

Our Journey Forward

Your Path to Prime Healthcare

March 24, 2025

Thank you all for your continued support and hard work as we wrap up another exciting week. This week, you will find more information about Benefits, Employee Health Screenings, exciting award recognition, and your respective websites.

Awards and Recognition:

Congratulations to [Dr. Prem Reddy](#), Founder, Chairman, and CEO, Prime Healthcare, [Dr. Sunny Bhatia](#), President and CMO, Prime Healthcare, and [Dr. Kavitha Bhatia](#), President and Chair, Prime Healthcare Foundation & Chief Medical Officer of Strategy, Prime Healthcare for their recognition from Becker's Healthcare as 2025 Great Leaders in Healthcare. This prestigious list highlights leaders who are driving innovation, fostering inclusivity and expanding access to care. Becker's Healthcare is proud to recognize these changemakers, whose efforts are making a lasting impact on the future of healthcare.



Health Plan Benefits:

Prime Healthcare is honored to care for you and your families. We are in the process of expanding our network of providers in Illinois and welcome your referrals and recommendations. We also want to share information regarding the processes for requesting authorizations and referrals to ensure all your care is coordinated.

We hope you find the below information helpful; including step by step instructions for how to refer physicians to the Prime network and how to connect with the EHP team. Additional information can be found online at <https://ehp.primehealthcare.com>.

Physicians Joining Our Network

We are honored to provide care for over 50,000 Prime Healthcare associates across the United States and our Prime Tier 1 network already has over 1,000 providers in Illinois. We are continuing to expand our network in Illinois and welcome physicians to join.

The process for physicians to join is simple—physicians can start by filling out a packet that is included on page 3 with complete instructions. Leaders or associates are welcome to share this form with physicians interested in joining or refer to this link: <https://ehp.primehealthcare.com/join-our-network/>.

Alternatively, all are welcome to send an email referring a physician to the EHP team at EHPprovidercontracts@primehealthcare.com. Step by step instructions are provided in the attached EHP Contract Packet for physicians to be able to quickly and seamlessly become part of the Prime Tier 1 network.

Members Requesting Authorization

To ensure care coordination and quality, referrals and prior authorizations are needed for certain medical services and Tier 2 (BCBS) services. Physicians (PCPs and Specialists) must submit requests and an efficient online system has been created at <https://ehp.primehealthcare.com>. These requirements are minimal and almost immediate when Members receive care from Prime physicians and facilities. Prime has made all approvals faster and easier than ever to ensure that associates receive care in the quickest way possible. Please visit the page for more information and instructions, which includes a link to download a Prior Authorization Request Form: <https://ehp.primehealthcare.com/requesting-authorization/>.

Provider Directory

To check if a physician is already enrolled in the Tier 1 network, there are two online tools that act as helpful resources:

- Option #1: For a listing of all Primary care and Specialty care go to <https://ehp.primehealthcare.com/provider-directory-files-tier-1/> and select the corresponding state to find directories of physicians in our network
- Option #2: For a lookup tool, <https://ehp.primehealthcare.com/find-a-provider/> provides a simple search option by entering a name, specialty, and zip code

To search if a physician is enrolled within the Tier 2 (BCBS) network of providers:

- Go to <https://provider.bcbs.com/>
- Follow the easy steps to find the type of physician you want by selecting the 'Location'
- Enter the plan prefix "JPH", then click 'Continue'

For any Prime Benefits related questions not answered in this section, we are happy to assist. Please reach out to EHPbenefits@primehealthcare.com to connect with a dedicated team member.



Prime Healthcare

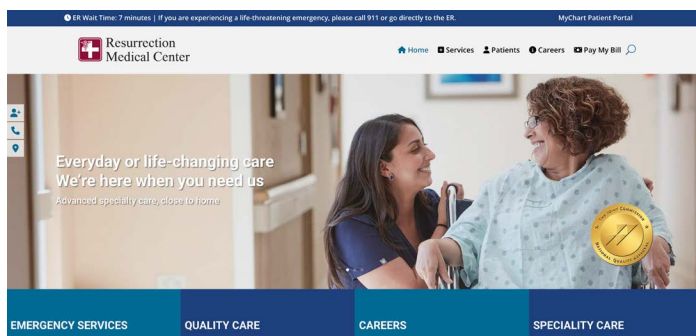
Saving hospitals. Saving jobs. Saving lives.

Employee Health:

As a reminder and as part of your onboarding at Prime Healthcare, all associates must complete the online basic health screening form. Click the link to access the [Associate Health Assessment](#). After submitting the online form, you are required to schedule an in-person Employee Health appointment for drug and vision screenings to finalize your pre-employment health screening. Click [here](#) to make your appointment. If you have not yet completed these steps, please reach out to your local employee health office or reach out to IllinoisEH@primehealthcare.com.

