



Your Guide to 2021 DaVita Rewards

Letter from CPO



As a Village, we are committed to providing you and your families benefits that help you connect to what matters most. This could be maintaining your health, starting a family or getting ready for retirement.

You may wonder how we decide what benefits to offer. We consider a few different factors, including:

- a. How many people are using our programs;
- b. The needs of you and your families; and
- c. How to be the best stewards of Village resources.

Our Village is big and you all have different needs. And, we're proud of the way we can support you through our DaVita Rewards portfolio. I ask that you keep this holistic approach in mind as you use this guide to learn about our portfolio and connect to what matters most.

I hope this guide helps you learn about and use the programs available to you and your family.

One for All!

A stylized, handwritten signature in black ink, appearing to read 'KG' followed by a long horizontal flourish.

Kenny Gardner
Chief People Officer

How to use this guide

This guide provides a detailed overview of DaVita's benefits.

We suggest that you refer back to this frequently throughout the year – any time you have a benefits question, start here! We have structured this so you see what you're eligible for, and when, then information on our programs and enrollment information.

This is meant to be a starting point. We recommend that you do some research, and use the tools we have available, to learn what's right for you and your family.

We have some resources available to help you – check out [page 44](#) for details on how to access these.

Healthfully yours,
The Benefits Team

The information included in this document is to be used as a quick reference tool. For specific information about these plans/benefits refer to [DaVitaRewards.com](https://www.davita.com/rewards).

For specific policies, refer to the DaVita Teammate Policies, found on the People Services page of VillageWeb, for the most updated policy revisions.



Table of Contents



My Health

Benefit Eligibility	8
Medical Coverage.....	10
Regional Medical Plans	12
Pharmacy.....	14
Accident Insurance.....	16
Hospital Care Insurance.....	16
Critical Illness Insurance	16
Vision	17
Lab	18
Dental.....	18
Vitality Points.....	22
Cigna Wellness Team.....	22
Omada	23
We Are Well Award	24
Life Insurance	24
Disability Coverage.....	25



My Future

401(k).....	27
Employee Stock Purchase Plan.....	28



My Career

Tuition Reimbursement.....	29
Bridge to Your Dreams.....	29
THRIVE	29
Foresters	30
Gateway.....	30



My Pay

Paid Time Off	31
PTO cash out	31
Holidays	32
Caregiver Leave	32
Paid Parental Leave	32
Village Market Place.....	33
Protecting your Future.....	33
• PrivacyArmor	33
• Home & Auto Insurance.....	34
• Legal Services.....	34
• Pet Insurance	34
Commuter Benefits	35
DaVita Village Network	35
Political/Charitable Causes.....	35



Table of Contents



My Vitality

Family Resources	37
• Little Star	37
• Adoption Assistance	37
• Milk Stork	37
• Healthy Pregnancies Healthy Babies	37
Bright Horizons	38
• College Coach	38
• Special Needs	38
• Backup Child and Elder Care	38
• Additional Family Support	38
Teammate Assistance Program	39
Headspace	40

Eligibility, Plan Details and How to Enroll

Eligibility	41
Benefits Start Date	41
Employment Status Change	41
Qualified Life Event	41
Dependent Eligibility	42
How to Enroll and Support	44
• Benefits Support Team	44
• Health Pro Advocates	44
Acquired Teammate's Benefits	45
• Enrolling in your Benefits	45
Medical Plan Options	46
• How does a PPO work	46
• How does a HMO work	46
• How does a HDHP work	46
Health Savings Account	47
Flexible Spending Account	48
Health Care Dictionary	51
Contact Info	52



Becoming the healthiest version of myself





Benefit Eligibility

The following chart explains the benefits eligibility requirements for 2021.

Benefit	Initial Eligibility Requirement	Full-time (30 hours or more per week)	Part-time (24-29 hours per week)	Per diem or part-time (<24 hours per week)
Available benefits; enrollment necessary:				
<ul style="list-style-type: none"> • Dental Plans • Vision Plans • Supplemental Life and AD&D Insurance • Health Care and Dependent Day Care Flexible Spending Accounts (FSAs) • Critical Illness Insurance • Legal Services • Hospital Care Plan • Accident Insurance • Identity Theft 	On benefits start date**	Yes	Yes	No
• Medical Plans and Vitality Points	On benefits start date**	Yes	No	No
<ul style="list-style-type: none"> • Supplemental Short-Term Disability • Supplemental Long-Term Disability 	On benefits start date**	Yes	No	No
DaVita provided; no enrollment necessary:				
<ul style="list-style-type: none"> • Basic Short-Term Disability • Basic Long-Term Disability; DaVita Pays 75% 	On benefits start date**	Yes	No	No
• Basic Life and AD&D	On benefits start date**	Yes	Yes	No
• Paid Time Off (PTO)	Immediately	Yes	Yes	No
• Travel Accident Insurance	Immediately	Yes	Yes	No
• Teammate Assistance Program (TAP)	Immediately	Yes	Yes	Yes
• Headspace	Immediately	Yes	Yes	Yes
Family resources:				
• Parental Leave	On benefits start date**	Yes	Yes	No
• Caregiver Leave	On benefits start date**	Yes	Yes	No
• MilkStork (breast milk storage and shipping program)	Immediately	Yes	Yes	No
• College Coaching	Immediately	Yes	Yes	No
• Back-up Child Care and Elder Care	Immediately	Yes	Yes	Yes
• Sittercity®	Immediately	Yes	Yes	Yes
• Village Market Place (discount program)	Immediately	Yes	Yes	Yes



Benefit Eligibility Continued

Benefit	Initial Eligibility Requirement	Full-time (30 hours or more per week)	Part-time (24-29 hours per week)	Per diem or part-time (<24 hours per week)
Eligibility for additional benefits:				
• 401(k) Retirement Plan	Auto-enrolled at 6% contribution after 45 days of service	Yes	Yes	Yes
• 401(k) Company Match	After 1 year of service*** or immediately for teammates hired before 1/1/18	Yes	Yes	Yes
• Adoption Assistance	On benefits start date**	Yes	No	No
• Auto, Home and Pet Insurance	Immediately	Yes	Yes	No
• Purchasing Power	After 9 months of service*** and \$16,000 annual salary	Yes	Yes	No
Education Benefits:				
• Tuition Reimbursement/Assistance	After 90 days of service***	Yes	Yes	No
• Bridge to Your Dreams Nursing Program	After 6 months of service*** (selection criteria apply)	Yes	Yes	No

**See [page 41](#) to determine your benefits start date.

***Based on acquisition date.





My Health



MEDICAL COVERAGE

DaVita offers multiple medical insurance options. Cigna is our national provider and since no one plan can cover all teammates, we also offer regional plans and in some areas a smaller, high-quality network of providers called Local Plus. When you enroll online, you will see which plans are available to you based on your home zip code. Our Cigna plans offer the same coverage, what makes them different is what you pay from your check vs. what you pay at the time of service.

High-Deductible Health Plan (HDHP) with Health Savings Account (HSA)

This plan offers the lowest bi-weekly premiums by using a higher deductible. Like other Cigna plans, it uses coinsurance and there is an out of pocket maximum. DaVita helps offset the deductible by contributing money to an HSA on your behalf. Contributions by DaVita to your HSA are only available to eligible teammates enrolling in the HDHP. For more information, go to DaVitaRewards.com > [Health & Insurance > Learn About.](#)

Cigna PPO Basic

This is the Cigna plan with the highest bi-weekly premiums and lowest deductible. Preventive care is covered at 100% and you'll pay only a copay for primary care (\$25) and specialty care (\$40) visits. Copays apply to only in-office services and do not apply to your deductible. You must meet a deductible before the plan pays for any other services, then the Cigna PPO Basic has coinsurance and out-of-pocket maximums (see [page 13](#) for details).

Cigna PPO Mid

The premiums and deductible are more moderate than the other Cigna plans. Preventive care is covered at 100%, and you'll pay only a copay for primary care (\$25) and specialty care (\$40) visits. Copays apply to only in-office services and do not apply to your deductible. You must meet a deductible before the plan pays for any other services, then the plan has coinsurance and out-of-pocket maximums (see [page 13](#) for details).

Regional Plans (Kaiser, BCBS AL, Empire BCBS)

Depending on where you live, you may have access to a regional plan. For Kaiser and Empire BCBS EPO, only visits to providers within the network are covered. All visits, prescriptions, referrals and other care must be approved by the plan in order to be covered. BCBS AL is a PPO plan and provides coverage for out-of-network providers.

Am I eligible?

See [page 8](#) for eligibility information.

The table (right) displays the range of rates for medial premiums for 2021. The lowest rate represents all Vitality Points earned per person and the highest rate represents 0 Vitality Points earned per person. The rate you will pay varies on how many Vitality Points you and your spouse/domestic partner earned. Learn more about Vitality Points on [page 22](#).



Health Plan	Full-time (per pay period)				
	Teammate Only	Teammate + Spouse/ Domestic Partner	Teammate + Child(ren)	Family	
Cigna HDHP with HSA	\$41.77 - \$72.54	\$107.59- \$169.13	\$106.62- \$137.39	\$160.30- \$221.84	<ul style="list-style-type: none"> Free preventive generic Rx HSA funded by DaVita
Cigna PPO Mid	\$50.84- \$81.61	\$114.88 - \$176.42	\$112.98- \$143.75	\$172.53 - \$234.07	<ul style="list-style-type: none"> Free preventive generic Rx Copays for primary and specialty care visits
Cigna PPO Basic	\$92.39- \$123.16	\$209.19 - \$270.73	\$204.94 - \$235.71	\$328.54- \$390.08	<ul style="list-style-type: none"> Highest premium, lowest deductible Copays for primary and specialty care visits
Kaiser	\$92.32- \$123.09	\$209.54- \$271.08	\$204.34 - \$235.11	\$329.83 - \$391.37	<ul style="list-style-type: none"> Regional plans available only in certain states
BCBS of Alabama	\$92.32- \$123.09	\$209.54- \$271.08	\$204.34 - \$235.11	\$329.83 - \$391.37	<ul style="list-style-type: none"> Available in Alabama only
Empire Blue Cross	\$119.36 - \$150.13	\$263.29- \$324.83	\$257.75- \$288.52	\$411.22- \$472.76	<ul style="list-style-type: none"> Available in some New York counties

Note: Teammates who have the Cigna LocalPlus network option available in their area are eligible for an additional premium discount. See the LocalPlus rate sheet on [DaVitaRewards.com](https://www.davitarwards.com) for pricing detail.



