

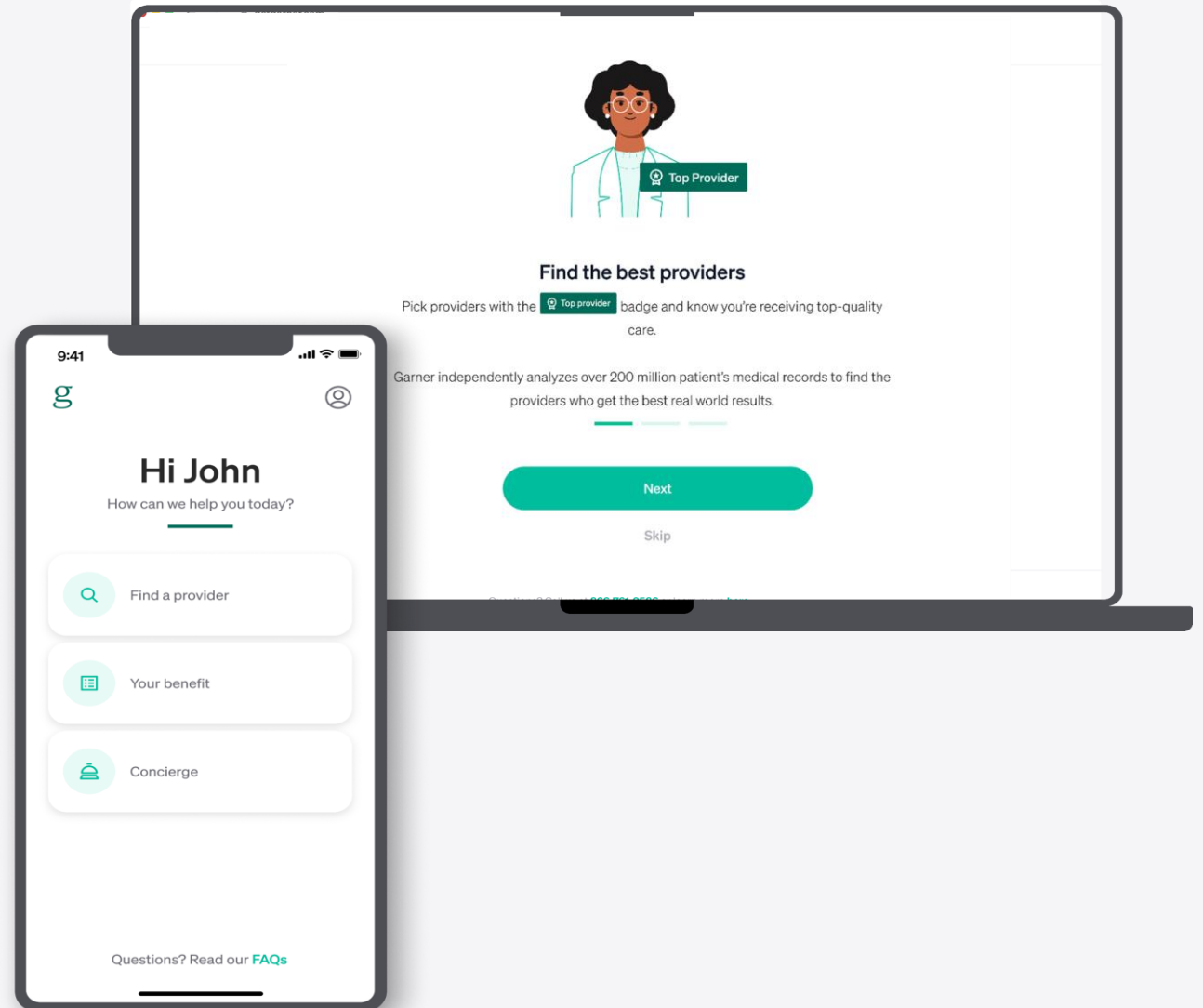


garner™

Benefit Start Date 1/1/2024

What is Garner?

Garner is a free healthcare benefit for employees and their dependents who are enrolled in one of the ASC medical plans. Garner helps you find the best medical providers, then reimburses you for qualifying out-of-pocket medical costs. Let's see how this benefit works!



