Sometimes, to describe a benefit plan accurately, some technical terms must be used. This Glossary and Acronyms chapter contains brief definitions to help you understand the terms used throughout this book.

For more information on ... See Page ...

Glossary 11—2
Acronyms and Abbreviations 11—8
Glossary

Annual Pension Benefit
Amount of pension benefit provided under the plan formula.

Average Straight-Time Monthly Earnings
The average of your highest earnings for 3 years during the last 10 years just before you retire.

Beneficiary
The person, organization, or trust that you name to receive any life, pension plan, or savings program benefits if you die.

Birthing Center
An institution which is constituted, licensed, and operated in accordance with the laws of legally authorized agencies to furnish room and board, services of qualified nurses, and a certified nurse midwife to expectant mothers. One or more nurses must be on duty at all times. To qualify as a Birthing Center, an institution must:

- have available at all times, under an established agreement, the services of a physician;
- maintain daily medical records on all patients; and
- have agreements with hospitals that will accept patients requiring inpatient hospital care at once.

Child
For medical and dental coverage
- your own child,
- your legally adopted child (or an individual who is lawfully placed with you for legal adoption),
- a child of the person who is recognized under applicable law as your spouse (your stepchild who resides with you full-time in your home), or
- an eligible foster child (an individual who is lawfully placed with you by an authorized placement agency or by judgment, decree, or other order of any court of competent jurisdiction).

A child who is an alternate recipient under a Qualified Medical Child Support Order will be considered a “child” for purposes of eligibility for medical or dental coverage regardless of whether such individual otherwise meets the definition of a “child.” Such individual will be subject to the conditions of eligibility set forth in the definition of an eligible dependent.

COBRA
Consolidated Omnibus Budget Reconciliation Act of 1985; this federal law allows you and your eligible dependents to continue health care coverages under certain circumstances when coverage would otherwise end.

Coinsurance
The percentage of the charges you are required to pay for expenses covered under the plan.

Company
UT-Battelle, LLC

Company Service
The total elapsed time between the date you begin employment with the Company and your last day at work. The Pension Plan uses Company Service to calculate pension benefits—except to determine your eligibility for a vested pension benefit, which uses Credited Service. (Service Credit or Company Service Credit, as referenced under the benefit plans in this book, means Company Service.)

Consumer-Driven Health Plan
A type of health insurance arrangement that allows employees to use a health savings account to pay health care expenses directly along with a high-deductible health plan that protects the participant from catastrophic medical expenses. This type of arrangement encourages covered individuals to be informed and thoughtful consumers of health care services, much as they would be informed and thoughtful when purchasing other goods and services.

Conversion Privilege
Your right to convert a group medical or life insurance policy into an individual policy.
Co-payment
The amount you and your enrolled dependents are required to pay for the services received—in addition to any Coinsurance or Deductible.

Crown
A restoration which replaces enamel, covering the entire crown of a tooth, usually made of porcelain or acrylic.

Deductible
The Deductible is the amount you and your enrolled dependents are required to pay each calendar year for covered expenses before the plan pays; it is in addition to any Co-payments.

Dependent Child
For the Pension Plan
Your natural or adopted child, stepchild, or foster child who is under age 23 and who qualifies as your dependent child for federal income tax purposes.

Dependent Parent
For the Pension Plan
Your natural parent or stepparent who qualifies as your dependent for federal income tax purposes.

Durable Medical Equipment
Any equipment which can withstand repeated use and is medically essential to treat an injury or sickness. If more than one item can meet your functional need, Benefits are available only for the item that meets the minimum specifications for your needs. If you purchase an item that exceeds these minimum specifications, the Plan will only pay the amount that the Plan would have paid for the item that meets the minimum specifications, and you will be responsible for paying any difference in cost.

The Plan covers urinary catheters and tubings, nasal cannulas, connectors and masks used in connection with DME.

Early Retirement
Retirement prior to reaching age 65.

Elective Surgery
A surgical procedure which is not considered emergency in nature and which may be avoided without undue risk to the patient.

