

The 2025 LiveWELL Health Plans

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

For 2025, 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

This guide gives you an overview of our 2025 health plans. Find 2025 contribution rates at totalrewards.org.

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 when care is received

Health Savings PLAN

- 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 Health Savings Account
- Value Network offers a teammate discount
- No cost for annual check-ups

Co-Pay PLAN

- 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
- No cost for annual check-ups



Find the right health plan for you

The Help Me Choose tool is available during enrollment to help teammates decide which health plan is best for them.

The 2025 LiveWELL Health Plans

KEY TERMS & PLAN COMPARISON

A **DEDUCTIBLE** is the amount you owe for covered health care services before the plan begins to pay benefits

How deductibles work on 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 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.

		Health Savings PLAN				Co - Pay PLAN			
		Network				Network			
		Value	Preferred	In	Out	Value	Preferred	In	Out
Annual Deductible	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.			
	Teammate-Only	\$1,800			\$5,000	\$800			\$5,000
	Teammate + Dependent(s)	\$3,600			\$10,000	\$1,600			\$10,000
Coinsurance	Teammate Pays	15%	25%	30%	50%	15%	25%	30%	50%
	Plan Pays	85%	75%	70%	50%	85%	75%	70%	50%
Office Visits	Preventive Care	Covered at 100%			No coverage provided	Covered at 100%			No coverage provided
	E-Visit / Virtual Visit	Before Deductible: \$10 After Deductible: \$0				\$0			
	LiveWELL Care	Before Deductible: \$40 After Deductible: \$15				\$15			
	Primary Care	Deductible & Coinsurance				\$20	\$25	\$30	Deductible & Coinsurance
	Specialist	Deductible & Coinsurance				\$40	\$45	\$50	
	Urgent Care	Deductible & Coinsurance				\$70			
	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](https://www.medicost.com) and click Find a Doctor.

Effective Jan. 1, 2025, we are moving from the First Health Network to the Cigna Healthcare Network for teammates and/or their dependents who live outside the service area.

The 2025 LiveWELL Health Plans

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			
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*	\$0-\$15 no deductible	\$0-\$6 no deductible	\$0-\$20 no deductible
Generic	\$25 after deductible	\$10 after deductible	\$20 after deductible
Preferred Brand	\$87.50 after deductible	\$35 after deductible	\$45 after deductible
Non-Preferred Brand	\$200 after deductible	\$80 after deductible	\$110 after deductible
Specialty	N/A	\$150 after deductible	N/A

- 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 costs, which will not apply to deductible or annual out-of-pocket expense.
- Deductible applies to the Health Savings Plan.
- A few specialty products may be available through Atrium Health retail pharmacies if needed. Please inquire.

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)
\$0-\$15	\$0-\$6	\$0-\$20	
\$25	\$10	\$20	
\$87.50	\$35	\$45	
\$200	\$80	\$110	
N/A	\$150	N/A	N/A

- 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
- Cost share for certain drugs may vary with use of manufacturer coupons and co-pay assistance programs which will not apply to deductibles and/or out-of-pocket maximums.

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](#). 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 [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
Out-of-Pocket Maximum	Teammate-Only	\$5,000			\$12,000	\$5,000			\$8,000
	Teammate + Dependent(s) (including Spouse/Partner)	\$10,000			\$24,000	\$10,000			\$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 \$10,000 but no more than \$5,000 for an individual.

The 2025 LiveWELL Health Plans

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.
- The Enhanced Plan offers orthodontia coverage.

	Standard PLAN	Enhanced PLAN
Deductible	\$50 per person \$150 per family	\$50 per person \$150 per family
Annual Benefit Maximum (per individual)	\$1,500	\$2,000
Preventive Care (exams, X-rays, cleanings)	100%	100%
Basic Care (fillings, periodontal services, endodontic services)	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 (\$15 co-pay)
- A benefit allowance of \$375 for eyewear – frames, lenses and contact lenses – without an office charge (non-prescription 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 (\$15 co-pay)
- 1,700 in-network doctors and retail opticians

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 totalrewards.org.

BenExtend Insurance provides three benefits in one – Accident Insurance, Critical Illness Insurance and Hospital Admission. 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 2025 LiveWELL Health Plans

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. For participants of the **Health Savings Plan**, the LiveWELL Incentives will be deposited into their HSA.

	IRS Maximum Contribution
Teammate-Only Plan	\$4,300
Family Plan	\$8,550



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. (Please note: No coverage provided for out-of-network).

- **Your 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 at totalrewards.org

Medicare and Your Health Savings Account

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 North Carolina 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

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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: \$3,200

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: \$3,200

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 roll over from year to year if teammates remain 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	\$166.67	\$500
Family	\$333	\$333	\$334	\$1,000

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 or LiveWELL Incentive Account per plan eligibility.

If you have questions, please contact the Benefits Service Center at 800-775-4784, Monday through Friday, 8 a.m. to 7 p.m. ET
Translation services are available.

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.