The 2024 LiveWELL Health Plans

Atrium Health offers benefits to support the health and well-being of all teammates and their families.

For 2024, the **LiveWELL Health Plans** include a co-pay and a health savings plan option. Both health plan options include the Atrium Health Value Network with a teammate discount and the highest level of benefit.

You can elect or make changes to Medical, Dental, Vision, Voluntary Benefits and a Health Care Flexible Spending Account during Annual Enrollment, or if you experience certain life or work events. Visit **Teammates.AtriumHealth.org** for details.

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The Health Savings Plan

Offers lower premiums with pretax Health Savings Account (HSA) contributions that roll-over

The HSA can be used for health expenses now and later

The Co-Pay Plan

Offers predictability with higher premiums and lower out-of-pocket expense

Health Savings

- Premium: Lower cost per pay period
- Deductible (except for preventive care)
- Coinsurance begins after deductible is met
- HSA: pretax, use it or save it
- LiveWELL Incentive goes pretax into HSA
- Value Network offers a teammate discount
- No cost for annual check-ups

O Premium: Higher cost per pay period

- Co-pays begin immediately. Deductible only applies to inpatient and outpatient services
- FSA: pretax, use it or lose it
- LiveWELL Incentive goes pretax into LiveWELL Incentive Account
- O Value Network offers a teammate discount
- O No cost for annual check-ups

Find the Right Health Plan for You

The **Health Plan Decision Support Tool** is available to help teammates decide which health plan is best for them. The tool guides teammates through a series of questions. Based on their answers, teammates will see a side-by-side comparison of the expenses under both **LiveWELL Health Plans**.



Now part of **ADVOCATE**HEALTH

The 2024 LiveWELL Health Plans

KEY TERMS & PLAN COMPARISON

A DEDUCTIBLE is the amount you owe for covered health care services and most prescription medications.

How deductibles work on the LiveWELL Health Plans:

Health Savings Plan: Deductible applies to office visits, medications and outpatient and inpatient services with the exception of preventive care.

Co-Pay Plan: No deductibles for office visits, medications or preventive care. Deductibles apply to outpatient and inpatient services.

COINSURANCE is the percentage you pay (with the LiveWELL Health Plans paying the majority of the costs) for covered services once you've met the annual deductible.

A CO-PAY is a flat dollar amount you typically pay for things like physician office visits and most prescription drugs.

		Health Savings PLAN			Co-Pay PLAN				
			Net	work		Network			
		Value	Preferred	In	Out	Value	Preferred	In	Out
al ble	How Deductibles Work		s apply to all of ices with the ex				s for office visi ductibles only a		s or preventive services.
Annual Deductible	Teammate-Only	\$1,600		\$4,000		\$800			
De	Teammate + Dependent(s)		\$3,200 \$8,0			\$1,600			\$8,000
	Teammate Pays	15%	25%	30%	50%	15%	25%	30%	50%
	Plan Pays	85%	75%	70%	50%	85%	75%	70%	50%
	Preventive Care	C	Covered at 100	%	No coverage provided	С	overed at 100	%	No coverage provided
	E-Visit / Virtual Visit	Before deductible: \$10 After deductible: \$0			\$0				
sits	LiveWELL Care		Before deductible: \$40 After deductible: \$15			\$15			
Office Visits	Primary Care		Deductible &	. Coinsurance		\$20	\$25	\$30	
Offi	Specialist		Deductible &	Deductible & Coinsurance		\$40 \$45 \$		\$50	Deductible & Coinsurance
	Urgent Care		Deductible &	. Coinsurance		\$70			Comsurance
	Emergency Department		Deductible & Coinsurance			\$175 & Coinsurance			

Fertility Treatment: Covered only at Atrium Health Reproductive Medicine and Infertility at 100% after deductible with up to a \$25,000 lifetime maximum. Benefits are available after the covered teammate has been employed by Atrium Health for one or more years.

NETWORKS

The Atrium Health Value Network offers a teammate discount for health care services.

