the Novant Health Savings and Supplemental Retirement Plan. We encourage you to contact Fidelity and consider increasing your contribution rate to 6% to take full advantage of the matching contribution.

Vesting: When you are "vested" in your savings, it effectively means the money is yours to keep. You are always 100% vested in your contributions to the Plan. The matching contribution is vested after 3 years of service. You earn one year of vesting service for each calendar year in which you are paid for at least 1,000 hours.

Auto Increase Program: An optional program that automatically increases your contribution rate by 1 - 3% on an annual basis. You choose the amount and the date of the increase and can opt out at any time.

Investment options: The Plan offers a full range of investment options to help you reach your retirement savings goals.

Online planning tools: Fidelity offers a wide variety of investment analysis and retirement planning tools on NetBenefits. Click the *Planning* link at the top right of the NetBenefits homepage to access the Fidelity Planning and Guidance Center.

*To make a contribution election that is different than the automatic enrollment contribution rate of 4% of your gross pay, contribution rate changes must be entered into Fidelity NetBenefits. Contact the Fidelity Retirement Service Center at 800-343-0860 if you have questions, or if you require additional information.

**Target Date Funds are an asset mix of stocks, bonds and other investments that automatically becomes more conservative as the fund approaches its target retirement date and beyond. Principal invested is not guaranteed.



Other information about your Plan:

Fidelity Retirement Planners: Fidelity offers one-on-one consultations if you have any questions about retirement planning or would like help determining which investment options may be right for you. You can contact the Fidelity Retirement Planning Team at 800-642-7131 or schedule an appointment online at www.fidelity.com/reserve. Here are the Retirement Planners for Novant Health and their locations.



Lucas Bourne
Winston-Salem



John Halley
Winston-Salem
Manassas/Charlotte



Joshua Lopez
Charlotte/ Brunswick

For help on choosing your investments or distribution options that are right for you, call 800-642-7131 to speak with a Fidelity Representative.

Online Beneficiaries Service: It is important to designate your beneficiaries for the Plan. You can designate, review, or update your beneficiary elections using Fidelity's secure online election tool located under the *Profile* link after logging into NetBenefits at www.netbenefits.com/novanthealth. You can also contact the Fidelity Retirement Service Center for a beneficiary form at 800-343-0860.

Loans and withdrawals: Although the Plan is intended for the future, you may borrow from your account for any purpose. Generally, the Plan allows you to borrow up to 50% of your vested account balance. The minimum loan amount is \$1,000 and a loan must not exceed \$50,000. You then pay the money back into your account, plus interest, through deductions from your pay check. You may have a maximum of one loan at a time.

Withdrawals from the Plan are generally permitted when you terminate your employment, retire, reach age 59½, or become permanently disabled, as defined by your plan.

Rollovers: You are permitted to roll-over eligible pre-tax assets from another 401(k), 403(b) plan, 401(a) plan, or governmental 457(b) retirement plan. The Plan also accepts rollovers from a conduit IRA.

We hope you will take full advantage of the Retirement Plus Plan to help you reach your retirement saving goals. If you have any questions about the Plan or need assistance in performing a transaction, please call the Fidelity Retirement Service Center at 800-343-0860.

Sincerely

Fidelity Retirement Service Center

Before investing in any investment option, consider the investment objectives, risks, charges, and expenses. Contact Fidelity for a mutual fund prospectus or, if available, a summary prospectus containing this information. Read it carefully.

Investing involves risk, including risk of loss.

Be sure to consider all your available options and the applicable fees and features of each before moving your retirement assets.



The Team Member Advantages platform provides you with a single destination for enrolling in voluntary benefits and accessing hundreds of valuable corporate discounts on brands you know and love.

TEAM MEMBER ADVANTAGES

Powered by YouDecide

VOLUNTARY BENEFIT PROGRAMS

Programs available with the convenience of payroll deduction.



ACCIDENT INSURANCE pays cash directly to you to cover out-of-pocket expenses you may incur as a result of an accident, such as insurance deductibles, copays, transportation to/from medical centers, childcare and more.



CRITICAL ILLNESS INSURANCE designed to you pay you cash when you or a covered member of your family experiences or is diagnosed with a heart attack, stroke, cancer, kidney failure, or any other covered condition.



GROUP AUTO & HOME INSURANCE Get the best for less. Side-by-side comparison quoting allows you to compare estimates from top-rated providers and select the one that's best for you. With the convenience of payroll deduction, you never have to worry about missing a payment.



NATIONWIDE PET INSURANCE helps to offset the cost of illnesses, injuries and routine wellness care for your furry family members. Cover yourself from unexpected vet bills and routine care.

CONSUMER DISCOUNTS



Log in to: www.youdecide.com/novant

Register to create your unique YouDecide username and password.

Need Help?

Contact your Consumer Advisor for support.
(M-F, 8am - 7pm EST) or email advisor@youdecide.com

(800) 923-4609

Client ID: NOV668