Eligible Dependents
For Medical and Dental Coverage
Your eligible dependents are:
- the person who is recognized under applicable law as your spouse
- a child who is less than 26 years old. An eligible dependent may include your unmarried child who is disabled even after the limiting age. For more information, see the chapter titled “About Your Benefits.”

The term “Child” is defined on page 2 of the Glossary.

Eligible Earnings
Your straight-time earnings divided by straight-time hours, then multiplied by scheduled hours.

Emergency Admission
Any hospital admission for an inpatient stay for a condition which:
- has a sudden and unexpected onset
- and
- requires prompt care to protect life, relieve severe pain, or diagnose and treat symptoms which, with delay, could result in serious injury.

Emergency Health Care Services – Outpatient
Services that are required to stabilize or begin treatment in an Emergency. Emergency Health Care Services must be received on an outpatient basis at a Hospital or Alternate Facility. Benefits include the facility charge, supplies and all professional services required to stabilize your condition and/or begin treatment. This includes placement in an observation bed to monitor your condition (rather than being admitted to a Hospital for an Inpatient Stay. Benefits are not available for services to treat a condition that does not meet the definition of an Emergency.

Emergency Treatment
The stabilization or initiation of treatment of an emergency condition. UnitedHealthcare defines an emergency condition as a serious medical condition or symptom (including severe pain) resulting from injury, sickness, or mental illness, that arises suddenly and, in the opinion of a prudent layperson, requires immediate care and treatment, generally received within 24 hours of onset, to avoid jeopardy to the life or health of an enrollee.
**ERISA**

The Employee Retirement Income Security Act of 1974, as it may be amended from time to time.

**Fixed Bridgework**

Permanently inserted artificial teeth joined to inlayed or crowned natural teeth on either side called abutments. A fixed bridgework for anterior teeth often requires two abutments on either side.

**Full Denture**

Upper or lower; artificial teeth in replacement of all teeth in an arch.

**Health Reimbursement Arrangement (HRA)**

A bookkeeping account provided by the Company that can be used by an eligible retiree or spouse for reimbursement of eligible medical expenses.

**Health Savings Account (HSA)**

A vehicle that allows retirees enrolled in a qualified medical plan to save—tax free—for health-related expenses. Funds are kept in an interest-bearing bank account until they are needed.

- Contributions to the HSA can be made by an eligible retiree if not enrolled in Medicare Part A or Part B.
- Money deposited into the HSA is generally not taxable. Once the HSA reaches a certain balance, retirees have the option to invest the funds in the account. Several investment options are available.
- The HSA is considered a contractual agreement between the retiree and the bank.

**High Deductible Health Care Plan**

A federally qualified medical plan with a high minimum deductible that must be met before coinsurance begins. Being covered by a High Deductible Health Care Plan (HDHP) is a requirement to establish a Health Savings Account (HSA).

**Home Health Aide**

A person who is trained to assist a person with daily living in his or her home after surgery or injury and who reports to and is under the direct supervision of a home health care agency. A home health aide can assist with personal hygiene, changing dressings, and mobility.

**Home Health Services**

Skilled health care services that the insurance company has determined are medically appropriate to provide in the home.

**Hospice Facility**

An institution or part of one which primarily provides care for terminally ill patients and fulfills any licensing requirements of the state or locality in which it operates.

**Hospice Program**

A coordinated, interdisciplinary program of care designed to meet the physical, psychological, spiritual, and social needs of dying persons and their families. A hospice program may also provide palliative and supportive medical, nursing, and other health services through home or inpatient care during the terminal illness.

**Hospice Care Services**

Any services provided by a hospital, skilled nursing facility, home health agency, hospice, or any other licensed facility or agency under a hospice program.

**Hospital**

A Hospital is an institution constituted, licensed, and operated in accordance with the laws pertaining to hospitals, which maintains on its premises all the facilities needed to diagnose and treat injury and sickness. It is an institution which qualifies as a hospital, a psychiatric hospital, or a tuberculosis hospital as a provider of services under Medicare and is accredited by The Joint Commission.