Websites:

We've received questions and comments about website listings this past week, and wanted to provide information that hopefully answers many of your questions. First, all websites for each of the eight hospitals and medical group have been created and have been live since Day 1 (March 1, 2025). From there, it does take web browsers time to index new listings – essentially, the search engine has to learn and verify a new listing is in place before it recognizes it and pulls it to the top of a search. We are in that phase, which is why some old Ascension listings still may appear and redirect to Prime Healthcare's "Our Locations" page. We've deployed a handful of strategies to expedite this process, and hope it will be resolved soon. We also continue to build out and add to hospital websites as applicable, which further helps move this along.



Holy Family Medical Center
holyfamilymedicalcenter.com

Mercy Medical Center
mercymedcenter.com

Resurrection Medical Center
resurrectionmedicalcenter.com

Saint Francis Hospital
saintfrancisevanston.org

Saint Joseph Hospital - Elgin
saintjosephelgin.com

Saint Joseph Medical Center - Joliet
saintjosephmedicalcenter.com

Saint Mary of Nazareth Hospital
saintmaryofnazarethhospital.com

St. Mary's Hospital - Kankakee
stmaryshospitalkankakee.org

Prime Healthcare Illinois Medical Group
primeilmedicalgroup.com



Paid Time Off (PTO)

When will we see the missing PTO hours in our PTO bank?

The March 21 check reflected the PTO balances that carried over.

How do we accrue our PTO hours?

PTO hours accrue every pay period and will appear on your payroll stub.

Where do we put our request for future PTO?

Future PTO requests can be shared with your supervisor and HR.

For any additional questions, please contact your local HR department:



Holy Family Medical Center
HFIL-HR@primehealthcare.com

Home Care and Hospice, Senior Living
Contact the HR Dept. closest to you

Mercy Medical Center
MMIL-HR@primehealthcare.com

Prime Healthcare Illinois Medical Group
PHILMG-HR@primehealthcare.com

Resurrection Medical Center
RMIL-HR@primehealthcare.com

Saint Francis Hospital
SFIL-HR@primehealthcare.com

Saint Joseph Hospital - Elgin
SJEIL-HR@primehealthcare.com

Saint Joseph Medical Center - Joliet
SJJIL-HR@primehealthcare.com

Saint Mary of Nazareth Hospital
SMNIL-HR@primehealthcare.com

St. Mary's Hospital - Kankakee
SMKIL-HR@primehealthcare.com

Missed out on the Town Hall Meetings?

You can now view one of the Town Halls available on our SharePoint [here](#).



Prime Healthcare

Saving hospitals. Saving jobs. Saving lives.

Dear Provider,

Prime Healthcare considers it an honor and tremendous responsibility to have been selected by Ascension Health as the steward of its Illinois facilities, employees, and patients, and its legacy of service to the community.

Prime Healthcare is pleased to invite you to participate in our Tier 1 Network of medical providers so our members can continue receiving care from you and your office staff.

Prime Healthcare provides a self-insured medical plan to Prime Healthcare employees who have chosen to receive medical care from our affiliated physicians and community hospitals across the United States. We expect that many of your patients and their families will be joining Prime's health plan upon completion of the sale early next year. This plan delivers outstanding value, featuring reduced out-of-pocket costs, a \$0 deductible for Tier 1 usage, and significantly lower premiums compared to other plans.

To participate in our Tier 1 network, please return the following items:

- 1. Complete and sign the enclosed Provider Agreement:**
 - Page 1
 - a. Complete #2 with provider or group name (per your W-9)
 - b. Complete #3 with provider or group specialty
 - c. Complete #4 with address for notices
 - d. Complete #5 with claims payment address
 - Page 3 - Date, sign, print name, print title and fill Tax ID number
 - Page 4 - Complete Exhibit A
- 2. Enclose a current copy of your W-9, Professional Liability Insurance Certificate and State Medical License** (for all providers in the group)
- 3. Return all items via:**
 - Email EHPProviderContracts@primehealthcare.com; or
 - Fax 909-235-4405; or
 - Mail:
Prime Healthcare, Attn: EHP Contracting Department
3480 E. Guasti Rd., Ontario, California 91761

Benefits of Joining the Prime Healthcare Network

-“Fast-Track” privileges at Prime Healthcare’s award-winning hospitals.

-Claims processed in half the time of non-contracted physicians.

-Direct web-based access to **auto authorizations** for instant authorization of referrals. The PAS tool is easy to use, and we can connect your front office to a 10- minute training session.