Regional Medical Plans

Summary Plan Descriptions including more plan details can be found at [DaVitaRewards.com](https://www.DaVitaRewards.com) under [Health & Insurance > Summary of Benefits and Coverage > Medical](#).

Benefit	Kaiser Colorado	Kaiser California	Kaiser Georgia	Kaiser Hawaii	Kaiser Mid-Atlantic	Kaiser Northwest	Kaiser Washington	BCBS/ Alabama PPO (in-network)	Empire BCBS
Deductible									
Individual	None	None	None	None	None	None	None	\$450	None
Family	None	None	None	None	None	None	None	\$900	None
Annual Out-of-Pocket Max									
Individual	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$2,000	\$5,080
Family	\$3,000	\$3,000	\$3,000	\$4,500	\$3,000	\$3,000	\$3,000	\$4,000	\$12,700
General Services									
Office Visits	\$25 copay (\$35 specialist)	\$25 copay (\$35 specialist)	\$25 copay (\$35 specialist)	\$20 copay (\$20 specialist)	\$25 copay (\$35 specialist)	\$25 copay (\$35 specialist)	\$25 copay (\$50 specialist)	80% after deductible	\$30 copay (\$50 specialist)
Mammography/ Preventive	100%	100%	100%	100%	100%	100%	100%	100%	100%
Hospitalization	No charge after \$500 copay per admission	No charge after \$500 copay per admission	No charge after \$500 copay per admission	90% covered	No charge after \$500 copay per admission	No charge after \$500 copay per admission	No charge after \$500 copay per admission	80% after deductible	\$500/\$1,250 per admission/ maximum per calendar year
Emergency Services	\$250 copay (waived if admitted), not covered if an out-of-network ER used for non-emergency	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)	\$100 copay	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)	80% after deductible	\$100 copay (waived if admitted)



Benefit	Kaiser Colorado	Kaiser California	Kaiser Georgia	Kaiser Hawaii	Kaiser Mid-Atlantic	Kaiser Northwest	Kaiser Washington	BCBS/ Alabama PPO (in-network)	Empire BCBS EPO
Prescription Drug Benefits									
Generic/Brand/ Non-Preferred Brand (30-day supply)	\$15/\$30/ NA at Kaiser pharmacies	\$15/\$30/\$30 at Kaiser pharmacies	\$15/\$30/ NA at Kaiser pharmacies, \$15/\$30/NA at network pharmacy	\$10/\$35/\$35 when medically necessary	\$15/\$30/NA at Kaiser pharmacies, \$16/\$32/NA at network pharmacy	\$15/\$30 up to 30-day supply at Kaiser pharmacies	\$15/\$30 up to 30-day supply at Kaiser pharmacies	\$5/\$35/\$50	\$10/\$35/\$70
Mail Order 90-day	\$20/\$40	\$20/\$40/\$40 for each 100-day supply	\$15/\$30/NA	\$35	\$20/\$40/NA	\$20/\$40	\$20/\$40	\$10/\$70/\$100	\$20/\$70/\$140

2021 Cigna National In-Network Medical Plan Comparison

This chart reflects the plans' responsibility for in-network coverage only. Out-of-network and detailed benefits information are available under the "Summary of Benefits & Plan Documents" tile on [DaVitaRewards.com](https://www.davitarwards.com). Deductibles do not carry over to the next plan year and are not prorated based on effective date.

In-Network* Coverage	HDHP with Health Savings Account (HSA)	PPO Mid	PPO Basic
Deductible	Individual: \$2,100 Family: \$4,200 (not to exceed \$2,800 per family member)	Individual: \$1,400 Family: \$2,800 (not to exceed \$1,400 per family member)	Individual: \$750 Family: \$1,500 (not to exceed \$750 per family member)
Out-of-Pocket Maximum	Individual: \$5,500 Family: \$11,000	Individual: \$4,600 Family: \$9,200	Individual: \$4,500 Family: \$9,000
DaVita HSA Contribution	Teammate only: \$600 Teammate plus spouse: \$900 Teammate plus child(ren): \$900 Teammate plus family: \$1,200	—	—
Preventive Care	Plan pays 100%	Plan pays 100%	Plan pays 100%
Office Visits	Plan pays 80% after deductible	PCP: You pay \$25 Specialist: You pay \$40	PCP: You pay \$25 Specialist: You pay \$40
In/Outpatient	Plan pays 80% after deductible	Plan pays 80% after deductible	Plan pays 80% after deductible

*View detailed benefits information, including out-of-network coverage, at [DaVitaRewards.com](https://www.davitarwards.com).



My Health



PHARMACY

Our pharmacy plan covers prescription medication, including specialty medication, with over 300 generic medications fully covered. Cigna plans have a three-tiered formulary that covers generic, preferred and non-preferred name-brand medications. The table below details the coverage across our three Cigna plans.

Free Prescriptions for Treatment of Chronic Conditions

There are over 300 free preventative prescriptions for chronic conditions such as:

- Arthritis
- Asthma
- Osteoporosis
- Heart Disease
- High Blood Pressure
- Diabetes
- High cholesterol
- Pressure

Find the list of free medications at [DaVitaRewards.com](https://www.davitarwards.com).
Go to **Health & Insurance > Summary of Benefits and Coverage > Summary Plan Descriptions (SPD) & Other Benefit Information > Medical > RX Information > Preventive Generic Drugs List**

Thinking about a regional plan (like Kaiser)? Check out the provider's website (like [kp.org](https://www.kp.org)).

Prescription Drug Benefits	HDHP with HSA	PPO Mid	PPO Basic
	In-Network	In-Network	In-Network
Generic (30-day supply)	20% after deductible for all drugs	\$10	\$10
Preferred (30-day supply)		35% up to \$120/Rx max	35% (up to \$120/Rx max)
Non-preferred (30-day supply)		55% (up to \$180/Rx max)	55% (up to \$180/Rx max)
Mail Order Generic (90-day supply)		\$15	\$15
Mail Order Preferred (90-day supply)		35% (up to \$300/Rx max)	35% (up to \$300/Rx max)
Mail Order Non-Preferred (90-day supply)		55% (up to \$450/Rx max)	55% (up to \$450/Rx max)



Filling prescriptions

Fewer than four fills:

Teammates should use a Cigna-contracted retail pharmacy for any prescriptions that are needed for a short period of time, like antibiotics, or medications for an acute condition. Contracted pharmacies can be found at [Cigna.com](https://www.cigna.com).

Four or more fills:

To receive coverage on your fourth prescription and beyond, the Cigna 90 Now program allows you to fill your 90-day maintenance medications at select retail pharmacies or Cigna Home Delivery Pharmacy. Maintenance medications are typically prescribed for continuing periods, for a chronic condition, or one that may take a long time to stabilize. To find a network pharmacy near you, visit [Cigna.com/rx90network](https://www.cigna.com/rx90network).

Mail order fills and refills:

Express Scripts Pharmacy is Cigna's home delivery pharmacy. You can manage your home delivery prescriptions, including payment, shipping and auto-refill enrollment, on the myCigna app and website.



Step Therapy

This is a prior authorization program to ensure that you are treated with therapeutically appropriate, cost-effective medication. If you fill a prescription that has a more cost-effective medication, therapeutic equivalent, you and your provider will get a letter explaining one of two options for your next fill:

- Try a lower-cost alternative; or
- Have your provider request authorization from Cigna to continue on your current medication due to medical necessity.

You can see if your prescription is included in the step therapy program by visiting [Cigna.com](https://www.cigna.com) > Prescription Drug List > Enter the name of your medication. An "ST" designation will appear if your medication is included.



New!

The patient assurance program reduces teammate out of pocket costs by capping the cost-share for certain preferred brands of insulin:

- **\$25 for 30 day supply**
- **\$75 for a 90 day supply**

Specialty Medications

When you have a chronic or difficult health condition, like multiple sclerosis or rheumatoid arthritis, you may need specialty drugs. Here's what you need to know about these medications under the Cigna plans:

- Teammates enrolled in the High Deductible Health Plan (HDHP) can get their first fill of a specialty medication at a retail pharmacy.
- To avoid paying the full price of the medication, PPO Basic and PPO Mid enrollees will need to fill their specialty prescription through Cigna Specialty Pharmacy Services.
- Specialty medication prescriptions will be filled by Accredo Specialty Home Delivery. All refills will be filled by Accredo as well.
- Because specialty medications can change often, you'll only be able to fill a 30-day supply.

Contact information

- Call 1-877-826-7657 to get help transferring your prescription.
- Ask questions and get advice from experienced pharmacists. Call 1-855-BE-WELL-1.

Important notes

Exclusions

- There is no coverage for prescriptions filled at out-of-network pharmacies.
- If you choose to fill a prescription at an out-of-network pharmacy, you will be responsible for 100% of the cost. In-network pharmacies can be found at [Cigna.com](https://www.cigna.com). Over-the-counter medications, such as proton pump inhibitors and oral allergy medications, are not covered.



My Health

Accident Insurance

The plan pays a cash benefit for accidental injuries (e.g., concussions, fractures, lacerations and ambulance rides) treated by a medical professional. You also get a wellness benefit—a \$50 check for completing a wellness-related visit.

Teammate Only	Teammate & Spouse/ Domestic Partner	Teammate & Child(ren)	Family
\$2.76/pay period	\$5.58/pay period	\$6.58/pay period	\$8.46/pay period

Hospital Care Insurance

Being admitted to the hospital can be stressful. Even with medical coverage, you may still be responsible for out-of-pockets costs. Hospital Care Plan coverage can help you manage your expenses by sending you a check to cover a portion of your out-of-pocket expenses. There are no copays, deductibles, coinsurance or network requirements.