A Hospital can specialize in treatment of mental illness, alcoholism, drug addiction, or other related illness. It can also provide residential treatment programs, but only if it is constituted, licensed, and operated in accordance with the laws of legally authorized agencies responsible for medical institutions. It provides all treatment for a fee, by or under the supervision of physicians on an inpatient basis with continuous 24-hour nursing service by qualified nurses.

Any institution which is exclusively a place for rest, a place for the aged, or a nursing home, will not be considered a Hospital.
Glossary (cont.)

**Indemnity Plan**
A medical plan in which you can use any provider you choose.

**Informal Caregiver**
**For Long-Term Care**
A person providing custodial (personal) care, who is not a nurse or therapist or whose services are not provided and supervised by a home health care agency, nursing home, assisted living facility, hospice, or adult day care center or care management organization. Members of the covered person’s immediate family may qualify as informal caregivers.

**In-Network Benefits**
Health care services or items provided by your primary care physician, or authorized services or items provided by another participating provider.

**Lifetime Maximum**
The maximum amount of eligible benefits a plan will pay for an individual during his or her lifetime.

**Medicare-based Maximum Reimbursable Charge (MRC)—Medical**
The amount reimbursed by the Under age 65 medical plan when you receive out-of-network services, based on a methodology similar to that used by Medicare to determine the Medicare-based Maximum Reimbursement Charge (MRC) in your geographic area for similar services.

Any charges above the 140% of MRC are not covered by the plan, and you will not be reimbursed for that amount. These charges do not count toward your deductible or out-of-pocket maximum.

**Medicare Supplement Program**
See “Over 65 Medicare Supplement Program.”

**Mental Health Provider**
The company responsible for authorizing mental health and alcohol/drug abuse treatment for UnitedHealthcare Medical Plan participants.

**Myofunctional Therapy**
Correcting and/or retraining of the muscles to correct an orthodontic disorder.

**Necessary Services and Supplies**
Any services or supplies, other than bed and board, that are necessary for your treatment and are administered during hospital confinement. Necessary Services and Supplies also will include professional ambulance service to or from the nearest hospital where the necessary medical treatment can be provided, and any charges for the administration of anesthetics during hospital confinement. Necessary services do not include special nursing, dental, or medical services.

**Network**
A group of health care providers who have agreed to provide care for prenegotiated rates as well as to comply with quality assurance procedures and patient service standards. A network may be regional or national in its coverage area.

**Network Manager**
The health plan that sets up and manages a network of providers and administers out-of-network benefits, too. The network manager for the company’s medical plans is UnitedHealthcare.

**Network Pharmacy**
A pharmacy that has contracted with the pharmacy benefit management company to provide prescription drugs under a contractual arrangement for discounted costs.

**Normal Retirement**
Retirement at age 65.

**Nurse**
A Registered Graduate Nurse, a Licensed Practical Nurse, or a Licensed Vocational Nurse. A nurse is a professional who has the right to use the respective title and the respective abbreviation R.N., L.P.N., or L.V.N.

**Orthodontic Treatment**
Science of the movement of teeth in the correction of malocclusion.
Orthotics
A custom-molded rigid insert that, when placed in the shoe, distributes the patient’s weight equally throughout the foot and leg and relieves the stress from any one particular area.

Out-of-Network Benefits
Care that does not qualify as in-network.

Out-of-Pocket Maximum
The maximum you have to pay for eligible medical expenses in one plan year. Once you reach this amount, the medical plan pays 100% of eligible expenses for the rest of that plan year.

Over 65 Medicare Supplement Program
A program available to eligible retirees who are age 65 or over and enrolled in Medicare Part A and Part B. The program includes a prescription drug plan and a Health Reimbursement Arrangement sponsored by UT-Battelle. A variety of individual Medicare Supplement plans are available for the retiree’s purchase through a Medicare Exchange vendor. The individual Medicare Supplement plans are not group health plans subject to ERISA and are not sponsored by UT-Battelle.