Benefits of Garner



Have confidence you're getting the best care

Find the top 20% of doctors and get the best care available



Be healthier

By seeing better doctors who get better outcomes with fewer complications, Garner members are healthier overall



Save money

When you use Garner you'll get reimbursed for your out-of-pocket medical costs

About Top Providers

Garner identifies the top 20% of doctors so you can trust you're getting the best care available



These are **Top Providers** who:

- Practice based on the latest medical research
- Successfully diagnose problems
- Produce the best patient outcomes
- Get the highest patient satisfaction ratings
- Are in-network

80% of doctors are not Top Providers, so members may need to change providers to receive Garner's reimbursement

How Garner identifies Top Providers

Garner analyzes the largest medical claims dataset in the U.S. to objectively evaluate doctor performance

- 75% of claims data across the U.S.
- 60+ billion medical records
- 310+ million unique patients represented
- Over 1,000 terabytes of data across all major insurers

What can I do before 1/1/24:

- Sign up/register for the ASC Garner benefit
- This is your personal account. Always use your personal phone number when creating your account. Never use an ASC home office or facility main phone number
- Login and search for any providers you are currently seeing
- Search for any providers you may have upcoming 2024 appointments with
- After searching for a provider and confirming that they are a Top Provider, there is nothing further you need to do before your 2024 appointment

Create an account today and start using the benefit 1/1/24

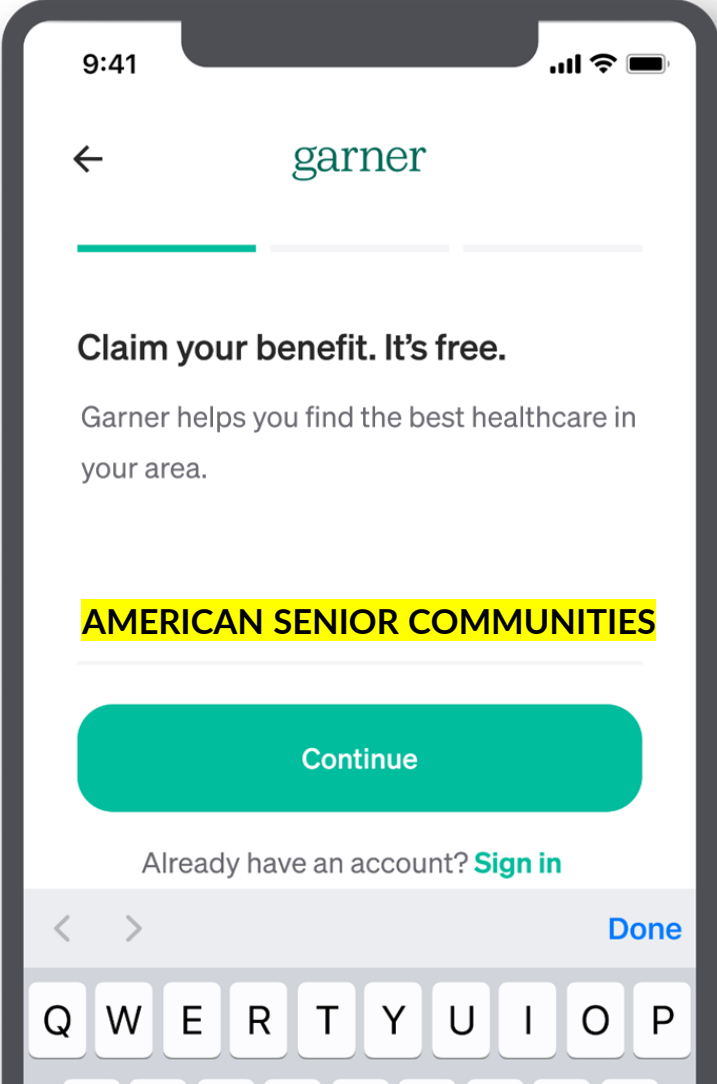
Download the Garner Health app
or go to: garner.guide/oe



1. Choose **AMERICAN SENIOR COMMUNITIES**

1. Enter your full legal name

1. Verify your identity: enter your personal information
Correctly



Garner can put money back in your pocket

If you create an account, and use a Top Provider for your appointment, starting **1/1/24**, Garner will reimburse your qualifying out-of-pocket medical costs including copays, coinsurance, and deductibles



Up to \$2,000 for individual coverage

\$4,000 for employee + dep coverage

Garner reimburses qualifying costs for:



Office visits



Physical therapy

The facility or therapist must be in-network



Imaging and lab work

Includes X-rays and MRIs



Urgent care

Find a facility on the Garner Health app or from your Concierge

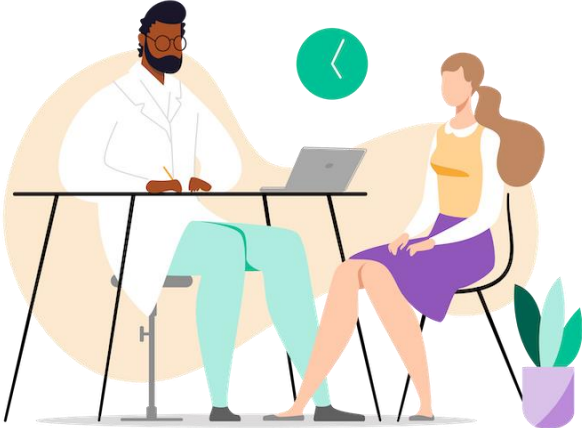
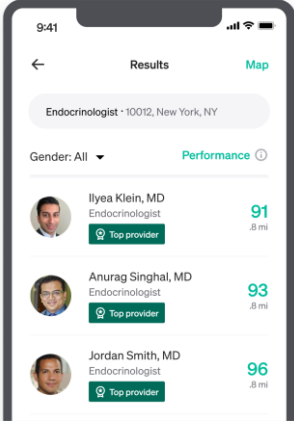