Teammates earning up to \$50,000 and enrolled in a Cigna plan will receive this coverage at no cost and will be automatically enrolled at the same coverage tier as medical. All other teammates can buy this coverage on a voluntary basis.

Teammate Only	Teammate & Spouse/ Domestic Partner	Teammate & Child(ren)	Family
\$3.57/pay period	\$6.48/pay period	\$6.36/pay period	\$9.65/pay period

Critical Illness Insurance

Cigna Critical Illness Insurance provides you with a lump-sum cash payment if you or your covered dependent is diagnosed with certain conditions, such as cancer, heart attack, stroke or kidney failure, or needs a major organ transplant. There are an additional 22 listed conditions covered under this plan. Benefits are available at \$10,000, \$20,000 or \$30,000 per condition, per covered person, and some conditions include a recurrence benefit. You also get a wellness benefit—a \$50 check for completing a wellness-related visit. For rates, visit [DaVitaRewards.com](https://www.DaVitaRewards.com).





VISION

What is it?

Vision Service Plan (VSP) provides coverage for eye exams, lenses, frames and contact lenses each calendar year. You may see in-network or out-of-network vision care providers, but will receive greater benefits when staying in-network.

Laser Vision Program

- VSP has contracted with specific laser centers to provide a discounted fee for laser surgery.
- Laser surgery includes PRK, LASIK and custom LASIK. Discounts vary by location, but average 15% off the contracted laser center's usual and customary price.
- If the laser center is offering a temporary price reduction, VSP members receive 5% off the promotional price.

Am I eligible?

Full-time and part-time teammates are eligible. See [page 8](#) for more information.

Important notes

If you have had corrective eye surgery, you may use your annual frame allowance to purchase non-prescription sunglasses.

Exclusions

The following materials and services are not covered under the program:

- Orthoptics or vision training
- Non-prescription glasses or contacts
- Two pairs of glasses instead of bifocals
- Replacement of glasses that are lost or broken
- Medical or surgical treatment of the eyes (excluding discounts for laser vision correction)
- Experimental vision services, treatments and materials

Experimental vision services, treatments and materials

Features	VSP Basic Option	VSP Premier Option
Eye Exams	\$10 copay	\$0 copay
Materials Copay	\$25 copay	\$0 copay
Frames	\$150 allowance (every other calendar year)	\$200 allowance (every calendar year)
Lenses	Single vision, lined bifocal, lined trifocal lenses and polycarbonate lenses for dependent children are included with materials copay.	Single vision, lined bifocal, lined trifocal lenses and polycarbonate lenses for dependent children are covered in full.
Lens Enhancements	\$55-\$175 copay	\$55-\$175 copay
Contacts (in lieu of glasses)	\$150 allowance for contacts Up to \$60 copay for contact lens fitting	\$175 allowance for contacts Up to \$60 copay for contact lens fitting

Vision: VSP	Full-Time & Part-Time			
	TM Only	TM + Spouse	TM + Child(ren)	Family
Basic	\$2.80	\$5.61	\$6.00	\$9.59
Premium	\$4.12	\$8.25	\$8.82	\$14.10

For a list of in-network vision care providers, go to the Choice directory at vsp.com/choice.



My Health



What is it?

Sometimes, you'll need to have a lab test your blood, test results or something else. We have preferred labs to help minimize the costs of these lab tests.

Details

Quest and LabCorp are preferred labs. Here is the lab tiered lab benefits for Cigna medical plans.

Tier 1	Tier 2
80%	50%
at preferred labs	at out-of-network labs

DENTAL PLANS

What is it?

DaVita offers dental plan options to provide complete dental care services for yourself and your family, under two different types of plans. While three plans are offered, not all may be available in your area. When enrolling, only plans based on your home zip code will be displayed.

Dental	Full-Time & Part-Time			
	TM Only	TM + Spouse	TM + Child(ren)	Family
AETNA DMO	\$9.92	\$21.34	\$19.85	\$30.57
CIGNA DMO	\$10.15	\$20.33	\$21.10	\$32.50
CIGNA DPO	\$16.69	\$35.88	\$33.37	\$51.40

Work In Progress?

If you are already receiving orthodontia or other ongoing dental care and are considering new coverage under a DaVita dental plan, contact Aetna or Cigna for details about your new benefit coverages.





Details

Cigna DPO Advantage

This plan gives you the option of going to an in-network or out-of-network provider; however, if you go to an in-network provider, you will have a lower deductible and higher level of coverage. There is no ID card issued for this plan, but you can print one from mycigna.com or access it on your mobile device with the myCigna app.

DMO (Cigna or Aetna)

You must designate a primary care dentist by calling Cigna or Aetna directly. Your primary care dentist must be designated prior to receiving services in order for the visit to be covered. All visits to a specialist must have a referral. You must seek services from an in-network dentist in order to receive benefits.

Am I eligible?

Part-time and full-time teammates are eligible. See [page 8](#) for more information.

Important notes

- Deductibles do not carry over to the next plan year and are not prorated based on effective date.
- For a list of dentists who participate in the Cigna DMO or DPO networks, go to the Cigna provider directory at cigna.com or call 1-855-239-3551.
- The Aetna DMO provider directory is located at aetna.com or at 1-877-238-6200.





Comparing Dental Plans

Benefits	Aetna DMO Plan	Cigna DMO Plan (Patient Copay Schedule)	Cigna DPO Plan In-Network	Cigna DPO Plan Out-of-Network
Calendar Year Deductible	None	None	\$50 Individual \$150 Family Waived for preventive	\$75 Individual \$225 Family Waived for preventive
Preventive Services	100%	Copay schedule available through the carrier.	100%	80%
Basic Services	80%	Copay schedule available through the carrier.	80% after deductible	60% after deductible
Major Services	60%	Copay schedule available through the carrier.	50% after deductible	50% after deductible
Calendar Year Maximum	None	None	\$1,500	\$1,500
Lifetime Orthodontic Maximum	None	None	\$1,500 per member	\$1,500 per member
Orthodontics: (24-month treatment fee, pre-ortho visit, retention, report and banding fees)				
Child	50%	\$3,147	50%	50%
Adult (age 19 and over)	50%	\$3,498	50%	50%
Preventive and Diagnostic:				
Prophylaxis	100%	\$0	100%	80%
Topical fluoride (child)	100%	\$0	100%	80%
Restorative:				
Fillings (amalgams and composites)	80%; composite fillings could cost more	\$0 to \$115	80%	60%
Stainless steel crowns	80%	\$105 to \$165	80%	60%



Comparing Dental Plans

Benefits	Aetna DMO Plan	Cigna DMO Plan (Patient Copay Schedule)	Cigna DPO Plan In-Network	Cigna DPO Plan Out-of-Network
Oral Surgery:				
Single extraction	80%	\$12	80%	60%
Impaction (partial bony)	60%	\$91	80%	60%
Impaction (full bony)	60%	\$115	80%	60%
Periodontics:				
Gingivectomy (per quadrant)	80%	\$91 to \$180	80%	60%
Scaling/root planning (per quadrant)	80%	\$42 to \$83	80%	60%
Osseous surgery (per quadrant)	60%	\$240 to \$400	80%	60%
Endodontics:				
Root canal	80% (60% for molar root canals)	\$210 to \$335	80%	60%
Prosthodontics:				
Inlays/crowns	60%	\$390 to \$500	50%	50%
Complete denture	60%	\$625	50%	50%
Partial denture	60%	\$525 to \$715	50%	50%
Denture reline (chair side)	60%	\$145	50%	50%
Denture – broken tooth repair	60%	\$81	50%	50%



My Health

VITALITY POINTS



What is it?

Vitality Points is a voluntary health incentive program for you and your spouse/domestic partner enrolled in a DaVita medical plan. Each year, you and your spouse/domestic partner can save up to \$800 per person on the following year's medical insurance premiums.

Details

Each year DaVita sets health insurance premiums for our medical plans. To qualify for the lowest premium, you and your spouse/domestic partner covered under a DaVita medical plan are asked to complete a biometric screening each year (i.e., Vitality Screening).

In your Vitality Screening, you earn Vitality Points. When all Vitality Points are earned, you and your spouse/domestic partner will get an \$800 credit toward health insurance premiums for the following year. The Vitality Points credit is reflected on your paycheck as a separate credit.

Am I eligible?

Eligibility is based on your previous DaVita health plan participation and benefits start date in a DaVita medical plan.

Important notes

If your benefits start date is on Sept. 1 or before, completion of a Vitality Screening will be necessary to earn all Vitality Points for the following year.

If your benefits start date is after Sept. 1, you will automatically earn all of your Vitality Points for the following year.

To learn more, visit the Vitality Points tile on [DaVitaRewards.com](https://www.DaVitaRewards.com).

CIGNA WELLNESS TEAM



What is it?

Whether the goal is to lose weight, quit tobacco or lower stress levels, the Cigna wellness team can help make it happen. This team includes health educators, nurses, exercise physiologists, dietitians, Health Coaches and lifestyle management programs.

Details

The Cigna wellness team and programs are available over the phone and online and are here to support teammates:

- Lose weight
- Manage stress
- Quit smoking
- Get fit
- Manage cholesterol, diabetes, or blood pressure

Confidentiality is important. We comply with all HIPAA guidelines that guarantee the privacy of Protected Health Information.



Am I eligible?

Yes, all DaVita teammates have access, regardless of your medical plan coverage.

Where to learn more: Call 1-855-BE-WELL-1 to get started!

OMADA

What is it?

Omada is a digital program that empowers you to achieve your health goals through sustainable lifestyle change.

Details

Omada has programs for diabetes prevention, diabetes management and hypertension. These programs are based on clinically proven science and focus on guiding participants toward achieving modest weight loss and activity goals through nutrition and behavioral changes. Participants

have access to professional health coaches, weekly interactive lessons on topics from meditation to medication, and health devices (e.g., scale, blood pressure monitor, blood glucose monitor).

Am I eligible?

