Add a top provider. Seek care. **Earn HSA contributions!**

Garner Top Provider Incentive FAQs

Introductory FAQs

A1: Is Garner a medical plan?
A1: No. The Garner Top Provider Incentive works alongside your K-C medical plan. It does not replace your health insurance, and you will continue to have access to the same medical coverage and network K-C offers today through Anthem and CVS Caremark for all medical plan options.

A2: What action do I need to take to receive the incentive?
A2: This incentive is automatically available to you and your covered dependents if you're enrolled in a K-C Anthem medical plan option. To earn the incentive, you must create a Garner account, add a top provider to your Care Team, and receive care from that provider. These steps can all be completed through the My K-C Benefits mobile app.

A3: Can my family use this incentive?
A3: Yes. Garner is available to your eligible dependents who are covered under your K-C Anthem medical plan. Your household only needs one account. Your covered family members can use the program, which means you'll qualify for the incentive when they receive care from a top provider identified through Garner.

A4: How do I access or create my Garner account?
A4: You can access your Garner account in one of two ways:

- **Through the My K-C Benefits app (no registration required):** The easiest way to access your Garner account is through the My K-C Benefits app by selecting *Health > Top Provider Incentive > Access Garner* with no login required.
- **Through the Garner website/app (registration required):** Go to app.getgarner.com/home or download the Garner Health app. Create an account or log in.

A5: Can I add my covered dependent's providers to my Care Team?
A5: Yes, you can add providers for all covered dependents to your Care Team. This allows you to earn the annual incentive for eligible care received by both you and your covered dependents.

A6: What if I have questions on how to earn the Garner incentive?
A6: The Garner Concierge team is available to help you. They can explain how the incentive process works, help you find and search for providers, and answer any questions you have about using Garner and earning your incentive. You can contact Garner Concierge by email at concierge@garnerhealth.com, or by phone at **(866) 761-9586**.

Add a top provider. Seek care. **Earn HSA contributions!**

Top Provider FAQs

B1: What is a top provider?
B1: A top provider is a doctor or health professional identified by Garner as delivering high-quality care and achieving better patient outcomes. Garner evaluates providers using one of the largest medical claims databases in the U.S. and highlights top providers with a green top provider badge in the Garner platform. These providers are in your Anthem network and accepting new patients.

B2: How does Garner identify top providers?
B2: Garner analyzes more than 60 billion medical claims representing more than 300 million patients to identify doctors who consistently deliver high-quality care. Garner looks for providers who follow evidence-based medical guidelines, achieve strong patient outcomes, avoid unnecessary procedures, have fewer complications, and help patients recover more quickly. Doctors cannot pay to be recommended by Garner or nominate themselves for inclusion as a top provider.

B3: Do the Garner top provider rankings ever change?
B3: Yes, Garner top provider rankings are updated monthly based on the latest available data. As new information becomes available, providers may be added or removed from the top provider list. However, if you added a provider to your Garner Care Team while they had a Garner Top Provider designation, Garner will continue to recognize that provider as a top provider for you and your covered dependents, even if their designation changes later.

B4: Am I required to see a Garner top provider?
B4: No. While you're encouraged to use top providers to help you find high-quality care and maximize your benefits, seeing a top provider is not required. However, only care you receive from a Garner top provider is eligible for the incentive.

B5: Are top providers in-network with K-C's medical plan?
B5: Garner works to identify top providers who participate in the Anthem network. However, provider network participation can change over time. Before receiving care, we always recommend confirming that your provider is still in-network with Anthem, including on or before the day of service.

B6: Can I use Anthem LiveHealth Online and receive the Garner Top Provider Incentive?
B6: Yes. If you or an eligible dependent receives care through Anthem LiveHealth Online and the provider you see is a Garner top provider, any eligible out-of-pocket expenses associated with that visit will qualify for the Garner incentive. This process is automated, and the provider does not need to be listed on your Garner Care Team prior to your appointment.

B7: Are all providers at the same practice, medical center, or physician group approved for the Garner incentive?
B7: No. Garner evaluates individual providers based on their quality and performance criteria. Because of this, some providers within the same practice or health system may qualify as a Garner top provider while others may not. Use the Garner tool to search for specific providers by name to see if they are a top provider and eligible for the incentive.

B8: What if I see a specialist or need a procedure?
B8: To qualify for the Garner incentive, all providers involved in your care, including specialists, must be identified as a Garner top provider and added to your Care Team before your appointment. If your doctor refers you to a specialist, be sure to search for that provider in the Garner app before scheduling your visit to confirm they are a Garner top provider.

B9: Why isn't my current doctor identified by Garner as a top provider?
B9: We understand it can be disappointing if your current doctor isn't identified as a top provider by Garner.