Hospital bills

Incurred during a surgery or other procedure with a Top Provider

It's Easy

Garner reimburses your out-of-pocket costs when you see Top Providers starting 1/1/24



1

Find a Top Provider

2

See the Top Provider

3

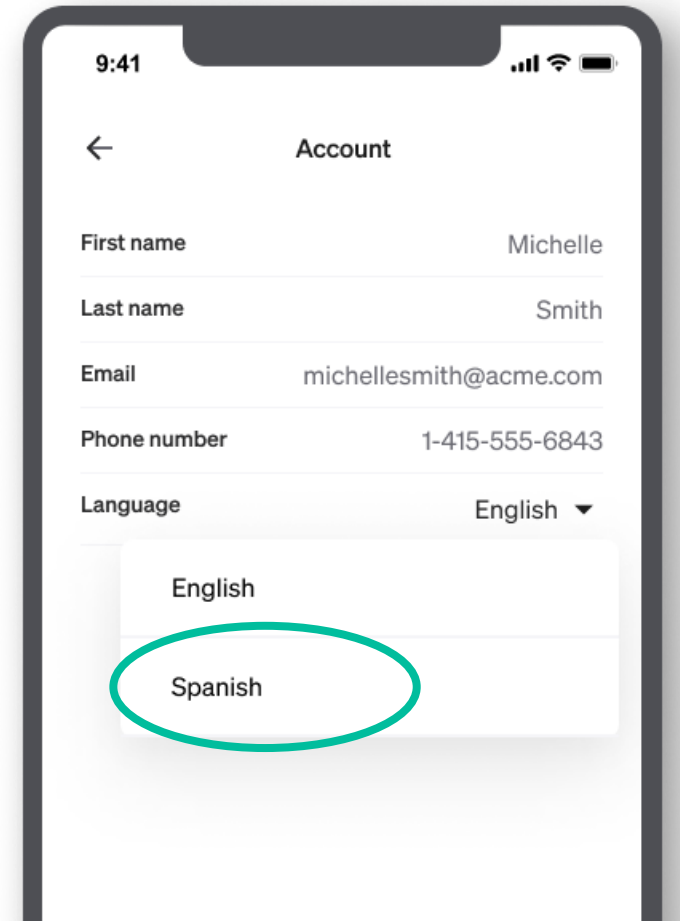
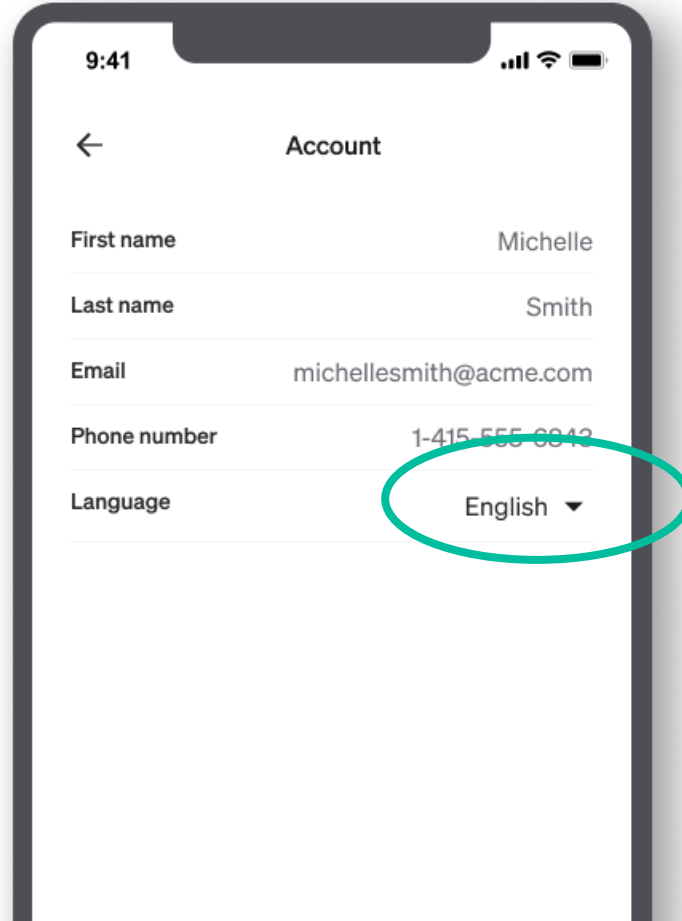
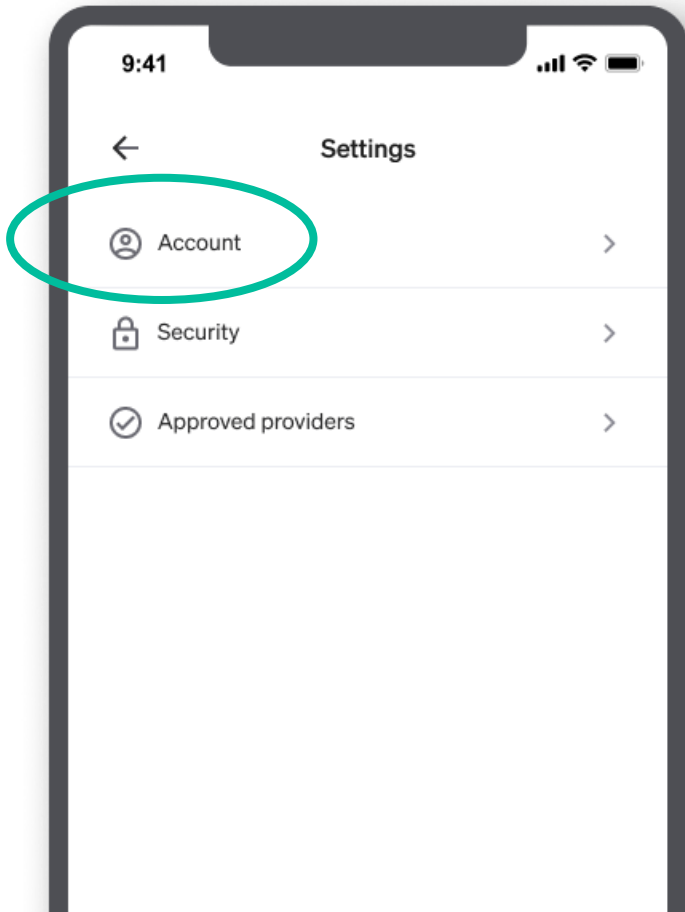
Get reimbursed