Paralysis
The loss of all practical use of a limb as it relates to the ability to perform the normal functions and activities of everyday life without the use of a prosthesis or any other mechanical device(s).

Partial Denture
An appliance supporting artificial teeth less than the full number of teeth in one jaw.

Periodontal Splinting
Stabilizing or immobilization of periodontically involved teeth. Splinting may be accomplished with acrylic resin bit guards, orthodontic band splints, wire ligation, provisional splints, and fixed prosthesis.

Periodontics
The treatment of disease of the gum and tissues surrounding the teeth.

Personal Identification Number (PIN)
The number that allows you to access Savings Plan account information through the information line.

Physician
A person who is licensed to prescribe and administer drugs or to perform surgery and who operates within the scope of his or her license.

Point-of-Service Plan
A medical plan through which you may receive care in-network (at the highest level of benefits) or out-of-network (at a lower level of benefits).

Precertification
The process used to certify the medical necessity and length of a hospital confinement.

Prescription Drugs
Medication prescribed by a physician for the treatment of an illness or injury. There are two types of Prescription Drugs: brand-name and generic.

Preventive Care
For purposes of the Medical Plan, preventive care includes the following:
- evidence-based items or services with an A or B rating recommended by the United States Preventive Services Task Force;
- immunizations for routine use in children, adolescents, or adults recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention;
- evidence-informed preventive care and screenings provided for in the comprehensive guidelines supported by the Health Resources and Services Administration (HRSA) for infants, children, and adolescents; and
- other evidence-informed preventive care and screenings provided for in comprehensive guidelines supported by HRSA for women.

Primary Care Physician
A physician—generally an internist, general/family practitioner, or pediatrician—whom you select to coordinate all your medical care.
Glossary (cont.)

Prosthodontic Services
The making of artificial devices for replacement of missing teeth and structures in the mouth.

Qualifying Life Event
An event described in the “About Your Benefits” chapter which permits a change in coverage or election on a pre-tax basis.

Rollover Contributions
Distributions from another employer’s qualified plan that you deposit into your Savings Plan account.

Reasonable and Customary Charge
For Dental Coverage
A rate for dental services that is determined by the insurance company by taking into account:

- the usual fees charged by dentists with similar training and experience in your geographic area
- any unusual circumstances or complications that require special skill, experience, or additional time.

If the insurance company considers your dental expenses more than reasonable and customary, you will be responsible for paying the additional amount. These charges do not count toward your Deductible.

Retiree
A Retiree is a former employee who at the time of termination of employment was eligible to receive a retirement benefit.

Room and Board
All charges commonly made by a hospital for rooms and meals and all general services and activities needed for the care of registered bed patients.

Routine
A situation that does not require immediate attention, such as immunizations or annual exams.

Skilled Nursing Facility
A licensed institution, other than a hospital, which specializes in physical rehabilitation or provides skilled nursing and medical care on an inpatient basis. The institution must maintain on the premises all facilities necessary for medical treatment. Such treatment is provided for compensation and must be under the supervision of physicians and provide nurses’ services.

Space Maintainers
Appliances to prevent adjacent teeth from moving into space left by a lost tooth.

Spouse
An individual to whom you are lawfully married, whether the individual is the opposite sex or the same sex. Individuals of the same sex will be considered to be lawfully married for purposes of the plans as long as they were married in the United State, in a US territory, or in a foreign jurisdiction whose laws authorize the marriage of two individuals of the same sex.

Terminally Ill
A medical prognosis of 6 months or less to live.

Urgent Care
Services for a situation that requires prompt medical attention but is not life threatening.

