The 2024 Atrium Health Navicent Health Plans

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

For 2024, Atrium Health Navicent will continue to offer two health plans, the **Health Savings Plan** and the **Co-Pay Plan**.

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.

Overview

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
- Tier 1 Navicent Network offers lowest cost for care
- No cost for annual check-ups

- 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
- Tier 1 Navicent Network offers lowest cost for care
- 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 **Atrium Health Navicent Health Plans**.



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KEY TERMS & PLAN COMPARISON

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

How deductibles work:

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 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.

PREVENTIVE CARE

The Atrium Health Navicent Health Plans cover preventive exams, labs and most preventive medications 100%.

Typically considered preventive care and covered **100%** are: wellness office visits, wellness immunizations, PAP smears, mammograms and colonoscopies.

	Health Savings PLAN		Co-Pay PLAN				
		Network		Network			
		Navicent	In-Network	Out-of-Network	Navicent	In-Network	Out-of-Network
ial ible	How Deductibles Work	Deductibles apply to all office visits, medications and OP/IP services with the exception of preventive care.		No deductibles for office visits, medications or preventive care. Deductibles only apply to OP/IP services. Deductible & Coinsurance			
Annual Deductible	Teammate-Only	\$1,6	800	\$4,000	\$800		\$4,000
ā	Teammate + Dependent(s)	\$3,200 \$8,000		\$1,6	,600 \$8,000		
Coinsurance	Teammate Pays	15%	30%	50%	15%	30%	50%
Coinsu	Plan Pays	85%	70%	50%	85%	70%	50%
	Preventive Care	Covered at 100%		Covered at 100%			
	LiveWELL Care	Before Deductible: \$40 After Deductible: \$15		\$15			
sits	Outpatient & X-ray	15%	30%	50%	15%	30%	50%
Office Visits	Primary Care	Deductible & Coinsurance		\$25	\$30	Deductible &	
#o	Specialist	Deductible & Coinsurance		\$45	\$50	Coinsurance	
	Urgent Care	Deductible & Coinsurance		\$70 50% Coinsurance		50% Coinsurance	
	Emergency Department	Deductible & Coinsurance		\$175 & Coinsurance			

NETWORKS

The Atrium Health Navicent Network offers the most cost-effective tier 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 Navicent Network.

\$ Navicent Health Providers and Facilities	The most cost-effective tier; includes the exceptional network of primarily Atrium Health Navicent physicians, providers, facilities and laboratories
\$\$ In-Network	Includes the Secure Health 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 Navicent physicians and providers, go to www.SHPG.com and search Providers.

PRESCRIPTION MEDICATIONS

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

Retail Pharmacy: Any pharmacy outside of CarolinaCARE which can be used for filling one-time prescriptions.

	Health Savings PLAN			
	Retail (up to a 30-day supply)	CarolinaCARE Mail Service (30-day supply)	CarolinaCARE Mail Service (90-day supply)	
ACA Preventive*	\$0 to \$20	\$0 to \$6	\$0 to \$15	
	no deductible	no deductible	no deductible	
Generic	\$20	\$10	\$25	
	after deductible	after deductible	after deductible	
Preferred Brand	\$45	\$35	\$87.50	
	after deductible	after deductible	after deductible	
Non-Preferred Brand	\$110	\$80	\$200	
	after deductible	after deductible	after deductible	
Specialty	Not applicable	\$150 after deductible	Not applicable	

Co-Pay PLAN					
Retail (up to a 30-day supply)	CarolinaCARE Mail Service (30-day supply)	CarolinaCARE Mail Service (90-day supply)			
\$0 to \$20	\$0 to \$6	\$O to \$15			
co-pay	co-pay	co-pay			
\$20	\$10	\$25			
co-pay	co-pay	co-pay			
\$45	\$35	\$87.50			
co-pay	co-pay	co-pay			
\$110	\$80	\$200			
co-pay	co-pay	co-pay			
Not applicable	\$150 co-pay	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.
- Deductible applies to the Health Savings Plan.
- 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
- A few specialty products may be available through Atrium Health retail pharmacies if needed.
 Please inquire.
- Specialty drug co-pays may vary with use of manufacturer coupons and co-pay assistance programs.

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. Visit **CarolinaCARERx.org**.

OUT-OF-POCKET MAXIMUM

Out-of-Pocket Maximum is the most money you could pay annually before the **Atrium Health Navicent Health Plans** pay 100% for covered health care services and prescription medications. This maximum amount includes deductibles, coinsurance and co-payments and may be satisfied through a combination of Atrium Health Navicent facilities and in network providers. 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, on the **Co-Pay Plan**, there is no pre-existing condition limitation.

Out-of-Pocket Maximum Individual/Family

Medical

Prescription Drugs

Health Savings PLAN						
Network						
Navicent In-Network Out-of-Network						
\$4,000/\$8,000	\$4,000/\$8,000	\$7,200/\$14,400				
Included with Medical	Included with Medical	Included with Medical				

Co-Pay PLAN					
Network					
Navicent In-Network Out-of-Network					
\$4,000/\$8,000	\$4,000/\$8,000	\$7,200/\$14,400			
Included with Medical	Included with Medical	Included with Medical			





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DENTAL BENEFITS

Two dental plan options - the Basic Plan and the Standard Plan - are offered by MetLife.

- The **Basic Plan** offers 75% coverage for preventive care while the **Standard Plan** offers 100% coverage.
- Both plans provide you with comprehensive coverage, including orthodontia, at the provider of your choice.

	Basic PLAN	Standard PLAN
	\$50 per person	\$50 per person
	\$1,500	\$2,000
	75%	100%
)	80% after deductible	80% after deductible
	50% after deductible	50% after deductible
	50% after deductible (children only)	50% after deductible (adults and children)

Deductible

Annual Maximum Benefit (per individual)

Preventive Care

(exams, X-rays, cleanings)

Basic Care (fillings, periodontal services, endodontic service)

> **Major Care** (crowns, bridges, dentures)

> > Orthodontia

VISION BENEFITS

Vision benefits are administered by CEC Vision.

Key parts of the plan include:

- An annual eye exam
- A benefit allowance of \$170 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 \$170 allowance
- Contact lens fitting or evaluation annually
- 1,700 in-network doctors and retail opticians and more

VOLUNTARY BENEFITS

Atrium Health Navicent 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 amounts 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).

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SAVINGS AND SPENDING ACCOUNTS

Options available with Health Savings PLAN

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.

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

^{*}Calculation assumes teammate contributions begin the first pay period in January

Medicare and Your Health Savings Account (HSA)

Atrium Health Navicent 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 (Georgia Cares) at **866-552-4464**. Teammates can also call the Social Security Administration at **888-759-3917**.

Seniors' Health Insurance Program (Georgia Cares) details:

- Georgia Cares is available to anyone for FREE
- Teammates may make appointments for 1:1 phone calls or in-person meetings with a specialist
- Teammates may contact a representative by calling Georgia Cares at 866-552-4464 or through www.MyGeorgiaCares.org
- Georgia Cares can answer detailed questions about Medicare that Social Security Offices may not be able to answer



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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 qualified medical, dental and vision expenses. Unused funds rollover from year to year. 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:

\$333

\$334

\$1,000

Health Savings PLAN Health Savings Account

Co-Pay PLAN LiveWELL Incentive Account

Family

\$333

Teammates in positions with an annual base salary of \$35,000 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 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.