Due to IRS regulations, you can not use your Flexible Spending Account (FSA) dollars for services that will be reimbursed by Garner.

Get To Know The Garner Health App

How to change your language preference

Go to settings, click “Account,” then “Language”



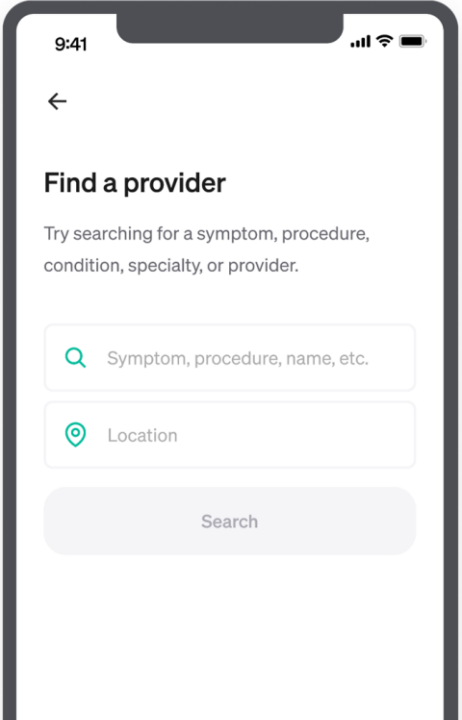
Three key steps to starting your Garner benefit

To receive Garner's reimbursement 1/1/24, you must create an account, then:

1

Find doctors

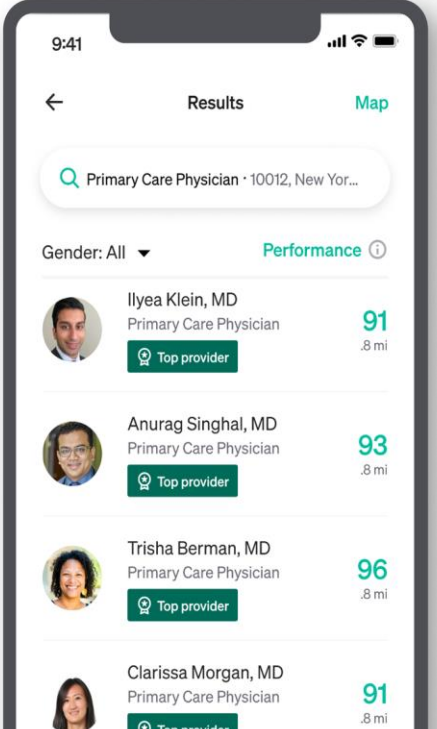
Search by name or symptom.
Costs from doctors with a **Top Provider green badge** qualify for reimbursement