All teammates and dependents aged 18 and over, who are on a Cigna medical plan, are eligible. To see if you can participate, complete the one-minute questionnaire at go.omadahealth.com/davita.

PALADINA

Colorado, Florida, Kentucky, Ohio, New Jersey, North Carolina, South Carolina, Texas, Washington and Wisconsin teammates

Paladina Health is in your area to provide you convenient, high-quality, low-cost health care.

Cigna members, call Paladina Member Services at 1-866-808-6005 for participating locations and enrollment information.



My Health

WE ARE WELL AWARD



What is it?

The We Are Well Award recognizes teammates each year who are improving their health and life alignment. Winners receive free teammate-only medical insurance premiums for coverage under a DaVita medical plan for one year. Winning teammates will be chosen by a committee.

Details

Applications open once a year and teammates are asked to submit a We Are Well Award story about striving to live a healthy life. Examples include:

- New and/or lasting commitments to health or finances
- Overcoming unhealthy habits
- Actions you took to improve your life alignment
- Motivating someone else to live a healthy life

Am I eligible?

Who can win? Any DaVita teammate who:

- Is participating in a medical plan in the new year; and
- Remains a teammate (premiums will not be paid out if the teammate leaves DaVita).

Where to learn more

Search We Are Well Award on [DaVitaRewards.com](https://www.davitarwards.com).

LIFE INSURANCE

What is it?

In exchange for premium payments, the insurance company provides a lump-sum payment to beneficiaries upon the insured's death. All full-time and part-time teammates get life insurance from DaVita. You can also elect to additional coverage.

Life insurance can be used to pay for funeral costs, pay off debts and taxes, and manage expenses, if something were to happen to you. As a teammate, you can elect whole life and term life insurance coverage. Both of these give you peace of mind now by protecting your future.

Details

DaVita-Paid Basic Life Insurance

Full-time teammates receive coverage equal to one times annual base salary up to \$500,000.

Eligible part-time teammates receive coverage of 50% of annual base salary up to \$250,000.

Voluntary Supplemental Life Insurance

Whole Life Insurance

Whole life insurance is a type of permanent insurance that offers lifelong coverage and consistent premiums. Whole life also accumulates annual interest you can eventually borrow against for any reason if needed.

Whole life insurance is offered in increments of \$10,000, \$20,000 and



\$30,000. If you leave DaVita, you can easily take it with you at the same rates. Evidence of insurability is not required.

Term Life Insurance

Term insurance is a type of life insurance that provides coverage for a certain period of time. Because term life insurance is generally used as income replacement, people usually hold these policies only until retirement. This coverage is available in increments of \$10,000 up to a maximum of \$1,000,000. If you leave DaVita you may be able to apply to take the coverage with you and the rates are likely to increase. Evidence of insurability may be required.

Am I eligible?

All benefits-eligible teammates are eligible for life insurance. For more eligibility information, see [page 8](#).

Search life insurance on [DaVitaRewards.com](https://www.davitarwards.com) to learn more.

ADDITIONAL COVERAGE

Business Travel Accident Plan

- Pays benefits for eligible full-time and part-time teammates who get injured or die while traveling for DaVita.
- Provided at no cost to teammates

Basic AD&D

- Coverage levels are the same as Basic Life Insurance. Benefits are paid in addition to Basic Life if you die as a result of an accident.
- Also pays benefits for dismemberment resulting from an accident.

Supplemental AD&D

- Teammates can purchase this in increments of \$25,000 up to the lesser of 10 times your annual base salary or \$500,000.
- Evidence of insurability is not required.
- Age restrictions may apply for teammates.
- Spouses/domestic partners are not eligible for coverage once age 70 is reached.

DISABILITY COVERAGE

What is it?

DaVita offers eligible teammates short- and long-term disability.

Details

Short-Term Disability

DaVita provides short-term disability (STD) benefits at no cost for all full-time teammates, which provides income protection if you are unable to work due to your own extended, non-work-related illness, injury or pregnancy for more than seven calendar days. This benefit provides income protection for up to 26 weeks with an approved claim. If you are eligible for a Basic STD benefit, you will receive 60% of your base pay, to a maximum benefit of \$1,000 per week.

You can enhance your Basic STD coverage by electing Supplemental STD coverage that increases your benefit to 75% of your base pay to a maximum benefit of \$1,250 per week. Pre-existing conditions apply.

Long-Term Disability

DaVita provides you the opportunity to purchase Basic Long-Term Disability (LTD) benefits. This benefit provides income protection if



My Health

you are unable to work due to your own extended, non-work-related illness, injury or pregnancy for more than 26 weeks. If you become eligible for a Basic LTD benefit, you receive 50% of your base pay, to a maximum benefit of \$10,000 per month. Teammates pay 25% of the cost for this coverage. DaVita pays the rest. You will be auto-enrolled in Basic LTD, and must opt out if you do not want this benefit.

You can enhance your Basic LTD coverage by electing Supplemental LTD coverage that increases your benefit to 60% of your base pay to a maximum benefit of \$12,000 per month. Pre-existing conditions apply.

Important notes

Know before you elect

If you live in a state which provides a public state disability insurance program, your state-mandated benefit under that program may be in excess of 60% of your wages. If you purchase Supplemental Short-Term Disability benefits through DaVita, the state disability program may “offset” (reduce) any benefit it pays by the amount you receive under the DaVita Supplemental STD Plan.

However, there may be circumstances where DaVita Supplemental Short-Term Disability pays benefits when public state disability will not, which is why DaVita still wants to make the benefit available to all teammates. Everyone's situation is different, and you should consult with your financial or tax advisor if you have questions.





Planning and preparing for my financial future



My Future

401(k)

The DaVita Retirement Savings Plan offers a convenient, pre-tax way to save for retirement through pre-tax and/or Roth contributions.

The 401(k) auto-enrollment feature helps by enrolling you at a 6% pre-tax deferral rate. The default auto-increase feature helps you save more over time by increasing your deferral rate by 1% each January, up to 10%. Participants may opt out of this feature at any time. Information about the plan and auto-enrollment will be sent to your home address shortly after your start date.

DaVita will match up to 6% of teammate contributions at a rate of \$.50 for every \$1.00 contributed each pay period. In order to maximize this benefit, teammates need to contribute at least 6% of each paycheck for the entire year. DaVita’s matching dollars are calculated on a per-paycheck basis and funded annually, each January.

You have the option to:

- Select a different deferral percentage from 1–75%.
- Opt out within the first 45 days of employment before contributions start.
- Opt out within the first 90 days following your first contribution and request those contributions be returned to you (subject to market gains or losses).
- Stop contributing at any time (contributions will remain in your account).

This is a qualified retirement plan, and only money from another qualified plan can be rolled into DaVita’s plan. Contact Voya with questions or to obtain a rollover kit.

Connect to Your 401(k)

- Online: [DaVitaRewards.com](https://davidarewards.com)
- Call: 1-844-DVA-401K (1-844-382-4015)
- Email: match@davita.com.

Additional Support and Resources

For videos, training sessions, FAQs and more, search “match” on VillageWeb.

401(k) Match Design

Eligibility	After 12 months of service
Vesting	4 years 25% per year
Match Timing	Match contributions will be funded annually each January following the end of the plan year.
Maximum Match	Applies only to Directors and VPs earning above a specific base salary threshold per year. Please email match@davita.com for more information.
DaVita Match	\$.50 for every \$1.00 up to 6% of teammate contributions
Example: \$40,000 Annual Pay	Per pay period earnings \$1,538.46
	Teammate 6% contribution \$92.31
	x 0.50
	DaVita match: \$46.15



Employee Stock Purchase Plan

The Employee Stock Purchase Plan (ESPP) gives you the opportunity to purchase company stock at a discount. All DaVita teammates regularly scheduled to work at least 20 hours per week, and who have worked for three consecutive months prior to the first day of a Purchase Right Period, are eligible to participate in ESPP during that specific Purchase Right Period.

You can enroll in ESPP in June and December of each year through Workday. Visit DaVita Rewards > Other Benefits for more information. The minimum contribution amount per paycheck is \$10; the maximum annual contribution is \$25,000.

The sum of your contributions for each purchase period will be used to purchase shares on your behalf, and these shares will be issued to you within 45 days after the Purchase Right Period has closed. The two Purchase Right Periods are January – December and/or July – December.

ESPP Eligibility Chart		
Hired/Acquired Between	Eligible to Enroll in ESPP	Purchase Right Period Begin Date
Oct. 2 – April 1	June	July 1
April 2 – Oct. 1	December	Jan. 1





Reaching my professional goals



My Career

TUITION REIMBURSEMENT

Full- and part-time teammates pursuing a degree in nursing or business can receive up to \$3,000 reimbursement each calendar year based on their course end date.

To be eligible in 2021, teammates must have used tuition reimbursement in 2020. Using tuition reimbursement in 2020 is defined as taking eligible courses in 2020 and being approved for payment within 90 days of the course end date.

BRIDGE TO YOUR DREAMS

Bridge to Your Dreams supports high-performing patient care technicians (PCT), licensed vocational nurses (LVN) and licensed practical nurses (LPN) in their dream to pursue an associate's degree in nursing and become a DaVita nurse. There are three components to bridge gaps and remove barriers:

- Financial assistance
- Uniquely designed resources
- Support with role placement

Who's eligible?

- Active, full-time teammates
- Non-manager role
- Active PCT certification or LVN/LPN license
- Six months of continuous employment
- Satisfactory work performance

Visit BridgeToYourDreams.com for more information.

REDWOODS THRIVE LEADERSHIP DEVELOPMENT PROGRAM

THRIVE is a leadership development program to develop high potential nurses, clinical coordinators or clinical nurse managers into operational managers. Program participants get customized, live leadership training, 1:1 coaching and mentorship, peer relationships, business exposure and protected time for on-the-job training and shadowing.

Who's a good fit? A good candidate:

- Lives our mission and values.
- Turns new processes into new habits.
- Sets goals and takes on new responsibilities.
- Has open, effective communication with their team.
- Possesses emotional maturity and self-awareness.