Vesting
Ownership interest in your Pension Plan benefits and Company matching contributions under the Savings Plan. You have an irrevocable right to a benefit when you are fully vested.
# Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABO</td>
<td>Accelerated Benefits Option</td>
</tr>
<tr>
<td>ACLT</td>
<td>advanced cardiac life treatment</td>
</tr>
<tr>
<td>CAT</td>
<td>computed axial tomography</td>
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<tr>
<td>CHIP</td>
<td>Children’s Health Insurance Program</td>
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<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Medicaid Services</td>
</tr>
<tr>
<td>COB</td>
<td>Coordination of Benefits</td>
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<tr>
<td>COBRA</td>
<td>Consolidated Omnibus Budget Reconciliation Act of 1985</td>
</tr>
<tr>
<td>COLA</td>
<td>cost of living adjustment</td>
</tr>
<tr>
<td>CPR</td>
<td>cardiopulmonary resuscitation</td>
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<td>CSR</td>
<td>Continued Stay Review</td>
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<tr>
<td>CT</td>
<td>computed tomography</td>
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<tr>
<td>DAO</td>
<td>Disability Administrative Office</td>
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<tr>
<td>EBSA</td>
<td>Employee Benefits Social Security Administration</td>
</tr>
<tr>
<td>EOB</td>
<td>Explanation of Benefits</td>
</tr>
<tr>
<td>EPA</td>
<td>External Prosthetic Appliance</td>
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<tr>
<td>ERISA</td>
<td>Employee Retirement Income Security Act of 1974</td>
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<tr>
<td>FAQ</td>
<td>frequently asked question</td>
</tr>
<tr>
<td>FSA</td>
<td>flexible spending account</td>
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<tr>
<td>HDHP</td>
<td>High Deductible Health Care Plan</td>
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<tr>
<td>HIPAA</td>
<td>Health Insurance Portability and Accountability Act</td>
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<tr>
<td>HRA</td>
<td>Health Reimbursement Arrangement</td>
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<tr>
<td>HRSA</td>
<td>Health Resources and Services Administration</td>
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<tr>
<td>HSA</td>
<td>Health Savings Account</td>
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<td>ID</td>
<td>identification</td>
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<tr>
<td>IRA</td>
<td>individual retirement account</td>
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<td>IRC</td>
<td>Internal Revenue Code</td>
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<td>IRO</td>
<td>Independent Review Organization</td>
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<td>IRS</td>
<td>US Internal Revenue Service</td>
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<td>LTCl</td>
<td>long-term care insurance</td>
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<td>MEPP</td>
<td>Multiple Employer Pension Plan</td>
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<td>MH/SA</td>
<td>mental health/substance abuse</td>
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<td>MRA</td>
<td>magnetic resonance angiography</td>
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<td>MRC</td>
<td>Medicare-Based Maximum Reimbursement Charge</td>
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<td>MRI</td>
<td>magnetic resonance imaging</td>
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<tr>
<td>OB/GYN</td>
<td>obstetrician/gynecologist</td>
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<tr>
<td>Acronym</td>
<td>Definition</td>
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<tr>
<td>PAC</td>
<td>Preadmission Certification</td>
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<td>PBGC</td>
<td>Pension Benefit Guaranty Corporation</td>
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<td>PCP</td>
<td>primary care physician</td>
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<td>PDP</td>
<td>Preferred Dentist Program</td>
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<td>PET</td>
<td>positron emission tomography</td>
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<td>PHI</td>
<td>protected health information</td>
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<tr>
<td>PIN</td>
<td>personal identification number</td>
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<tr>
<td>PSA</td>
<td>prostate-specific antigen</td>
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<td>QDRO</td>
<td>qualified domestic relations order</td>
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<tr>
<td>QMCSO</td>
<td>qualified medical child support order</td>
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<tr>
<td>SSN</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>STD</td>
<td>short-term disability</td>
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<td>TCA</td>
<td>Total Control Account</td>
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<td>TDD</td>
<td>telecommunication device for the deaf</td>
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<tr>
<td>TTY</td>
<td>telephone text device</td>
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<tr>
<td>UHC</td>
<td>UnitedHealthcare</td>
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<tr>
<td>USERRA</td>
<td>Uniformed Services Employment and Reemployment Rights Act</td>
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<tr>
<td>VSP</td>
<td>Vision Service Plan</td>
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<tr>
<td>WA</td>
<td>Worldwide Assistance Services, Inc.</td>
</tr>
</tbody>
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