Employer Name:	Region Financial Corporation
Employer State of Situs:	AL
Name of Issuer:	Region Financial Corporation
Plan Marketing Name:	Regions Financial Corporation Advantage Medical Plan and Regions Financial Corporation Core Medical Plan
Plan Year:	2022

Ten (10) Essential Health Benefit (EHB) Categories:

- Ambulatory patient services (outpatient care you get without being admitted to a hospital)
- Emergency services
- Hospitalization (like surgery and overnight stays)
- Laboratory services
- Mental health and substance use disorder (MH/SUD) services, including behavioral health treatment (this includes counseling and psychotherapy)
- Pediatric services, including oral and vision care (but adult dental and vision coverage aren't essential health benefits)
- Pregnancy, maternity, and newborn care (both before and after birth)
- Prescription drugs
- Preventive and wellness services and chronic disease management
- Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)

Note: The table below is provided to comply with the Illinois Consumer Coverage Disclosure Act. The checklist requires simple yes or no answers. For more details on coverage, regardless of whether the simple answer is yes or no, please refer to the Summary Plan Descriptions available on benefits.regions.com

	2020-2022 Illinois Essential I	Health Benefit (EHB) Listin	g (P.A. 102-0630)	Employer Plan
Item	EHB Benefit	EHB Category	Benchmark Page # Reference	Covered Benefit?
1	Accidental Injury Dental	Ambulatory	Pgs. 10 & 17	Y
2	Allergy Injections and Testing	Ambulatory	Pg. 11	Υ
3	Bone anchored hearing aids	Ambulatory	Pgs. 17 & 35	N
4	Durable Medical Equipment	Ambulatory	Pg. 13	Υ
5	Hospice	Ambulatory	Pg. 28	Y
6	Infertility (Fertility) Treatment	Ambulatory	Pgs. 23 - 24	N
7	Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	Ambulatory	Pg. 21	Y
8	Outpatient Surgery Physician/Surgical Services (Ambulatory Patient Services)	Ambulatory	Pgs. 15 - 16	Υ
9	Private-Duty Nursing	Ambulatory	Pgs. 17 & 34	Y
10	Prosthetics/Orthotics	Ambulatory	Pg. 13	Υ
11	Sterilization (vasectomy men)	Ambulatory	Pg. 10	Υ
12	Temporomandibular Joint Disorder (TMJ)	Ambulatory	Pgs. 13 & 24	Y
13	Emergency Room Services (Includes MH/SUD Emergency)	Emergency services	Pg. 7	Υ
14	Emergency Transportation/ Ambulance	Emergency services	Pgs. 4 & 17	Y

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15	Bariatric Surgery (Obesity)	Hospitalization	Pg. 21	Υ
16	Breast Reconstruction After Mastectomy	Hospitalization	Pgs. 24 - 25	Υ
17	Reconstructive Surgery	Hospitalization	Pgs. 25 - 26, & 35	Υ
18	Inpatient Hospital Services (e.g., Hospital Stay)	Hospitalization	Pg. 15	Υ
19	Skilled Nursing Facility	Hospitalization	Pg. 21	Υ
20	Transplants - Human Organ Transplants (Including transportation & lodging)	Hospitalization	Pgs. 18 & 31	Υ
21	Diagnostic Services	Laboratory services	Pgs. 6 & 12	Υ
22	Intranasal opioid reversal agent associated with opioid prescriptions	MH/SUD	Pg. 32	Υ
23	Mental (Behavioral) Health Treatment (Including Inpatient Treatment)	MH/SUD	Pgs. 8 -9, 21	Υ
24	Opioid Medically Assisted Treatment (MAT)	MH/SUD	Pg. 21	Υ
25	Substance Use Disorders (Including Inpatient Treatment)	MH/SUD	Pgs. 9 & 21	Υ
26	Tele-Psychiatry	MH/SUD	Pg. 11	Υ
27	Topical Anti-Inflammatory acute and chronic pain medication	MH/SUD	Pg. 32	Υ
20	Pediatric Dental Care	Pediatric Oral and Vision Care	See AllKids Pediatric Dental Document	γ*
28	rediatife Delital Care	rediatric Oral and Vision Care	See Alikius Feulatric Dental Document	•
29	Pediatric Vision Coverage	Pediatric Oral and Vision Care	Pgs. 26 - 27	γ**
29				
29 30	Pediatric Vision Coverage	Pediatric Oral and Vision Care	Pgs. 26 - 27	γ**
29 30 31	Pediatric Vision Coverage Maternity Service	Pediatric Oral and Vision Care Pregnancy, Maternity, and Newborn Care	Pgs. 26 - 27 Pgs. 8 & 22	γ**
29 30 31 32	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs	Pediatric Oral and Vision Care Pregnancy, Maternity, and Newborn Care Prescription drugs	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34	Y** Y
29 30 31 32	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening	Pediatric Oral and Vision Care Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16	Y** Y Y
29 30 31 32 33	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services	Pediatric Oral and Vision Care Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16	Y** Y Y Y Y
	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services Preventive and Wellness Services Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35	Y** Y Y Y Y Y
29 30 31 32 33 34 35	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education Diabetic Supplies for Treatment of Diabetes	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services Preventive and Wellness Services Preventive and Wellness Services Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35 Pgs. 31 - 32	Y** Y Y Y Y Y Y Y Y Y
33 33 33 34 35 36	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education Diabetic Supplies for Treatment of Diabetes Mammography - Screening	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35 Pgs. 31 - 32 Pgs. 12, 15, & 24	Y** Y Y Y Y Y Y Y Y Y
29 30 31 32 33 34 35 36 37	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education Diabetic Supplies for Treatment of Diabetes Mammography - Screening Osteoporosis - Bone Mass Measurement Pap Tests/ Prostate- Specific Antigen Tests/ Ovarian Cancer	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35 Pgs. 31 - 32 Pgs. 12, 15, & 24 Pgs. 12 & 16	Y** Y Y Y Y Y Y Y Y Y Y Y
229 330 331 332 333 334 335 336 337 338	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education Diabetic Supplies for Treatment of Diabetes Mammography - Screening Osteoporosis - Bone Mass Measurement Pap Tests/ Prostate- Specific Antigen Tests/ Ovarian Cancer Surveillance Test	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35 Pgs. 31 - 32 Pgs. 12, 15, & 24 Pgs. 12 & 16 Pg. 16	Y** Y Y Y Y Y Y Y Y Y Y Y Y
30 31 32 33 34 35	Pediatric Vision Coverage Maternity Service Outpatient Prescription Drugs Colorectal Cancer Examination and Screening Contraceptive/Birth Control Services Diabetes Self-Management Training and Education Diabetic Supplies for Treatment of Diabetes Mammography - Screening Osteoporosis - Bone Mass Measurement Pap Tests/ Prostate- Specific Antigen Tests/ Ovarian Cancer Surveillance Test Preventive Care Services	Pregnancy, Maternity, and Newborn Care Prescription drugs Preventive and Wellness Services Preventive and Wellness Services	Pgs. 26 - 27 Pgs. 8 & 22 Pgs. 29 - 34 Pgs. 12 & 16 Pgs. 13 & 16 Pgs. 11 & 35 Pgs. 31 - 32 Pgs. 12, 15, & 24 Pgs. 12 & 16 Pg. 16 Pg. 18	Y** Y Y Y Y Y Y Y Y Y Y Y

Special Note: Under Pub. Act 102-0104, eff. July 22, 2021, any EHBs listed above that are clinically appropriate and medically necessary to deliver via telehealth services must be covered in the same manner as when those EHBs are delivered in person.

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