MEDICAL PLAN OVERVIEW

AETNA HIGH DEDUCTIBLE HEALTH PLAN WITH HSA (HDHP)

Take control of your spending by keeping more of your paycheck through lower contributions, in exchange for higher deductibles. Save on health care expenses through tax-free contributions to your HSA or Limited Purpose FSA. Plus, Endeavor automatically contributes to your HSA!

AETNA OPEN ACCESS NETWORK ONLY 80/0 PLAN

Receive coverage for innetwork care only (except for emergencies), while saving money with relatively low contributions and the lowest deductibles of all four plans.

AETNA CHOICE POS II 80/60 PLAN

Balance the cost of your coverage and care with relatively low deductibles and moderate contributions. AETNA CHOICE POS II 90/80 PLAN

Keep your out-of-pocket costs as low as possible by paying a low coinsurance percentage and smaller copays, in exchange for higher contributions from your paycheck.

COMPARING PLAN FEATURES

	Open Access Network Only 80/0 Plan Choice POS II 80/60 Plan Choice POS II 90/80 Plan	HDHP with HSA	
Deductible	 Applies to medical services only "Embedded" deductible, meaning individual and family deductibles apply, however, coinsurance begins for an individual once that individual hits their own deductible 	 Applies to both medical and prescription drug services "True Family" deductible, meaning coinsurance does not begin for anyone until the family deductible is satisfied (\$4,000), even if only one individual is incurring claims 	
Out-of-Pocket Maximum (OOPM)	"Embedded" OOPM, meaning each individual has their own OOPM they must hit before the plan fully covers services for that person		
Prescription Drug	Coverage begins immediately	Coverage begins once deductible is met	
Preventive Care	100% coverage applies to medical services	 100% coverage applies to medical services and certain prescription drugs 	
Spending & Savings Accounts	 Offered with a Health Care Flexible Spending Account (HCFSA) Funds are "use it or lose it" (only a fraction of the funds can be carried over to the next year) 	 Offered with a Health Savings Account (HSA) that has a triple tax advantage and Endeavor contributes to Enrollees can have a Limited Purpose FSA 	
Plan Cost Share	Select medical services are covered by a fixed amount or "copay" when you receive a covered service and whether or not you hit your deductible does not impact those costs (e.g., \$200 copay for emergency room visit, \$25 copay for primary care visit)	For all non-preventive medical and pharmacy services , you must first meet your deductible , then you will pay "coinsurance" or a percentage of the medical bill (e.g., you pay 20% after the deductible is met for an emergency room visit or for a primary care visit)	

Changes to 90/80 Plan and 80/60 Plan: Updates are highlighted with bold text.

	High Deductible Plan with HSA	Open Access Network Only 80/0 Plan	Choice POS II 80/60 Plan	Choice POS II 90/80 Plan			
Annual Deductible (single/family)							
In-network	\$2,000/\$4,000	\$250/\$625	\$500/ \$1,500	\$1,000/\$2,000			
Out-of-network	\$4,000/\$8,000	N/A	\$1,000/\$3,000	\$1,500/\$3,000			
		Coinsurance					
In-network	You pay 20%, plan pays 80%	You pay 20%, plan pays 80%	You pay 20%, plan pays 80%	You pay 10%, plan pays 90%			
Out-of-network	You pay 40%, plan pays 60%	N/A	You pay 40%, plan pays 60%	You pay 20%, plan pays 80%			
Annual Out-of-Pocket Maximum (single/family)							
In-network	\$5,000/\$10,000	\$4,000/\$7,000	\$4,000/\$7,000	\$3,000/\$6,000			
Out-of-network	\$10,000/\$20,000	N/A	\$6,500/\$12,000	\$4,000/\$8,000			
Office Visit (Primary Care Physician)							
In-network	You pay 20% after deductible	\$25 copay	\$25 copay	\$25 copay			
Out-of-network	You pay 40% after deductible	N/A	You pay 40% after deductible	You pay 20% after deductible			
Pharmacy (30-day supply; retail pharmacy; in-network only)							
Generic	\$20 copay after deductible	\$20 copay	\$20 copay	\$20 copay			
Preferred brand	\$30 copay after deductible	\$30 copay	\$30 copay	\$30 copay			
Non-preferred brand	\$40 copay after deductible	\$40 copay	\$40 copay	\$40 copay			
Maximum Contribution to Savings or Spending Account (single/family)							
Flexible Spending Account	Limited Purpose FSA - \$3,300	Health Care FSA - \$3,300	Health Care FSA - \$3,300	Health Care FSA - \$3,300			
Health Savings Account	HSA - \$4,300/\$8,550 (Endeavor's contribution: \$500/\$1,000)	Not eligible	Not eligible	Not eligible			

Family = Employee + Child(ren) or Employee + Spouse + Child(ren)

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*Note: If you visit an out-of-network provider, you are responsible for any charges above the usual, customary, and reasonable (UCR) limits.

WHICH MEDICAL PLAN IS RIGHT FOR ME?

Take a moment to think. Do you...

High Deductible Plan with	Open Access Network Only	Choice POS II	Choice POS II
HSA	80/0 Plan	80/60 Plan	90/80 Plan
 Typically only seek preventive care (vaccines, well person exam) and infrequent diagnostic care (like urgent care visits) Like the idea of having a tax- advantaged Health Savings Account (HSA) that you and Endeavor contribute to, and you can use for today's and tomorrow's expenses Want to pay the least amount for coverage out of your paycheck 	 Only use in-network providers and don't need coverage for out-of- network providers Like the idea of having fixed, predictable copays for diagnostic care Feel comfortable paying slightly more for coverage than the HDHP and not having out-of-network access in exchange for copays 	 Want to have access to in- and out- of-network care Like the idea of having fixed, predictable copays for diagnostic care even if paycheck contributions are among the highest Feel comfortable using a Flexible Spending Account (FSA) for out-of- pocket health care costs 	 Almost exclusively use out-of- network providers Feel comfortable paying the highest paycheck contributions for more predictable copays rather than saving more in a tax-advantaged HSA and having less predictable expenses when receiving care

All plans cover the same comprehensive health care services and use the same Aetna network.

Remember to use the Health Plan Cost Estimator to find a personalized fit for your needs!