Participants are selected for the program through a nomination process. If you are interested, please have a conversation with your FA or ROD.





FORESTERS

Foresters is a 7-month field leadership developmental program to develop high potential FAs and GFAs in to operations directors in all modalities. The program includes mentorship, coaching, executive exposure, case studies and hands-on experience with real project work.

Participants must be nominated by their DVP and meet all nomination criteria. If you are interested in Foresters, talk to your manager.

GATEWAY

Gateway is a social platform where you can connect with teammates across the Village and explore career paths. And, nurses can explore more than 50 different career paths by selecting “My Career.” Visit mygateway.davita.com to get started.





Making the most of my compensation



My Pay

TIME AWAY FROM WORK

Paid Time Off

DaVita has created a paid time off (PTO) program to allow teammates the flexibility to use their time off in a way that best meets their personal needs. The PTO program incorporates vacation time, sick time and holidays into one accrual rate. As a full-time or part-time teammate working a minimum of 24 hours per week, you may begin using your PTO as soon as it is accrued.

Am I eligible?

All part- and full-time teammates are eligible for, and start accruing, PTO as soon as they start working at the Village.

Important note: Acquired teammates your maximum PTO balance is based on your original hire date with your current employer or DaVita's original hire date or the adjusted hire date (whichever is earlier for dual teammates or rehires).

PTO Cash Out

Each year, at the start of Open Enrollment through Dec. 31, DaVita allows eligible teammates to make an election to cash out a portion of their PTO to be accrued in the following year. Due to IRS regulations, exceptions cannot be made.

Am I eligible?

Teammates with one year or more of service are eligible. Annual elective cash-out limits are based on years of service.

Length of Service	Accrual Rate per Hour Paid	Maximum Hours	Maximum 8-Hour Days	Maximum PTO Balances
Hire through year 1	0.0846	176	22	240 hours
Beginning year 2	0.0923	192	24	240 hours
Beginning year 3	0.0962	200	25	240 hours
Beginning year 4	0.1000	208	26	240 hours
Beginning year 5	0.1038	216	27	240 hours
Beginning year 6	0.1077	224	28	240 hours
Beginning year 7	0.1115	232	29	240 hours
Beginning year 8	0.1154	240	30	240 hours
Beginning year 9	0.1192	248	31	248 hours
Beginning year 10+	0.1231	256	32	256 hours

Years of Service (As of Dec. 31)	Hours Limit	Years of Service (As of Dec. 31)	Hours Limit
1.0-1.9	56	6.0-6.9	96
2.0-2.9	64	7.0-7.9	104
3.0-3.9	72	8.0-8.9	112
4.0-4.9	80	9.0+	120
5.0-5.9	88		



My Pay

Holidays

Your PTO accrual includes time for DaVita designated holidays; however, teammates who are required to work on a designated DaVita premium pay holiday will be compensated at a premium rate of one and one-half times their hourly rate of pay for all hours worked on the actual day. Please refer to the teammate handbook for a list of holidays that are designated as a premium holiday.

Caregiver Leave

Receive 60% of pay for up to two weeks off to care for a loved one who is ill. The maximum benefit is \$1,000 per week. You can use this time to focus on them with peace of mind, knowing your job is protected. You can also supplement your time off with PTO and receive 100% of your pay.

For additional details on caregiver leave, contact Sedgwick at 1-877-209-8401 or visit the Family Resources page on [DaVitaRewards.com](https://www.davita.com/daVitaRewards.com).

Paid Parental Leave

Whether it's through birth or adoption, we want you to take the time you need to bond with your new child. You will receive six weeks of leave at 60% of pay for up to a maximum of \$1,000 per week. You can also supplement your time off with PTO and receive up to 100% of your pay. Please note that the leave must be taken within one year of your child's birth/adoption.

For more information on benefits for teammates with new babies, check out [page 37](#).





Am I eligible?

Eligibility for Caregiver Leave, Paid Parental Leave is the first of the month following one month of employment.

VILLAGE MARKET PLACE

The Village Market Place is an online site sponsored by DaVita that provides links to a wide variety of brand-name products, services and discounts such as amusement park tickets, movie passes, wireless phone service and more!

Am I eligible?

All DaVita teammates are eligible for Village Market Place. To access these discounts, opt-in to Village Market Place by visiting DaVitaRewards.com > DaVita Privacy Preferences.

PROTECTING YOUR FUTURE

PrivacyArmor

Allstate's PrivacyArmor provides industry-leading protection services to fight evolving identity fraud. And in the event of identity theft, PrivacyArmor provides insurance that covers any out-of-pocket expenses, lost wages or legal fees.

Option	Covers	TM Only	Family
ID Protection Pro	Single credit agency monitoring	\$3.67	\$6.44
ID Protection Pro Plus	Three credit agency monitoring	\$4.59	\$8.28



My Pay

Home & Auto Insurance

You can purchase insurance for your home, mobile home, condo, apartment, car or recreational vehicle any time during the year. Discounts for mature homeowners, new home buyers, good drivers, security devices in your home and car, and multiple insurance policies are offered. You'll receive additional discounts based on your years of service. You can elect to have premiums deducted from your paycheck.

For more information, visit Village Market Place on [DaVitaRewards.com](https://www.DaVitaRewards.com).

Legal Services

DaVita offers teammates two MetLife Legal Plans: Legal Basic and Legal Premier. These plans provide prepaid legal services such as will preparation, power of attorney, divorce coverage and trusts. The Legal Premier plan allows your parents to use your legal plan for things such as review of Medicare/Medicaid documents, nursing home agreements and estate planning documents.

Questions? Call a Client Services Representative at 1-800-821-6400.

Pet Insurance

Every member of your family is important, and you want all of them to be protected—including your pets. Veterinary Pet Insurance (Nationwide) offers discounted services and covers thousands of medical issues including accidents, illness and poisonings.

For more information, visit Village Market Place on [DaVitaRewards.com](https://www.DaVitaRewards.com).





COMMUTER BENEFITS

DaVita offers teammates working 20 or more hours per week within the previous calendar month the opportunity to use pre-tax dollars to pay for qualified work-related transit and parking expenses.

Eligible forms of transportation include train, commuter rail, shuttle bus, bus, light rail, parking, vanpool, ferry and boat.

IRS pre-tax maximum allowable employee contributions for 2021:

- Transit – \$270 per month
- Parking – \$270 per month

Commuter benefits will be administered by our FSA administrator, Your Spending Account. You can make changes to your order at any point throughout the year to meet your changing commuting needs. The ordering deadline is monthly on the tenth of the prior month.

DAVITA VILLAGE NETWORK

What is it?

DaVita Village Network (DVN) provides financial support to teammates experiencing a specific tragedy or hardship and helps cover additional costs that local fundraising and insurance do not fully cover.

Details

Teammates can apply for assistance in situations such as:

- Natural disasters
- Funeral/bereavement
- Acute/major medical diagnosis
- Military deployment

Important notes

DVN contributions and deductions are not tax-deductible. Your voluntary donation commitment can be updated or changed at any time on [DaVitaRewards.com](https://www.davitarwards.com).

POLITICAL/CHARITABLE CAUSES

DaVita provides you a convenient way to contribute a minimum of \$0.50 per paycheck, on a voluntary, confidential basis, to these organizations. Changes to your contribution can be made at any time at [DaVitaRewards.com](https://www.davitarwards.com). All donations are strictly voluntary.

DaVita Village Trust

Inspired by DaVita's goal of becoming the greatest health care community the world has ever seen. DaVita Village Trust aims:

- To improve community health, wellness and vitality, including chronic kidney disease education and prevention.
- To support strong communities, education, organizational culture and diversity, the arts, and environmental causes in the U.S. and around the world.



My Pay

Dialysis Patient Citizens

Dialysis Patient Citizens (DPC) was founded to provide a strong, united voice in advocating for dialysis patients and those who suffer from kidney disease.

Since its founding in 2004, DPC has attracted more than 23,000 members nationwide and continues to grow. Your contribution will help continue DPC’s mission to elevate the patient’s voice with elected officials and improve dialysis patients’ quality of life through education and advocacy

Contributions to DPC are not tax-deductible.

DaVita Political Action Committee

DaVita Political Action Committee (DaPAC) contributes to federal and state candidates of any party who share a commitment to quality kidney care. DaPAC is not associated with any one candidate, campaign or party.

Contributions to DaPAC are limited, voluntary and non-tax-deductible. By law, DaPAC may only solicit support from members of the DaPAC Restricted Class, which includes FAs, managers, directors, VPs and other teammates with supervisory authority over salaried personnel. The maximum annual contribution is \$5,000 per year. For more information, visit: DaVitaAdvocacy.com.

You can choose to initiate, change or stop your donations any time after your benefits start. Find more details by clicking the “DaPAC and Other Village Initiatives” tile on DaVitaRewards.com.





Achieving my social and emotional well-being goals.



My Vitality

FAMILY RESOURCES



Little Star

As a family-friendly Village, we are excited to offer the Little Star gift providing financial support for DaVita parents to help them spend more time with their new little ones.

Parents who are managers and below, and meet the eligibility requirements for the program, can choose the Little Star gift of \$2,500 or the additional paid parental leave to celebrate the birth of a child(ren) or placement of an adopted child(ren) in the home.

This time away from work can be taken in one-week increments during the first year of your child's life/placement, with manager approval.

Adoption Assistance

Once an adoption is final, DaVita will reimburse 100% of eligible adoption expenses, up to \$5,000 for each child. Eligible expenses include adoption agency fees and placement fees. All full-time teammates are eligible for adoption assistance the first of the month following or coinciding with one month of continuous employment. For more information on adoption assistance, contact The Teammate Support Center at 1-877-7-DAVITA (1-877-732-8482).

Milk Stork

The first and only breast milk delivery service for business-traveling moms paid for by DaVita. It provides refrigerated, express shipping or easy toting of breast milk. Learn more at milkstork.com/DaVita.



Healthy Pregnancies/Healthy Babies

Cigna-enrolled expecting moms and eligible spouses/domestic partners who enroll in this program during the first trimester receive \$300 upon program completion. If you enroll during the second trimester, you get \$150 upon program completion.