2

Create your list

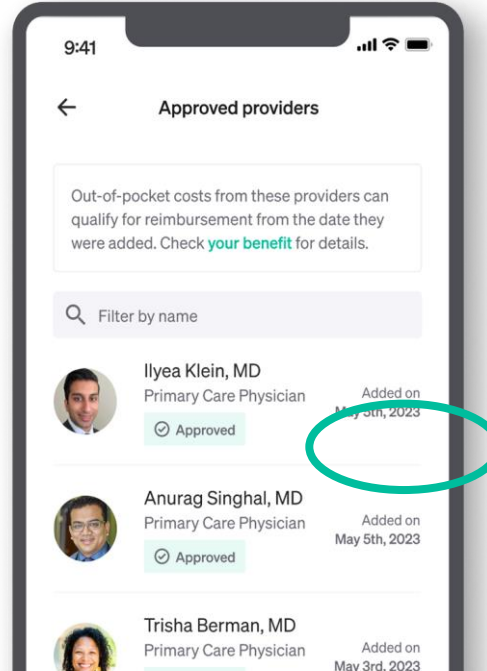
Top Providers are automatically added to your list as soon as they are visible on your screen



3

Check your list

Make sure your doctor is added **before** you see them. Costs from approved providers qualify for reimbursement **after** they are added to your list

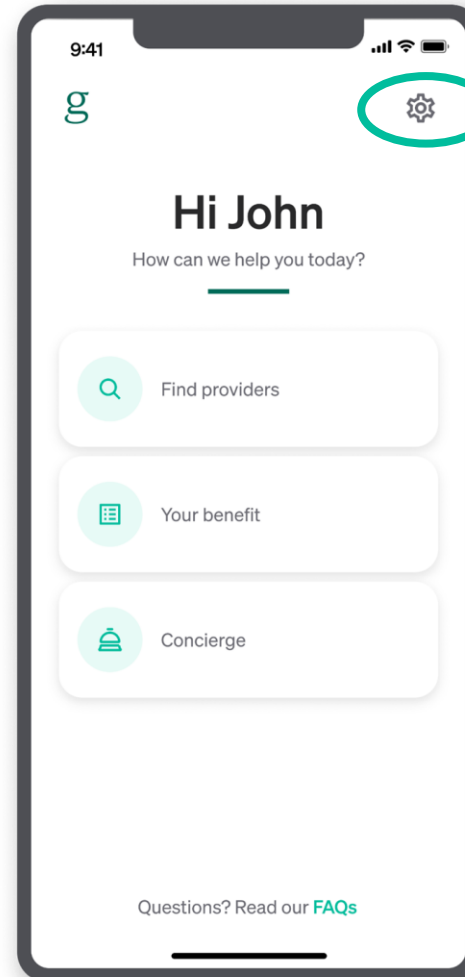


The “Approved providers” page shows your list of approved providers and the dates they were added

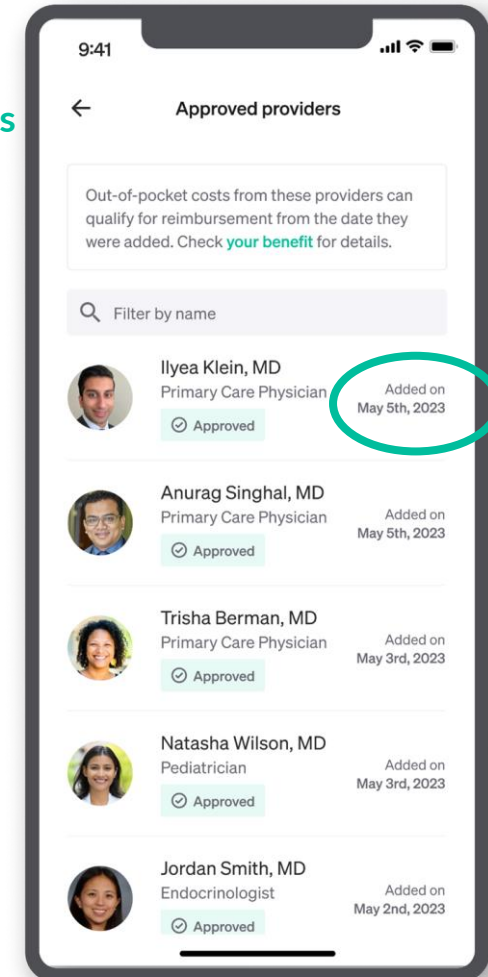
- Costs from approved providers qualify for reimbursement **after** they’re added to your list
- Providers must be added **before** you see them
 - Doctors with a Top Provider badge are **automatically** added to the list as soon as they are visible on your screen
- Providers added by the Concierge will also appear on this list

NOTE: All new providers, including specialists, MUST be Top Providers in order to qualify for the Garner benefit

To find the “Approved providers” list, go to the “Settings” page in the app by clicking the gear icon in the upper right corner of the home screen and select “Approved providers” in the menu.