We look forward to working with you! If you have questions about the enclosed information or participating in our Tier 1 Network, please email us at EHPProviderContracts@primehealthcare.com.





PROVIDER AGREEMENT

This Provider Agreement (this “Agreement”) is made and entered by and between Prime Healthcare Welfare Benefits Plan and Prime Healthcare Foundation Welfare Benefits Plan (collectively, the “Plan”), as well as the healthcare Provider listed below (“Provider”) on the following terms:

1. Effective Date: _____
2. Provider: _____
3. Provider is a (Specialty): _____ Licensed by the State of: _____
4. Address for Notice: _____
5. Address for Claims Payment: _____

Mail:

Keenan TPA
PO Box 2744
Torrance, CA 90509

Electronically:

Office Ally - Payor ID: KEE01
Payer ID: 95279

6. Applicable State Law and Forum: _____

COMPENSATION

7. Provider shall be reimbursed for authorized Covered Services rendered to Participants at one hundred percent (100%) of the current year Medicare Fee Schedule for Medicare Locality where the services are provided (minus applicable co-payments).

8. Medicare Part B Drugs shall be reimbursed at one hundred and six percent (106%) of the Average Sale Price (ASP); and ninety five percent (95%) of the Average Wholesale Price (AWP) for Not Otherwise Classifiable (NOC) Drugs. Unlisted procedures shall be submitted with the operative report and will be coded to the closest procedure. Procedures which cannot be coded will be reimbursed at thirty percent (30%) of the billed charges.

RECITALS

9. Prime Healthcare Services, Inc. and Prime Healthcare Foundation, Inc. (collectively, “Prime”) maintain the Plan for eligible employees (and their dependents) of its affiliates and subsidiaries (hereinafter, such eligible employees and family members shall be referred to as “Participants” or “Members”).



10. The Plan desires to contract with Provider to arrange for the provision of covered services to Participants and Provider desires to contract with the Plan to provide Covered Services to Participants.

NOW, THEREFORE, for and in consideration of the recitals and the covenants contained herein, the parties agree as follows:

11. Covered Services. Compensation to Provider under this Agreement shall be limited to reimbursement of the provision of those medically necessary health care services and items (“Covered Services”) that are described in the Plan’s Summary Plan Description (“SPD”). Provider agrees to furnish Covered Services to Participants enrolled in the Plan that are within Provider’s licensing and qualifications and consistent with accepted standards of medical practice and this Agreement. All referrals for ancillary services to a facility other than those approved by Prime must be authorized in advance. Prime and the Plan shall not be obligated to make payment under the terms of this Agreement for services that were not properly authorized, or services provided to a Participant who was not duly enrolled and covered on the date of service. It shall be the responsibility of Provider to confirm Participant coverage under the Plan.

12. Summary Plan Description; Internal Procedures. Provider shall comply with the Plan’s SPD and any internal procedures. The Plan or Prime may change the SPD or any internal procedures from time to time in their sole discretion and the current versions shall be available on the Prime Healthcare SharePoint site, from the local hospital Human Resources Department, and by emailing EHP@primehealthcare.com to request a copy. The Plan’s SPD and any internal procedures are incorporated herein and made a part of this Agreement for all purposes.

13. Provider Manual. Certain governing terms and conditions for this Agreement, including, but not limited to, Prior Authorization, Claims Submission and Payment, Participant Held Harmless, Term, Termination, Insurance and Indemnity, Dispute Resolution, and Confidentiality, apply to and must be complied with by both parties and are contained in the Provider Manual, which is incorporated by reference herein, and is available on the Prime Healthcare SharePoint site, from the local hospital Human Resources Department, and by emailing EHP@primehealthcare.com to request a copy.

14. Continuity of Care. Provider agrees to provide continuity of care services to existing patients for up to 90 days post-termination of this Agreement at the reimbursement rates set forth in this Agreement.

(THE REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK)



IN WITNESS, WHEREOF, the parties have executed this Agreement as of the Effective Date written above.

PLAN:

PRIME HEALTHCARE WELFARE
BENEFITS PLAN AND PRIME
FOUNDATION WELFARE BENEFITS
PLAN

Date: _____

By: _____

Print Name: _____

Print Title: _____

PROVIDER:

Date: _____

By: _____

Print Name: _____

Print Title: _____

Tax ID: _____

Please refer to and complete Exhibit A Provider and Location Roster

Executed documents and W-9 may be faxed to EHP Provider Contracts at (909) 235-4405, email to EHPprovidercontracts@primehealthcare.com or mailed to:

Prime Healthcare Management, Inc.
Attn: EHP Provider Contracts
3480 E. Guasti Road
Ontario, CA 91761