If your provider isn't listed as a Garner top provider, it doesn't mean they aren't a good provider. Garner evaluates providers using their own quality and performance criteria, and not every provider is identified as a top provider. While we encourage you to stay in-network and consider top providers, you always have a choice to see the provider you prefer. However, only care you receive from a Garner top provider qualifies for the incentive.

B10: What if I cannot find my Nurse Practitioner (NP) or Physician Assistant (PA) while searching for providers?
B10: Nurse Practitioners and Physician Assistants are currently not listed on the Garner platform; however, Garner is actively working on a system update that would allow NPs and PAs to be available on the platform. In the meantime, if you have questions regarding your NP or PA, contact the Garner Concierge team at concierge@garnerhealth.com or **(866) 761-9586**. If your NP or PA practices under a physician who has been designated as a top provider, the Concierge team can review the provider relationship and, if eligible, add the NP or PA to your list of Approved Providers and Care Team.

B11: Do I need to add doctors to my Care Team every year?
B11: No. Your Care Team carries over from year to year, so you don't need to add providers annually. While provider rankings are updated monthly, any provider you added to your Care Team, while they had a top provider designation, will continue to be recognized by Garner for you and your covered dependents. We encourage you to use the Garner platform when selecting new providers or making changes to your care.

B12: Can I receive the incentive for ancillary providers that I can't select, such as an anesthesiologist who assists with surgery?
B12: We understand you can't choose ancillary providers such as anesthesiologists, radiologists, pathologists, or nurses. Your care may still qualify for the Garner incentive if:

- The approved provider is added to your Care Team before your appointment.
- The provider ordering or primarily performing the procedure is a top provider and added to your Care Team before your appointment.
- The procedure is received in-network with Anthem.

To confirm an in-network provider, visit the My K-C Benefits app >Health > Medical > Find an In-Network Provider or call the number on the back of your Anthem ID card.

Qualifying Costs FAQs

C1: What costs are eligible for the Garner incentive?
C1: Visit the "Coverage details" section on the Garner platform to see which types of out-of-pocket healthcare expenses are eligible for the incentive.

Please note that eligibility for HSA contributions depends on the medical plan in which you're enrolled.

Your out-of-pocket healthcare costs will qualify for your Garner incentive if:

- You have created a Garner account and added the provider to your Care Team before your appointment,
- Your provider is in-network and the service was covered by K-C's medical plan, and
- You haven't reached your annual Garner incentive.

C2: What out-of-pocket healthcare expenses are eligible?
C2: Eligible out-of-pocket expenses may include office visits (excluding preventive care), urgent care clinic visits, lab work, imaging, procedures, and prescriptions ordered, administered, or prescribed by providers on your Care Team.

Dental and vision expenses generally don't qualify for the Garner Top Provider Incentive, unless the eligible care is covered under the medical plan.

To learn if an expense qualifies for the incentive, log in to your Garner account.

C3: When are services from facilities such as labs and imaging eligible for the Garner incentive?
C3: Lab work, imaging, and other facility-based services may be eligible for the Garner incentive when they are ordered by a Garner top provider and:

- The top provider was added to your Care Team before the date of service,
- The facility is in-network, under your K-C Anthem medical plan, and
- The service is covered by K-C's medical plan. You don't need to search for or add the lab, imaging center or other facility in the Garner platform. As long as the ordering provider meets the requirements above and the facility is in-network, the associated out-of-pocket costs may be eligible for the incentive.

If you choose to find a facility yourself, you can also search for labs and imaging centers on the Garner Health platform. To qualify for the Garner Incentive, the following conditions must be met:

- You found the facility in the Garner Health platform before your appointment,
- The facility's profile page shows a yellow banner that says: "Eligible with some exceptions." This means services at the facility may qualify for the incentive, and
- The facility is in-network, and the services are covered by K-C's medical plan.

C4: Are emergency room visits eligible for the Garner incentive?
C4: No. Emergency room care is not eligible for the Garner Top Provider Incentive.

Add a top provider. Seek care. **Earn HSA contributions!**

HSA Contribution FAQs

D1: How do HSA contributions affect my taxes?
D1: Any HSA contributions you receive through the Garner incentive are treated as employer contributions from K-C. Garner works with K-C and Fidelity, K-C's HSA administrator, to ensure these contributions are reflected on applicable tax forms, such as your W-2 and IRS 5498-SA, just like other employer HSA contributions. You don't need a separate tax form from Garner.

Because individual tax situations vary, Garner can't provide tax advice. If you have questions about how HSA contributions may affect your taxes, consult a qualified tax advisor.

D2: How is the HSA contribution limit set by the IRS different from my maximum Garner incentive?
D2: The annual IRS HSA contribution limit and the Garner incentive maximum are two different limits.

- **Garner's maximum incentive:** This is the maximum you can earn through the Garner incentive.
- **IRS HSA contribution limit:** This is the maximum amount that can be contributed to your HSA during the year from all sources combined, including your contributions, K-C contributions, and any HSA contributions earned through the Garner incentive.