Settings



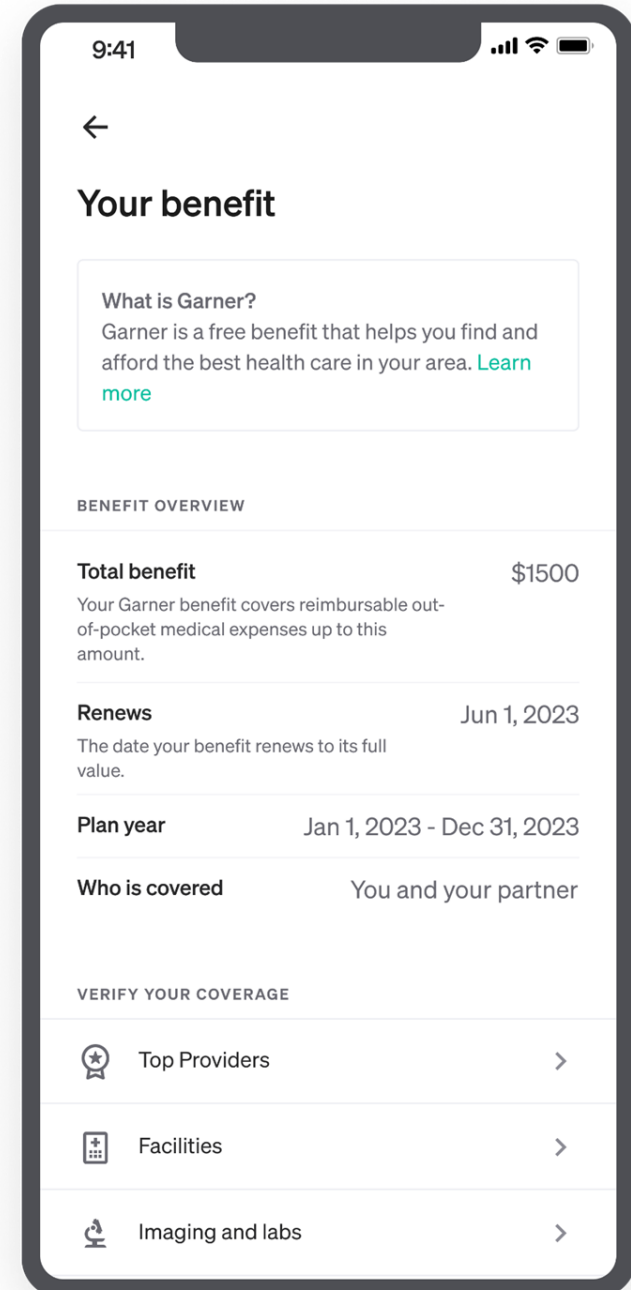
Check date here

After logging on, visit the “Your benefit” page for plan details after 1/1/24

Once you create an account, you can learn which out-of-pocket costs qualify for reimbursement.

After your benefit goes live, you can learn:

- Your benefit amount
- Your renewal dates and plan details
- Who is covered



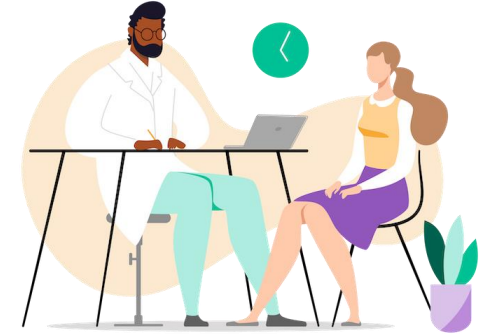
How Reimbursement Works

Garner in action: Sarah

1 Sarah created her Garner account during open enrollment.



2 She searched for her current PCP in the Garner Health app. Good news! Her doctor is a Top Provider. Out-of-pocket costs from this provider qualify for reimbursement starting 1/1/24.



3 Sarah visited her PCP (2024). Costs for her copay and lab work qualify for reimbursement.

Sarah will receive a reimbursement check for her out-of-pocket medical expenses in about 6-8 weeks*



Please make sure your address in UKG is correct

**Timing can vary*

6 She saw a Top Provider specializing in orthopedics. Her out-of-pocket costs qualify for reimbursement.



5 Sarah contacted the Concierge to ask for help finding a Top Provider who had availability to see her right away.



4 Sarah injured her ankle playing soccer.

Garner in action: Mark

1 Mark created his Garner account during open enrollment.



2 He searched for his current PCP in the Garner Health app. His doctor is not listed as a Top Provider. Out-of-pocket costs from this provider will not qualify for reimbursement.