Managing your health care expenses means you know where to find the most cost-effective health care and prescription medications. Lower your health care costs by choosing the Atrium Health Value or Preferred networks.

\$ Value Network	The most cost-effective tier; includes the exceptional network of primarily Atrium Health physicians, providers, facilities
\$ Preferred Network	The next most cost-effective tier
\$\$ In-Network	Includes the MedCost network of physicians and providers, facilities and laboratories
\$\$\$ Out-of-Network	The highest-cost tier; includes physicians and providers, facilities and laboratories not included in other networks

To find Atrium Health physicians and providers, go to **MedCost.com** and click Find a Doctor.



PRESCRIPTION MEDICATIONS

CarolinaCARE is the prescription service and specialty medication pharmacy for the LiveWELL Health Plans. LiveWELL Health Plan members access CarolinaCARE for Affordable Care Act (ACA) medications, preventive medications, maintenance and specialty medications.

Atrium Health Retail Pharmacies: A group of retail pharmacies owned by Atrium Health that can help you save money and time when you have prescriptions to fill

Retail Pharmacy: Any pharmacy outside of CarolinaCARE, including Atrium Health-owned retail pharmacies

	Health Savings PLAN				Co-Pay PLAN				
	CarolinaCARE Mail Service (90-day supply)	CarolinaCARE Mail Service (30-day supply)	Atrium Health Rx Retail Pharmacies (30-day supply)	Community Retail Pharmacies (30-day supply)	CarolinaCARE Mail Service (90-day supply)	CarolinaCARE Mail Service (30-day supply)	Atrium Health Rx Retail Pharmacies (30-day supply)	Community Retail Pharmacies (30-day supply)	
ACA Preventive*	\$O to \$15 no deductible			\$O to \$20 no deductible	\$0 to \$15	\$0 to \$6		\$0 to \$20	
Generic	\$25 after deductible	\$10 after deductible		\$20 after deductible	\$25	\$10		\$20	
Preferred Brand	eferred Brand \$87.50 after deductible \$35 after deductible		\$45 after deductible	\$87.50	\$35		\$45		
Non-Preferred Brand	n-Preferred Brand \$200 after deductible \$80 after deductible		\$110 after deductible	\$200	\$80		\$110		
Specialty Not applicable \$150 after deductible N		Not applicable	Not applicable	\$150	Not Applicable	Not applicable			

Maximum of one fill allowed at retail for maintenance medications on the ACA and Preventive Drug Lists. Plan then requires transition to CarolinaCARE, or member will pay full cost, which will not apply to the deductible or annual out-of-pocket expense.

• Opioid prescriptions are limited to 30-day quantity by law.

Specialty drugs are filled at CarolinaCARE only. Some exceptions may apply to drugs in limited distribution.

Specialty drug co-pays may vary with use of manufacturer coupons and co-pay assistance programs.

A few specialty products may be available through Atrium Health retail pharmacies if needed. Please inquire.

Deductible applies to the Health Savings Plan.

Visit CarolinaCARERx.org.

It is recommended you evaluate your current medications and possible need for future medications, and review the formulary to determine cost/tier at CarolinaCARERx.org > Get My Rx Price. If you have a chronic medical condition or take at least one medication on a daily basis, you can make an appointment and review your medication history with a pharmacist at One-on-One Rx.

OUT-OF-POCKET MAXIMUM

Out-of-Pocket Maximum is the most money you could pay annually before the LiveWELL Health Plans pay 100% for covered health care services and prescription medications. This maximum amount includes deductibles, coinsurance and co-payments. This limit does not include premiums, balance-billed charges, health care not covered by the plan and penalties. There is no yearly or lifetime benefit maximum for your health coverage. In addition, there is no pre-existing condition limitation.

		Health Savings PLAN			Co-Pay PLAN				
		Network			Network				
		Value	Preferred	In	Out	Value	Preferred	In	Out
-of- ket num	Teammate-Only	\$4,000		\$12,000	\$4,000		\$8,000		
Out-of- Pocket Maximur	Teammate + Dependent(s) (including Spouse)		\$8,000		\$24,000		\$8,000		\$16,000

The Out-of-Pocket Maximum is for the entire family, but no more than the Out-of-Pocket Maximum for an individual. For example, with the Health Savings Plan, the family Out-of-Pocket Maximum is \$8,000 but no more than \$4,000 for an individual.





