

My Health. My Choice.

The 2020 LiveWELL Health Plans

Teammates asked for a choice. We have heard the **#VoiceoftheTeammate**.

For 2020, we are adding a co-pay-based health plan option, improving the existing LiveWELL Health Plan, and both health plan options will have an Atrium Health Value Network with enhanced teammate discounts.

The Atrium Health Value Network is a new network that provides the highest level of benefit, which includes an improved teammate discount on fees for service.

The **Health Savings Plan**

An improved version of the 2019 LiveWELL Health Plan

Key improvements:

- Family premiums will be lowered between \$34 and \$51 per bi-weekly pay period (\$884 to \$1,326 annually)
- Deductibles will be lowered for individuals from \$1,850 to \$1,400 and for families from \$3,700 to \$2,800

The **Co-Pay Plan**

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

Key features:

- Co-pays for primary care, specialty care and medications with no deductibles
- No deductibles (with the exception of inpatient and outpatient services)
- Earned LiveWELL Incentives go pretax into LiveWELL Incentive Account
- Flexible Spending Account (FSA) provides pretax dollars for healthcare expenses

Here is a snapshot of how the plans compare:

Health Savings PLAN

- Premium: Lower cost per pay period
- Deductible (except for preventive care)
- Coinsurance begins after deductible is met
- Higher out-of-pocket maximum
- HSA: pretax, rolls over
- LiveWELL Incentive goes pretax into HSA
- Value Network offers an improved 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
- Lower out-of-pocket maximum
- FSA: pretax, use it or lose it
- LiveWELL Incentive goes pretax into LiveWELL Incentive Account
- Value Network offers an improved teammate discount
- No cost for annual check-ups

Health Savings PLAN

Co-Pay PLAN

		Full-time Non-tobacco Premiums				Full-time Non-tobacco Premiums			
Cost per pay period (based on bi-weekly pay)	Teammate Only	\$25.00				\$57.50			
	Teammate + Spouse	\$130.00				\$180.00			
	Teammate + Child(ren)	\$90.00				\$140.00			
	Teammate + Family	\$180.00				\$240.00			
		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	\$1,400		\$4,000		\$800		\$4,000	
	Teammate + Dependent(s)	\$2,800		\$8,000		\$1,600		\$8,000	
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%				Covered at 100%			
	E-Visit/Virtual Visit	Before Deductible: \$25 After Deductible: \$10				\$10			
	On-Site 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	\$70	\$70	
	Emergency Department	Deductible & Coinsurance				\$175			
Prescription Medication (30-day supply)	ACA Preventive	\$0 to \$6 no deductible		\$0 to \$20		\$0 to \$6		\$0 to \$20	
	Generic	\$10 after deductible		\$20		\$10		\$20	
	Preferred Brand	\$35 after deductible		\$45		\$35		\$45	
	Non-Preferred Brand	\$100 after deductible		\$110		\$100		\$110	
	Specialty	\$150 after deductible		N/A		\$150		N/A	
Services	Outpatient (OP)	Deductible & Coinsurance				Deductible & Coinsurance			
	Inpatient (IP)	Deductible & Coinsurance				Deductible & Coinsurance			
Out-of-Pocket Maximum	Teammate Only	\$6,000		\$12,000		\$4,500		\$8,000	
	Teammate + Dependent(s)	\$10,000		\$24,000		\$8,000		\$16,000	
LiveWELL Incentives	Teammate Only	\$750				\$750			
	Teammate + Dependent(s)	\$1,500				\$1,500			