Mark will receive a reimbursement check for his out-of-pocket medical expenses in about 6-8 weeks*



Please make sure your address in UKG is correct

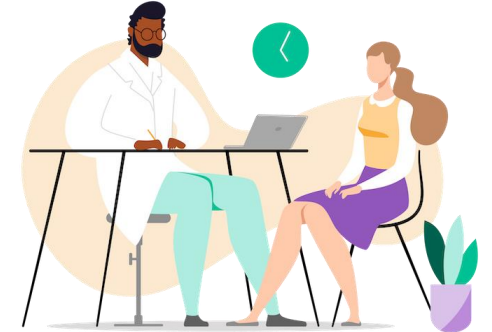
**Timing can vary*

6 He saw the PCP (2024) who is a Top Provider and out-of-pocket costs from the visit qualify for reimbursement.

5 Mark contacted the Concierge to ask for help finding a PCP Top Provider who had availability to see him.



3 Mark can still see this provider, and it will be covered under his medical plan but not eligible for Garner reimbursement.

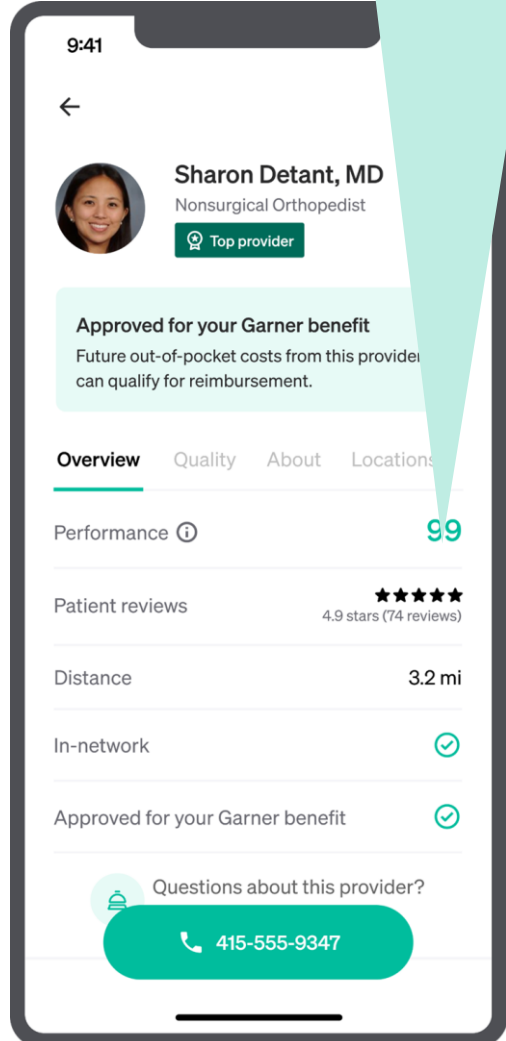
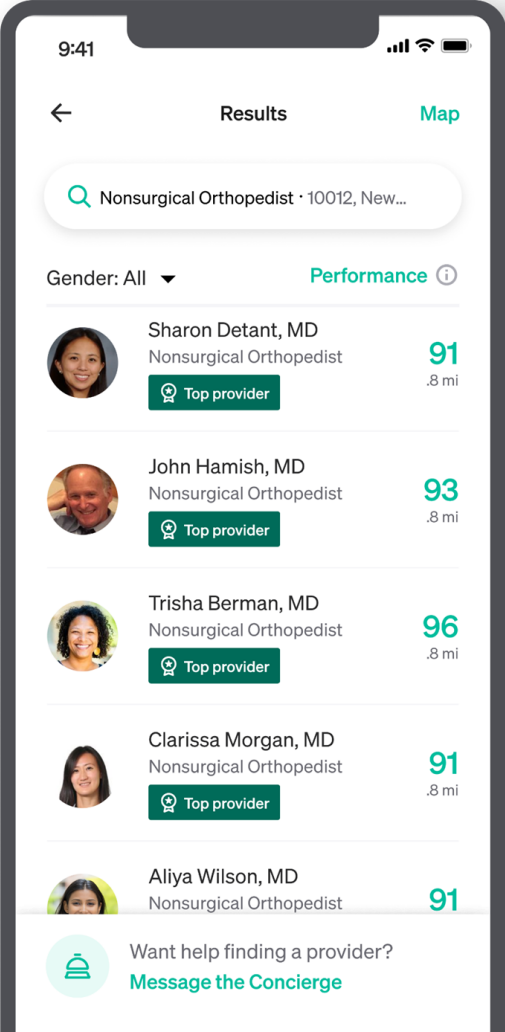


4 Or, Mark could choose to see a new PCP who is a Top Provider.

Meet Rob

Rob hurt his ankle while running.

He injured it 10 years ago and saw an orthopedic doctor. This time, the swelling won't go down and he's experiencing ongoing pain. He wants a better doctor than he used last time, but doesn't know how to go about finding someone good.