DENTAL BENEFITS

Two dental plan options - the Standard Plan and the Enhanced Plan - are offered by Delta Dental.

- Both plans offer 100% coverage for preventive care and 80% coverage for basic care.
- Both plans provide you with comprehensive coverage at the provider of your choice.

	Standard PLAN	Enhanced PLAN
Deductible	\$50 per person \$150 per family	\$50 per person \$150 per family
Annual Maximum Benefit (per individual)	\$1,500	\$2,000
Preventive Care (exams, X-rays, cleanings)	100%	100%
Basic Care (fillings, periodontal services, endodontic service)	80% after deductible	80% after deductible
Major Care (crowns, bridges, dentures)	50% after deductible	80% after deductible
Orthodontia	Not included	50% after deductible; no age limit \$2,000 lifetime max per person

VISION BENEFITS

Vision benefits are administered by CEC Vision.

Key parts of the plan include:

- An annual eye exam
- A benefit allowance of \$375 for eyewear frames, lenses and contact lenses without an office charge (nonprescription sunglasses are included)
- Additional 20% discount on glasses (frames and/or lenses) and 10% discount on contact lenses for any amount over the \$375 allowance
- Contact lens fitting or evaluation annually
- 1,700 in-network doctors and retail opticians

and more

VOLUNTARY BENEFITS

Atrium Health Greater Charlotte provides you with convenient access to cost-effective group rates on a wide range of Voluntary Benefits. Pair these Voluntary Benefits with your core benefits to supplement income in the case of an accident or emergency, protect you and your family's financial future and help balance the important areas of your life. Some voluntary benefit offerings are listed below and more information about all voluntary benefits may be found on **Teammates.AtriumHealth.org.**

BenExtend Insurance provides three benefits in one – accident insurance, critical illness insurance and hospital indemnity. The benefit can help manage out-of-pocket expenses, deductibles and other health care expenses (includes a \$50 annual wellness benefit).

Hospital Admission Insurance provides a one-time payment for hospitalization, as well as daily amount if admitted to the hospital or intensive care unit as a result of a covered accident or sickness.

Accident Insurance provides a benefit for injuries and accident-related expenses (includes a \$50 annual wellness benefit).

Critical Illness Insurance provides a lump sum directly to you if you are diagnosed with a covered critical illness like cancer, severe stroke or heart attack (includes a \$100 annual wellness benefit).



The 2024 LiveWELL Health Plans

SAVINGS AND SPENDING ACCOUNTS

Options available with Health Savings PLAN

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Health Savings Account (HSA)

The HSA is yours to save for current and future health care-related expenses, such as your deductible, coinsurance and prescription medications. Your HSA is an important component of retirement savings. Teammates can make direct contributions to this account from their paycheck and one-time contributions. For participants of the **Health Savings Plan**, the LiveWELL Incentives will be deposited into their HSA.

	IRS Maximum Contribution
Teammate-Only Plan	\$4,150
Family Plan	\$8,300



The maximum IRS contribution for the year includes the sum of all teammate and employer contributions, including incentives. Teammates age 55 or older are allowed an additional "catch-up" contribution of \$1,000.

Here's what you need to know:

Remember, preventive care, labs and most preventive medications are covered **100%** – you do not pay for preventive care. (Note: No coverage provided for out-of-network).