Am I eligible?

All full-time teammates are eligible for adoption assistance the first of the month following or coinciding with one month of continuous employment.

Eligibility for Little Star is the first of the month following one month of employment for both full-time and part-time teammates. For more information, visit the Family Resources page on DaVitaRewards.com.



My Vitality

Bright Horizons

College Coach®: Get guidance on the college admissions process—including essay review and financial aid—through live webinars, personalized one-on-one sessions and online resources. You also have access to tutoring, SAT preparation and more.

Bright Horizons Special Needs: Expert guidance to handle bullying, setting screen time limits, and much more. Get support for children with ADHD, autism and those having difficulty in school.

Back-up Care (Child and Elder): Care for when your regularly scheduled care is unavailable when you need to be at work. Back-up care includes center-based and in-home options. Teammates receive 10 days per calendar year, free of charge. And, teammates with new babies receive 10 additional days to be used during the child's first year—that's 20 days!

Bright Horizons Childcare Centers: Teammates receive preferred enrollment in addition to 20% subsidy at Bright Horizons-owned centers and 10% discounts at partner centers. Reach out to Bright Horizons to determine daycare center availability at 1-877-242-2737 or go to backup.brighthouse.com.

Additional Family Support: Support for parents with children in school, includes discounts for tutoring and Learning Pods which help families find educators who can guide in-home learning for small groups or one child. Additionally, DaVita pays for a Sittercity® subscription for all teammates to access a database of nannies, housekeepers, pet sitters, dog groomers and more.



Am I eligible?

All teammates are eligible for Bright Horizons.

Visit clients.brighthouse.com/davita to access all your Bright Horizon benefits. Employer Username: DaVita Password: **davitacares**.



TEAMMATE ASSISTANCE PROGRAM

The new Teammate Assistance Program (TAP), administered by CuraLinc, will offer teammates and their household members a robust network of licensed counselors and professional services who can help them reach their goals and tackle life's challenges.

When treatment is needed beyond the TAP, providers will assist in coordination of care with your health plan. Consultation and referrals available to you include:

- **In-the-moment support with a licensed counselor**, who can offer 24/7 assistance with work-related pressures, stress, anxiety, relationship stressors and other concerns.
- **Monday-Friday text therapy** with a licensed counselor for up to 10 weeks through Textcoach®.
- **Live chat with a licensed counselor** via the eConnect® mobile app.
- **10 fully-covered sessions** with a licensed counselor per issue.
- **Onsite critical incidence support.**
- Self-guided program, **Animo**, to help strengthen health and overall well-being.
- **30-minute legal consultations** with a local attorney per issue, by phone or in person.
- **Financial consultations and planning.**

TAP is a completely confidential service (provided by CuraLinc). Trained, licensed counselors are just a phone call or click away. To reach an TAP counselor, simply call 1-833-455-9355 anytime (24 hours a day, seven days a week), or log in to TeammateAssistanceProgram.com and enter your employer ID: **davita**.

Am I eligible?

Yes. All teammates and their household members are eligible for TAP, regardless of insurance provider.





My Vitality

HEADSPACE

Headspace is an app that can make every day a little bit better. Through simple exercises that take just a few minutes, learn the life-changing skills of meditation and mindfulness to help you and your family feel happy, stress less and sleep soundly. Think of it like a gym membership for the mind.

Join in four steps.

1. Visit DaVita's join page at work.headspace.com/davita/member-enroll.
2. Login
 - a. New members will need to create a Headspace account.
 - b. If you already have an account, navigate to "Log-in" and enter your existing Headspace credentials.
3. Verify
 - a. Verify your account through your DaVita email.
 - b. Check your teammate email to complete verification.
4. Finish by downloading the Headspace app and enjoy.
 - a. If you had an existing paid membership, payments through Headspace are automatically paused.
 - b. Payments through a third party need to be manually paused.
 - c. Questions? Visit the Help Center or email teamsupport@headspace.com for instructions.

Am I eligible?

All teammates are eligible for Headspace.



Eligibility & Dependent Eligibility

DAVITA REWARDS
Connect to what matters

Eligibility

Eligibility

DaVita offers benefits to full- and part-time teammates.

- Full-time teammates are those regularly scheduled to work at least 30 hours per week.
- Part-time teammates are those regularly scheduled to work 24–29 hours per week. Part-time teammates are eligible for all benefits except medical and disability.

You can enroll or change your benefits when you join DaVita, have an employment status change, qualified life event or annually during open enrollment.

Benefits Start Date

As a new hire, if you meet the eligibility requirements, you will be eligible for benefits on the first of the month following one month of employment. Note: Teammates in Hawaii will not follow this rule and will be eligible for benefits on the first of the month following active employment status start date, plus four weeks.

As a rehire, your benefits start date depends on how long you were away from DaVita.

- If you are rehired within 90 days, your previous benefits will be reinstated your first day back to work.
- If you are rehired within 90 days but in a different year, you will need to make new benefit elections, and they will start on your first day back to work or the default election rules will apply. Default elections are options that are automatically assigned to you if you don't enroll. The default election may not satisfy your and your family's needs.
- If you are rehired after 90 days, your benefits start date will follow the new hire rule above.

- If you return from a leave after more than 12 months, your benefits start date will follow the new hire rule above.

As an acquired teammate, your benefits start date is determined by the terms and conditions of the agreement and will be:

- The date you are acquired by DaVita; or
- The day after the transition services agreement ends.

Once final, your People Services representative will let you know your benefits effective date. You are given credit for your service at the acquired company, so most benefits based on length of service, like PTO, will be based on your hire date with the acquired company.

Employment Status Change

As a transfer from per diem to full- or part-time, your benefits start date will be on the date of your transfer or after you have met the new hire benefit eligibility requirements above, whichever is later.

As a transfer from full- or part-time to per diem, your benefits will end at the end of the month in which you transfer. If you transfer back to a benefit-eligible status within 90 days, your benefits will be reinstated according to the rehire rules above.

Qualified Life Event

Life events must be reported within 31 days of the event. Benefit changes will be effective on the date of the life event. Retroactive benefit deductions may be applied depending on when the status change is processed. There will be no changes to DaVita-provided Health Savings Account (HSA) funding as a result of a status change.

Eligibility

Qualified life events are:

- Birth or adoption of a child
- Change in child's dependent status
- Death of your spouse/domestic partner or dependent child
- Marriage or divorce or change in domestic partner status

Any time after you have a qualified life event change that may affect your benefits, go to DaVitaRewards.com to make the appropriate benefit changes.

Dependent Eligibility

A dependent is defined as your legal spouse, common law or equivalent, or domestic partner (additional documentation will be required) and your children.

Your spouse – All marriages will be recognized for benefit purposes if they are valid under the laws of the jurisdiction in which they were entered.

Your domestic partner – Domestic partners are eligible for medical, dental, vision and voluntary life insurance coverage; however, due to IRS rules, their expenses may not be reimbursed by a Flexible Spending Account or Health Savings Account. Teammates and their domestic partners need to complete an Affidavit of Domestic Partnership during enrollment. (See the “Domestic Partner Coverage, Imputed Income and Your Taxes,” content below.)

Your children – Children, including step- and adopted children, a domestic partner's dependent children, and children whose legal guardianship has been granted to you by the state, are eligible for

Eligibility for newly enrolled dependents will be verified

The Dependent Verification Center will send you a request for supporting documentation once you enroll your dependent(s) online. Please wait to submit your documentation until it has been requested. If verification is not provided within 45 days of enrollment, coverage for the new dependent(s) will be terminated on the last day of the month following the verification deadline. *Note: Spouse/domestic partner eligibility is verified every two years.*

Questions?

Contact the Dependent Verification Center at 1-855-614-0188, select Health and Insurance > Healthcare > Dependent Verification.

Documents can be submitted in one of three ways:

1. **Mail:** Dependent Verification Center
P.O. Box 7114, Rantoul, IL 61866-7114 (Allow 21 days from date documentation is mailed for documentation to be reviewed and a response to be received via U.S. mail.)
2. **Secure Fax:** 1-877-965-9555
3. **Online upload:** Follow the link in the “Action Needed” message center on DaVitaRewards.com

Check verification status:

yourdependentverification.com/plan-smart-info.

medical, dental, vision and voluntary life insurance coverage; however, their expenses may or may not be reimbursed by a Flexible Spending Account or Health Savings Account (see [page 47-50](#) for details). Dependent children can be up to age 26. Spouses and children of the adult child are not eligible for coverage. If you have a disabled dependent over the age of 26, please call the Benefits Support Team at 1-855-614-0188.

If you, your spouse/domestic partner or child works at DaVita

Anyone who is enrolled as a teammate will not be considered as a dependent. No one may be considered as a dependent of more than one teammate.

Domestic Partner definition:

A domestic partnership is defined as two people who both meet the following criteria:

- Are at least 18 years of age, are not prohibited from legal marriage and do not have any other domestic partner, spouse or spouse equivalent.
- Are financially interdependent on each other.
- Have resided together as a cohabiting couple for a period of at least one year.