When setting HSA contribution elections during Annual Enrollment, K-C takes into account both company contributions and the maximum amount you may be eligible to earn through the Garner incentive. However, it's ultimately your responsibility to ensure that your total contributions don't exceed IRS limits.

D3: Can I contribute more to my HSA if I don't receive the full Garner incentive?
D3: Yes. If you're enrolled in an HSA-eligible medical plan, and don't receive the full Garner incentive, you can contribute additional funds to your HSA—up to the applicable annual IRS contribution limit.

Generally, the timing works as follows:

- **Garner's incentive contribution:** Any HSA contribution earned through the Garner incentive will be deposited into your HSA by December 31 of the applicable plan year.
- **Your contribution and K-C contributions:** You may continue making HSA contributions through the tax filing deadline, typically April 15 of the following year, up to the applicable IRS contribution limits. After December 31 (or the final payroll of the year), contributions can no longer be made through payroll deductions and must be made directly to your HSA on an after-tax basis from your bank account. These after-tax contributions can then be claimed on your federal income tax return to receive the associated tax benefit. For additional questions, please call Fidelity at **800-551-2333**.

D4: What happens if I or my covered dependent has an eligible claim late in the year? When will I receive the incentive into my HSA?
D4: If you or a covered dependent incurs a claim late in the year, it's likely the incentive will not be deposited into your HSA until the following calendar year based on the estimated 6-8 week processing timeline with Garner. The contribution will count toward the annual HSA limit for the year in which it's

deposited, not the year the claim was incurred. As a result, the incentive amount will be applied against the new year's HSA contribution limit.

D5: Do I need to use my HSA card to qualify for HSA contributions?
D5: No. If you're enrolled in an HSA-eligible medical plan, you can earn the Garner incentive for eligible out-of-pocket healthcare expenses regardless of how you pay for them. You don't need to use your HSA card.

Once an eligible expense is processed, any earned incentive will be deposited directly into your HSA, up to the applicable annual incentive maximum. If you paid for the expense using a credit card, debit card, or other personal funds, you may use the money in your HSA to reimburse yourself after the contribution is deposited, subject to IRS rules. If you have questions about your HSA or need assistance with the reimbursement process, contact Fidelity at 800-551-2333.

D6: Is Garner my HSA provider?
D6: No. Garner is not an HSA provider and does not administer your HSA. Fidelity remains K-C's HSA administrator. Garner partners with K-C to help you find and receive care from top providers. If you're enrolled in a K-C medical plan, create a Garner account, add a Garner top provider to your Care Team before your appointment, and receive eligible care from that provider, you can earn an HSA contribution based on your eligible out-of-pocket healthcare expenses up to the applicable annual incentive maximum.

D7: How do I receive the Garner incentive?
D7: When you or a covered dependent receives eligible care from a Garner top provider, K-C will provide a contribution to your Health Savings Account (HSA) to help offset eligible out-of-pocket healthcare costs:

- Up to $1,000 annually for Individual coverage
- Up to $2,000 annually for 2-Party and 2-Party Plus coverage

To earn the incentive, you must:

- Create a Garner account,
- Add the provider to your Care Team before your appointment, and
- Receive eligible care from a Garner top provider.

Important:

- Garner's incentive contribution is in addition to K-C's annual HSA contribution.
- Any incentive earned by your covered dependents will be deposited into your HSA.
- If you're enrolled in the CDHP with Health Reimbursement Arrangement (HRA), the Garner incentive works differently. Contact Garner at **866-761-9586** (Monday to Friday, 8 a.m. to 10 p.m. ET) or via email at concierge@garnerhealth.com to learn more.

D8: When will I receive my incentive?
D8: After you receive care from a Garner top provider, Anthem/CVS Caremark must first process the claim and share the information with Garner. Once Garner receives, reviews, and processes the claim, the eligible incentive will be calculated and sent to Fidelity to be posted into your HSA. In most cases, HSA

contributions are posted within 6-8 weeks after Anthem/CVS Caremark processes the claim and sends it to Garner.

Garner Concierge FAQs

E1: What is the Garner Concierge?
E1: The Garner Concierge is a dedicated team of experts available to answer your questions and help you get the most from your Garner benefits. Whether you need help finding a Garner top provider, understanding your incentive, navigating the Garner platform, or exploring care options for you or your family, the Concierge is there to assist you.

E2: How do I contact Garner Concierge?
E2: You can contact Garner Concierge by email at concierge@garnerhealth.com, or by phone at **(866) 761-9586**. Concierge hours of operation are Monday through Friday from 8 a.m. to 10 p.m. ET.

The Garner Top Provider Incentive is administered in accordance with the applicable program terms. In the event of any inconsistency between this communication and the program terms, the program terms control. Kimberly-Clark reserves the right to amend, modify, or terminate the program at any time.