- Your Health Savings Account (HSA) is the key to the Health Savings Plan you can build your savings.
 - It is important for you to save in your HSA by putting in enough to meet your deductible and maximize your savings
 - Dollars in your HSA are not taxed when you put them in or take them out for medical purposes
 - Your HSA is a great savings vehicle for medical expenses now and in retirement
 - HSA Contributions may be changed throughout the year in CORE Connect

Teammate Contributions to Meet IRS Maximum

		Teammate Contribution	LiveWELL Incentive Maximum Earnings	TOTAL
alth ings an ibers	Teammate-Only	\$3,400 Annual Contribution \$130.77 Bi-weekly Contribution	\$750	\$4,150
Hea Savi Pla	Family Plan	\$6,800 Annual Contribution \$261.54 Bi-weekly Contribution	\$1,500	\$8,300

Medicare and Your Health Savings Account (HSA)

LiveWELL Health Plan participants should contact Medicare 6 to 12 months prior to turning age 65 to learn about options for health care coverage and rules for contributing to a Health Savings Account when Medicare eligible.

Questions about Medicare

For help in understanding how Medicare and your health care costs may fit into your overall retirement goals, call the Seniors' Health Insurance Information Program (SHIP) at **855-408-1212**. Teammates can also call the Social Security Administration at **888-383-1598**.

Seniors' Health Insurance Program (SHIIP) details

- SHIIP is available to anyone for FREE
- SHIIP has representatives in every NC county
- Teammates may make appointments for 1:1 phone calls or in-person meetings with a specialist
- Teammates may contact a representative Monday through Friday, 8 a.m. to 5 p.m., by calling the SHIIP consumer information line at **855-408-1212** or via email
- SHIIP can answer detailed questions about Medicare that Social Security Offices may not be able to answer





SAVINGS AND SPENDING ACCOUNTS

Options available with Health Savings PLAN continued

Limited Purpose Flexible Spending Account (LPFSA)

The LPFSA provides teammates with the opportunity to set aside additional pretax dollars to help pay for planned, qualified dental and vision expenses that occur during a 12-month period. This account is use it or lose it.

Teammate-Only and Family Plans IRS Maximum Contribution: \$3,050

Options available with Co-Pay PLAN

Flexible Spending Account (FSA)

The FSA provides teammates with the opportunity to set aside additional pretax dollars to help pay for planned, qualified medical, dental and vision expenses that occur during a 12-month period. This account is use it or lose it.

Teammate-Only and Family Plans IRS Maximum Contribution: \$3,050

LiveWELL Incentive Account

For teammates enrolled in the Co-Pay Plan, Atrium Health will deposit earned LiveWELL Incentives into the LiveWELL Incentive Account in the same year. Funds can be used to help pay for gualified medical, dental and vision expenses. Unused funds rollover from year to year, if teammate remains enrolled in the Co-Pay Plan. Incentives are paid at the level of enrollment at the time of payout.

LIVEWELL

LiveWELL provides activities and education that promote healthy lifestyles for all Atrium Health teammates. Teammates enrolled in most Atrium Health Medical Plans will receive financial incentives deposited into HSA or LiveWELL Incentive Account if they complete each of the pillars.

Health Savings Plan Members	Physical	Financial	Personal	TOTAL
Teammate-Only	\$250	\$250	\$250	\$750
Family	\$500	\$500	\$500	\$1,500
Co-Pay Plan Members	Physical	Financial	Personal	TOTAL
Teammate-Only	\$166.67	\$166.67	\$166.66	\$500

LiveWELL Incentives are paid in the year they are earned with three payout opportunities. Incentive dollars are deposited pretax in the following accounts:

Health Savings PLAN → Health Savings Account

Co-Pay PLAN
LiveWELL Incentive Account

Teammates in positions with an annual base salary of \$38,000 or less will receive an additional \$200 contribution from Atrium Health to either their Health Savings Account (HSA) or LiveWELL Incentive Account per plan eligibility.

The guide contains only highlights of your LiveWELL Health Plans benefits for eligible teammates and is subject to review and modification. Every effort has been made to report information accurately, but the possibility of error exists. In addition, not every health plan detail of every benefit that may matter to you could be included in this guide. Atrium Health's program is governed by the official plan documents. In case of any conflict between this guide and an official plan document, the plan document will be the final authority.

Please refer to your plan document or Summary Plan Descriptions for a full explanation of covered services, exclusions and limitations. If there is a discrepancy between this guide and legal plan documents, the plan documents will control information about all the benefits available