Domestic Partnership requirements:

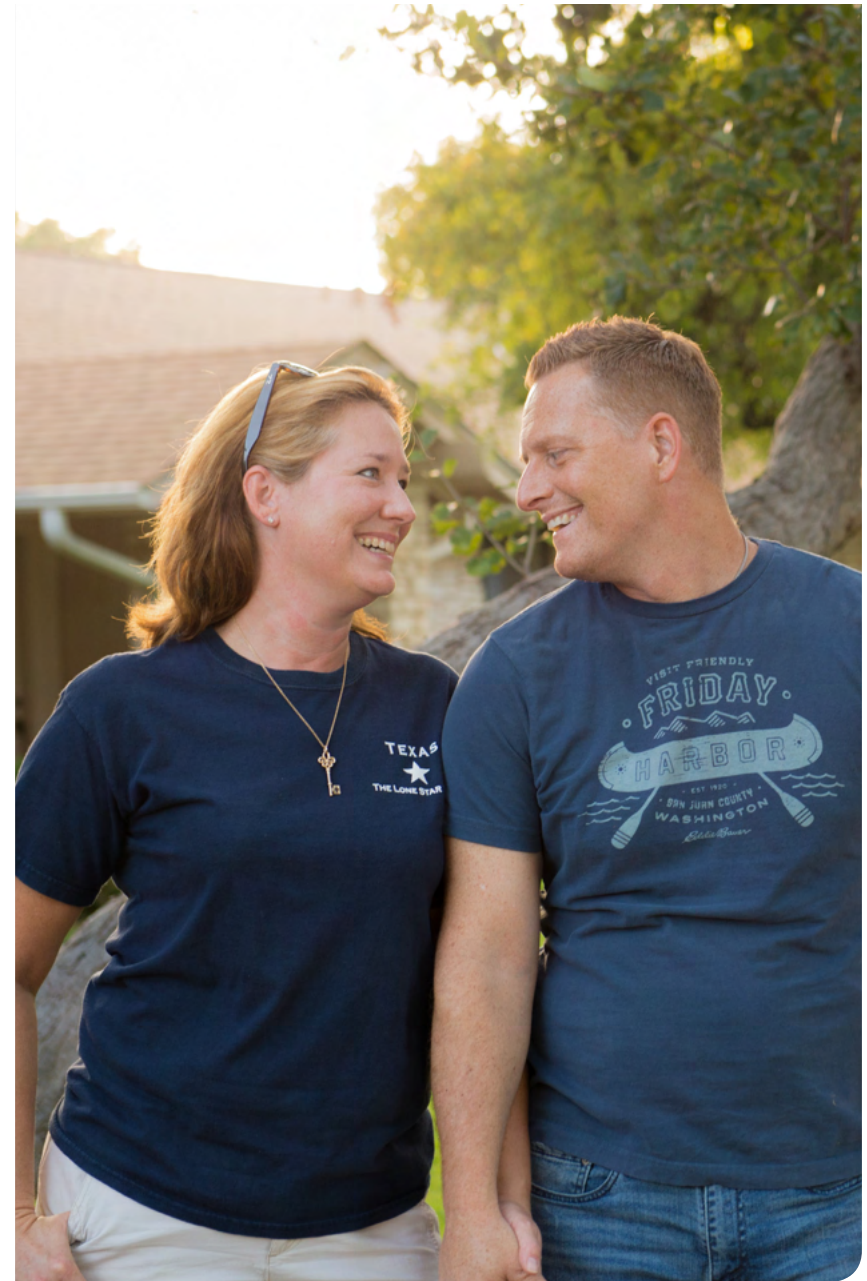
1. Have signed an affidavit;
2. Have not signed an affidavit or declaration with any other person within 12 months prior to designating the current partner; and
3. Have registered as a domestic partner or civil union partner, if state provides for such registration.

Domestic Partner Coverage

According to IRS regulations, the “value of the coverage” of domestic partner benefits is generally taxable. The value of the coverage is the total premium cost attributable to your domestic partner. You cannot pay for this coverage on a pre-tax basis under the Flexible Benefit Plan. Each bi-weekly pay period, DaVita will include the value of this coverage in your gross income subject to applicable taxes on your paycheck.

At year's end, this coverage will be reported on your W-2. Income tax withholding rates will be reported in accordance with your W-4. If you have questions about your individual tax situation, consult a tax professional. In addition to the larger payroll deduction resulting from increasing your level of coverage, your net take-home pay will be further reduced by the additional withholding.

Before enrolling, consider this additional cost when comparing the cost of your domestic partner and children enrolling in coverage at their own places of employment with the cost of enrolling in the DaVita Plan.



How to Enroll & Support

Enrolling in your benefits

Teammates

- Go to DaVitaRewards.com.
- Log in with your DaVita username and password.
- You can make your benefit elections immediately following your hire date.
- Benefits will be effective on the first of the month following, or coinciding with, one month of continuous employment.

Acquired Teammates

- Go to digital.alight.com/DaVita.
- Click “Are you a New User?”
- Complete requested personal information.
- Create a username and password and set up security questions.
- People Services will let you know when you can log in and make benefit elections.

If you cannot log in, contact the Benefits Support Team at 1-855-614-0188.

Benefits Support Team

Need help choosing and using your DaVita Rewards? Contact the Benefits Support Team.

The Benefits Support Team is available to help you understand, enroll in and use your DaVita Rewards. Answers to your questions are just a phone call away at 1-855-614-0188, Monday through Friday from 7 a.m. to 7 p.m. CT. Or, you can live chat a member of the Benefits Support Team at DaVitaRewards.com.

Health Pro Advocates

Personal benefit experts, at your service Health Pro Advocates can answer your health insurance and other benefits-related questions, and offer family, financial and educational resources. And it doesn't stop there! Advocates can save you time by helping to resolve health care claims and billing issues. They are also available to answer questions, help with a prescription or a diagnosis—and remove barriers to care. You and your family members can speak with a Health Pro Advocate at 1-855-614-0188, Monday through Friday from 7 a.m. to 7 p.m. CT.

In addition to making benefit elections on DaVitaRewards.com, you can:

- Access Vitality Points
- Access personalized callout messages relevant to your health
- Visit the Village Market Place for great discounts
- Access your account to see your 401(k) balance and deferral rate
- Access Family Resources
- Grant your spouse/domestic partner access to his/her DaVita benefits
- View your current PTO balance, access your paycheck and explore your DaVita Rewards statement
- Print your benefit summary
- View your HSA balance and access your account
- Contribute to Village Programs

Acquired Teammate's Benefits

Eligibility

As an acquired teammate, your benefits start date is determined by the terms and conditions of the agreement and will be:

- The date you are acquired by DaVita; or
- The day after the transition services agreement ends.

Once final, your People Services representative will let you know your benefits effective date. You are given credit for your service at the acquired company, so any benefits based on length of service, like PTO, will be based on your hire date with the acquired company.

Enrolling in Your Benefits

- Go to digital.alight.com/DaVita.
- Click "Are you a New User?"
- Complete requested personal information.
- Create a username and password and set up security questions.
- People Services will let you know when you can log in and make benefit elections.

If you cannot log in, contact the Benefits Support Team at 1-855-614-0188.

To file an STD or LTD claim for a pre-existing condition during your first year with DaVita, you must have had STD or LTD with your previous employer.

401(k)

Reference [page 27](#) for more information.

The DaVita Retirement Savings Plan offers a convenient, pre-tax way to save for retirement through pre-tax and/or Roth contributions.

The 401(k) auto-enrollment feature helps by enrolling you at a 6% pre-tax deferral rate. The default auto-increase feature helps you save more over time by increasing your deferral rate by 1% each January up to 10%. Participants may opt out of this feature at any time. Information about the plan and auto-enrollment will be sent to your home address shortly after your start date.

Paid Time Off

Acquired teammates your maximum PTO balance is based on your original hire date with your current employer or DaVita's original hire date or the adjusted hire date (whichever is earlier for dual teammates or rehires).

ESPP Eligibility for Acquired Teammates

Acquired Between	Eligible to Enroll in ESPP	Purchase Right Period Begin Date
Oct. 2 – April 1	June	July 1
April 2 – Oct. 1	December	Jan. 1

Medical Plan Options

How does a PPO work?

For in-network eligible services:

- Before most benefits are paid by the plan, you must meet your deductible (unless coverage is mandated by the Affordable Care Act); this is the annual amount you pay before most benefits can be paid by the plan. Each of DaVita's PPO plans has a different deductible amount. Note: With the Cigna PPO Basic and Mid plans, you will pay only a copay for primary care (\$25) and specialty care visits (\$40)—meeting the deductible first is not required. Copays apply to only in-office services and do not apply to your deductible.
- Once you've met your deductible, benefits kick in and you pay coinsurance; you are responsible for 20% of your bill, and the insurance company pays the remaining 80%. All of DaVita's Cigna plans have the same coinsurance.
- After you meet the out-of-pocket maximum, the plan will pay 100% of your expenses. The out-of-pocket maximum is in place to protect you from catastrophic medical expenses by limiting the amount you will pay in any plan year. Copays will apply to your out-of-pocket maximum.

How does an HMO work?

Depending on where you live, you may have access to a regional HMO plan. For Kaiser and Empire BCBS EPO, only visits to providers within the network are covered. All visits, prescriptions, referrals and other care must be approved by the plan in order to be covered.

How does a High Deductible Health Plan (HDHP) work?

The Cigna HDHP, coupled with an interest-bearing Health Savings Account (HSA), gives you a medical plan that provides you more control over how your health care dollars are spent. For more information, review the Key Points About Health Savings Accounts found on DaVitaRewards.com under Health & Insurance > Learn About.

The HDHP works like any other PPO, with a deductible, coinsurance and out-of-pocket maximum. What sets this plan apart is the HSA.

Benefits of the HSA

DaVita contributes to your HSA:

DaVita's contribution will generally be made around the 15th of the month in which your benefits start. This amount is prorated based on your benefits start date.

- Teammate Only: \$600
- Teammate + Spouse: \$900
- Teammate + Child(ren): \$900
- Family: \$1,200

You have the option of contributing your own money, up to the IRS limit, through pre-tax payroll deductions.

After you open your account, you will receive a welcome kit and a debit card that can be used to pay for eligible expenses.

Unused amounts automatically roll over for use in future years and go with you should you leave the Village

Contributions are securely held in trust for your use and can grow through simple interest or be transferred to an HSA investment account once your account reaches \$1,000.

Money in your HSA can be used for all the same expenses as a Health Care Flexible Spending Account (FSA). It can also be used for these additional expenses:

- Individual long-term care

- COBRA insurance coverage
- Health plan coverage while receiving unemployment insurance and, if you're 65 or older, any health insurance except a Medicare supplemental policy

You can increase, decrease or drop your payroll deductions at any time during the year by going to [DaVitaRewards.com](https://www.DaVitaRewards.com) and selecting the "Change Your HSA Contribution" tile on the home page.