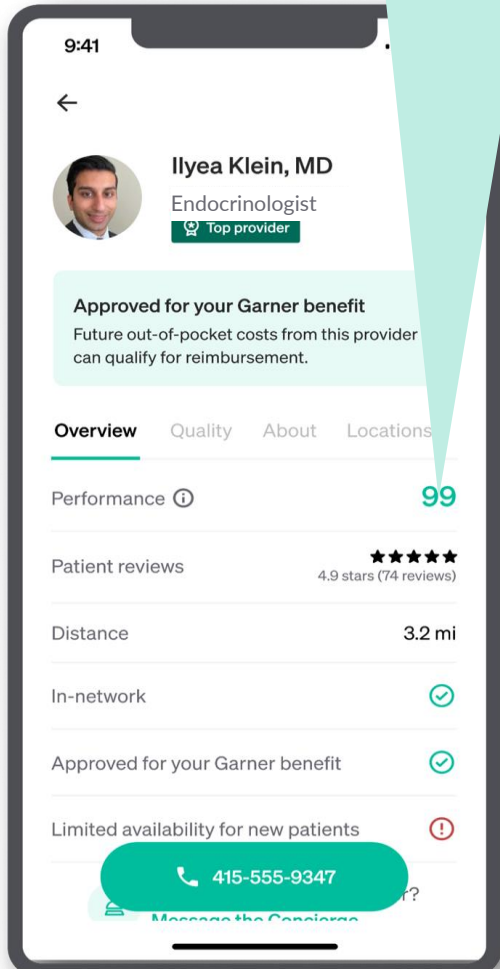
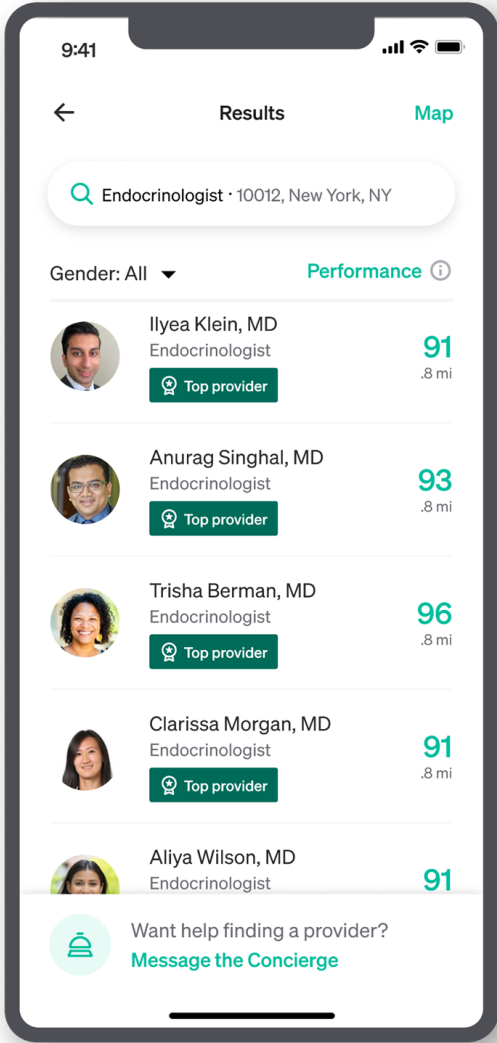


Rob went to Garner and found a top-rated orthopedist that is in his network, located nearby and has availability to see him soon.

Meet Anne

Anne just found out she has diabetes. She knows she should see an endocrinologist. But she's not sure how to find one that she has confidence in. She could ask people she knows, but that's not a good gauge of who the best doctor for her would be.

Anne went to Garner and found a top-rated endocrinologist that is in her network, located nearby and has availability to see her soon.



How to use Garner with your Flexible Spending Account (FSA)

Key points to remember:

1. Do not use your FSA and Garner benefit for the same expenses
Due to IRS regulations, you may not use FSA dollars to pay for services that will be reimbursed by Garner. Since they are both tax advantaged benefits, the IRS considers this “double dipping”
2. Use your Garner benefit for medical expenses
3. Use your FSA for prescription drugs, over-the-counter medications and items such as, sunscreen, diaper cream, cold meds, etc.

Your out-of-pocket medical costs qualify for reimbursement if:

- ✓ You have created a **Garner account**, searched for your provider, and confirmed they are a Top Provider, prior to the date of service
- ✓ Your provider is in-network and the cost was covered by your health insurance plan
- ✓ The type of cost qualifies for reimbursement under your Garner plan.
 - ✓ Prescription drugs and emergency services are not covered under the Garner plan.

Garner's Concierge team is here to help

The Garner Concierge is a member service team dedicated to answering your questions and helping you find the best care for you and your family.

Call 866-761-9586

Message the Concierge through
the Garner Health app
Mon. – Fri. from 8 am to 8 pm ET
or visit www.getgarner.com

Create your account today!



For more information visit the ASC Employee Benefits Portal and click on the Garner 2024 Tile

- Garner FAQs
- How to create your Garner account
- How to Use Garner
- Spanish versions
- Garner contact information

Thank You!