HSA limitations

You are NOT eligible to contribute, or receive contributions on your behalf, if you are enrolled in any coverage that is not a High-Deductible Health Plan (HDHP), for example, a spouse's non-HDHP plan, Medicare, or if you can be claimed as another person's tax dependent.

Funds cannot be used for expenses incurred before your HSA was opened.

Due to IRS regulations, funds cannot be used for a domestic partner or domestic partner's children (unless they otherwise meet the definition of dependent under IRS guidance). As a result, DaVita will not make a contribution for these dependents.

If you are eligible to contribute to an HSA and you have elected to participate in the Health Care FSA, your FSA money is limited to use for dental and vision expenses until your medical deductible has been met.

Medicare-Eligible Teammates:

Participation in any type of Medicare plan makes you ineligible to contribute or receive contributions to an HSA; however, you can continue to use your HSA for qualified medical expenses tax-free and penalty-free for as long as you have funds in your HSA. At age 65, withdrawals made for other purposes are allowable and may be subject to income tax.

FSA

Contributing to a Flexible Spending Account (FSA) allows you to pay for certain out-of-pocket health care and dependent care expenses with tax-free dollars. You can choose to contribute to the Health Care Spending Account, the Dependent Care Spending Account, or both through pre-tax payroll deduction. Participation is voluntary. Enrollment is for the entire calendar year and cannot be changed unless you have a qualifying life event.

Use It or Lose It

Plan your contributions to the spending accounts carefully, and deposit only the money you expect to use. You may carry over up to \$550 of unused health care account contributions into the next plan year. Any unused balance in your dependent care account is forfeited at the end of each calendar year.

Your Health Care Flexible Spending Account options

Contribute pre-tax dollars up to the IRS limits per plan year or waive participation.

When you have a qualified expense, file for reimbursement from Your Spending Account (YSA) by submitting your receipt and a claim form. You can also pay for qualified health care expenses with your FSA debit card. No tax is paid on the money deposited or withdrawn from the account(s).

Manage your account at [DaVitaRewards.com > Other Benefits > Save With Spending Accounts > Your Spending Account > Manage Your Account](#) to check eligible expenses.

Take Note

If you choose the HDHP with HSA for your medical plan coverage and you also elect a Health Care FSA, that FSA account will be limited to use for dental and vision expenses until your HDHP deductible is met.

Most expenses that are eligible for reimbursement through a Health Care FSA are also eligible through your HSA.

Health Savings Account and Flexible Spending Account

Health Care Flexible Spending Account

You may use this account to pay for:

- Deductibles, coinsurance and copayments for the medical, dental and vision plans
- Prescription drug copayments for both retail and mail order fills
- Over-the-counter drugs for which you have a prescription
- Expenses for eye exams, glasses and contacts in excess of eligible vision plan benefits
- Hearing exams and hearing aids
- Orthodontic services not covered by dental plan benefits
- Expenses that exceed medical or dental plan limits

Dependent Care Spending Account

You may use this account to pay for:

- Child (under 13 years old) or adult day care that complies with state and local regulations
- Babysitting during the day, either inside or outside your home
- Housekeeper whose duties include dependent care
- Preschool
- Day camp
- Care for an elderly or disabled dependent who spends at least eight hours each day in your home
- A relative who cares for dependents if the relative is age 19 or older and not your dependent for income tax purposes
- Your Dependent Care Flexible Spending Account options contribute pre-tax dollars up to the IRS limits per plan year or waive participation
- When you incur an eligible dependent care expense, you can file a claim via YSA. If you have paid for future services, they will be eligible for reimbursement once services have been provided.
- Contribution limitations may apply based on compliance with IRS regulations.
- Participants can submit claims for eligible plan year expenses incurred after they leave the Village.
- Your dependent care contributions will be combined with your Bright Horizons back-up care and daycare discount usage for reporting on your W-2.
- If your dependent care contributions and the value of your Bright Horizons services exceed \$5,000, you may be taxed on the excess at the end of the year.

Health Savings Account and Flexible Spending Account

Consumer Account	HSA	FSA Health Care & Dependent Care	Limited Purpose Health Care FSA
Reimbursement	You can use your HSA debit card or checks to pay for qualified expenses	You must submit receipts for eligible expenses incurred in 2020 by March 31, 2021	You must submit receipts for eligible expenses incurred in 2020 by March 31, 2021
Examples of Eligible Expenses	<ul style="list-style-type: none"> Medical plan deductible Certain over-the-counter drugs that you have a prescription for Out-of-pocket expenses for dental and vision care 	Health care <ul style="list-style-type: none"> Medical deductible Dental and vision costs Dependent day care Child or adult day care Day camp 	Out-of-pocket expenses for dental and vision care
DaVita Funding*	Teammate Only: \$600 Teammate + Spouse: \$900 Teammate + Child(ren): \$900 Family: \$1,200 <i>(Note: Combined employer and teammate contributions cannot exceed IRS 2021 limits.) DaVita's contribution will generally be made the third Thursday of the month following your benefits start date.</i>	N/A	N/A
Annual IRS Contribution Limit	The maximum annual contributions allowed by the IRS for 2021 are: \$3,600 Teammate/\$7,200 Family	\$2,750 Health Care Flexible Spending Account \$5,000 Dependent Care Spending Account	\$2,750
Catch-Up Contribution	If you will be 55 or older in 2021, you can contribute \$1,000 above the IRS maximum.	N/A	N/A
Roll Over to Next Year	At the end of the year, leftover amounts will roll over.	"Use it or lose it" rule applies to unreimbursed contributions over \$550 for health care only.	"Use it or lose it" rule applies to unreimbursed contributions over \$550.
Portability	If you leave DaVita, your account balance will go with you.	Coverage can continue for health care only, if COBRA elected and paid. If COBRA not elected, eligible health care expenses must be incurred prior to leaving DaVita; eligible dependent care expenses can be incurred after leaving but in the plan year.	Coverage can continue if COBRA elected and paid. If COBRA not elected, eligible health care expenses must be incurred prior to leaving DaVita,

Health Care Dictionary

Annual deductible is the amount of money you pay out of pocket each year before your plan starts paying benefits.

Coinsurance is the percentage of the cost of health care services you pay, up to the annual out-of-pocket maximum.

Copay is the set dollar amount you pay for certain health care services or prescriptions.

Teammate Assistance Program (TAP) provides assessment, referral or counseling to help make you happier, healthier and more productive. EAP is paid for by DaVita and is available to all teammates, their dependents and household members.

FSA (Flexible Spending Account) contributions allow you to pay for certain out-of-pocket health care and dependent day care expenses with tax-free dollars.

HDHP (High-Deductible Health Plan) offers lower bi-weekly premium contributions, but a higher deductible and out-of-pocket maximum. DaVita helps offset the higher deductible by contributing money to a Health Savings Account (HSA) on your behalf.

HMO (Health Maintenance Organization) provides care for a flat monthly rate and copayment, with no deductibles; however, only visits to providers within the HMO network are covered. All visits, prescriptions, referrals and other care must be approved by the HMO in order to be covered.

HSA (Health Savings Account) contributions are allowed, in most cases, when participating in a High-Deductible Health Plan (HDHP). Money in your HSA can be used to pay for the same health care expenses that are allowed under a Health Care Flexible Spending Account.

In-network means receiving care from a provider who has contracted with a health plan to deliver care at a discounted fee.

Maintenance drugs are typically prescribed for continuing periods, for a chronic condition or one that may take a long time to stabilize.

OAP (Open Access Plus) network is a national network of physicians and facilities contracted to provide services under DaVita's Cigna medical plans.

Out-of-network means receiving care from a provider who has not contracted with the health plan to provide services at a discounted fee.

OOP (Out-of-Pocket) Maximum is the most you'll pay for eligible medical expenses during the year, typically in addition to copays and deductibles (unless you are enrolled in the High-Deductible Health Plan). Once you reach this limit, the plan will cover most eligible services at 100%.

PCP (Primary Care Physician) is a doctor who practices in the field of family medicine, general practice, internal medicine and pediatrics.

PPO (Preferred Provider Organization) uses a deductible and coinsurance structure, with an extensive network, and does not require you to select a PCP. If you go to an in-network provider, you will have a lower deductible and higher level of coverage.

Health Care Dictionary

Specialists are doctors who practice in any field of medicine other than those listed under primary care physician.

AD&D - Accidental Death and Dismemberment

EPO - Exclusive Provider Organization

FSA - Flexible Spending Account

HDHP - High-Deductible Health Plan

HMO - Health Maintenance Organization

HSA - Health Savings Account

LTD - Long-Term Disability

OOP - Out-of-Pocket

PPO - Preferred Provider Organization

STD - Short-Term Disability

Contact info

Aetna

aetna.com

1-877-238-6200

Blue Cross Blue Shield of Alabama

1-800-292-8868

Cigna

cigna.com or call 1-855-239-3551

myCigna.com for Cigna members

Cigna.com/rx90network

CuraLinc

TeammateAssistanceProgram.com

1-833-455-9355

Kaiser Member Services

California: 1-800-464-4000

Colorado: 1-800-632-9700

Mid Atlantic: 1-800-777-7902

Georgia: 1-888-865-5813

Hawaii: 1-800-966-5955

Northwest: 1-800-813-2000

Washington (Vancouver / Longview area): 1-800-813-2000

Washington (Outside Vancouver): 1-888-901-4636

The Benefits Support Team

1-855-614-0188, Monday through Friday from 7 a.m. to 7 p.m. CT.

Sedgwick

Leave of Absence: 1-877-209-8401

Voya

Connect to Your 401(k) Online: DaVitaRewards.com

Call: 1-844-DVA-401K (1-844-382-4015)

DAVITA REWARDS

Connect to what matters

This benefits guide is an overview of the benefits provided by DaVita for the 2021 calendar year. It is not a summary plan description. If a question arises about the nature and extent of your benefits under the plans and policies, or if there is a conflict between the information in this guide and the plans and policies, the Summary Plan Descriptions and General Provisions Document will govern. Please note that the benefits in this guide are subject to change at any time. It does not represent a contractual obligation on the part of DaVita.

©2021 DaVita Inc.

