

Cigna & UHC Medical Plan Comparison

Both the Cigna & UHC plans are identical, but use a different network.

	CIGNA & UHC ECONOMY	CIGNA & UHC STANDARD	CIGNA & UHC PREMIER HDHP
COVERAGE	IN NETWORK	IN NETWORK	IN NETWORK
PLAN YEAR DEDUCTIBLE (ALL DEDUCTIBLES ARE EMBEDDED)			
Individual	\$500	\$2,000	\$3,200
Family	\$1,000	\$4,000	\$6,400 (embedded)
COINSURANCE AFTER DEDUCTIBLE (MEMBER PAYS)			
Member Pays	After deductible, 30%	After deductible, 20%	After deductible, 30% unless otherwise noted
PLAN YEAR OUT-OF-POCKET MAXIMUM (INCLUDES DEDUCTIBLE)			
Individual	\$7,350	\$7,150	\$6,900
Family	\$14,700	\$14,300	\$13,800
SERVICES COPAYMENTS AND/OR COINSURANCE AFTER DEDUCTIBLE			
Preventive Care Services	Covered in Full	Covered in Full	You pay \$0 for annual physicals and well child visits*
Primary Care Physician	\$20 copay	\$20 copay	After deductible, then \$45 copay
Specialist	\$40 copay	\$40 copay	After deductible, then \$90 copay
Urgent Care	After deductible, 30%	\$40 copay	After deductible, then \$90 copay
Hospital Admission	Outpatient: after deductible, 30% Inpatient: after deductible, 50% Maternity: after deductible, 50%	Outpatient: After deductible, 20% Inpatient: After deductible, 20% Maternity: After deductible, 20%	Inpatient: After deductible, 30%
Emergency Room	\$350 Co-pay, then 30% after deductible	\$350 copay, then 20% after deductible	After deductible, then \$300 copay and 30%
Diagnostic Lab & X-Ray Services	Minor: 30% Major: 30%	Minor: After deductible, 20% Major: After deductible, 20%	After deductible, 30%
Mental Health Services	Inpatient: after deductible, 50% Outpatient: 30% Outpatient office: \$20 copay	Inpatient: After deductible, 20% Outpatient: After deductible, 20% Outpatient office: \$20 copay	Inpatient: After deductible, 30% Outpatient: After deductible, then \$45 copay
Virtual Urgent Care	Covered 100%	Covered 100%	\$55 copay until after deductible, then \$35 copay

*These services are NOT subject to deductible.

2024 Cigna & UHC Weekly Medical Premiums

	SALARY BANDS								
CIGNA & UHC ECONOMY	<\$30K	\$30K-\$49,999	\$50K-\$74,999	\$75K-\$99,999	\$100K-\$149,999	\$150K-\$199,999	\$200K-\$349,999	\$350K-\$499,999	\$500K+
TM Only	\$9.71	\$10.71	\$11.97	\$13.84	\$18.93	\$20.65	\$39.00	\$75.11	\$115.43
TM + Child	\$77.12	\$84.86	\$94.27	\$108.70	\$123.70	\$138.31	\$197.71	\$257.19	\$277.02
TM + 2 Children	\$41.70	\$45.90	\$51.02	\$58.85	\$69.28	\$77.19	\$102.46	\$145.41	\$178.91
TM + 3 Children	\$44.40	\$48.87	\$54.31	\$62.59	\$73.68	\$82.13	\$109.02	\$154.73	\$242.39
TM + 4 or more Children	\$47.10	\$51.83	\$57.61	\$66.33	\$78.08	\$87.08	\$115.58	\$164.04	\$305.88
TM + Spouse	\$49.79	\$54.80	\$60.90	\$70.07	\$82.48	\$92.02	\$122.14	\$173.35	\$369.36
TM + Spouse + 1 Child	\$99.79	\$109.80	\$121.95	\$140.61	\$165.49	\$185.25	\$264.81	\$321.58	\$340.50
TM + Spouse + 2 Children	\$104.65	\$115.14	\$127.88	\$147.34	\$173.42	\$194.15	\$287.45	\$374.85	\$403.99
TM + Spouse + 3 Children	\$109.51	\$120.49	\$133.81	\$154.08	\$181.34	\$203.05	\$300.63	\$441.90	\$467.47
TM + Spouse + 4 or more Children	\$114.37	\$125.83	\$139.75	\$160.81	\$189.26	\$211.95	\$313.80	\$461.26	\$530.96
CIGNA & UHC STANDARD	<\$30K	\$30K-\$49,999	\$50K-\$74,999	\$75K-\$99,999	\$100K-\$149,999	\$150K-\$199,999	\$200K-\$349,999	\$350K-\$499,999	\$500K+
TM Only	\$19.23	\$21.18	\$23.58	\$27.23	\$37.32	\$41.30	\$67.46	\$119.68	\$128.62
TM + Child	\$100.20	\$110.25	\$122.45	\$141.18	\$160.64	\$179.81	\$238.67	\$291.19	\$308.70
TM + 2 Children	\$58.29	\$64.15	\$71.28	\$82.21	\$96.76	\$108.06	\$143.44	\$185.39	\$199.37
TM + 3 Children	\$60.99	\$67.12	\$74.58	\$85.93	\$101.14	\$112.98	\$149.97	\$212.84	\$270.11
TM + 4 or more Children	\$63.69	\$70.09	\$77.87	\$89.65	\$105.52	\$117.90	\$156.49	\$222.10	\$340.86
TM + Spouse	\$66.39	\$73.06	\$81.17	\$93.37	\$109.90	\$122.82	\$163.02	\$231.37	\$411.60
TM + Spouse + 1 Child	\$131.57	\$144.76	\$160.76	\$185.33	\$218.12	\$244.37	\$324.37	\$365.67	\$379.44
TM + Spouse + 2 Children	\$136.43	\$150.10	\$166.69	\$192.04	\$226.01	\$253.23	\$349.06	\$424.90	\$450.19
TM + Spouse + 3 Children	\$141.29	\$155.45	\$172.62	\$198.74	\$233.90	\$262.09	\$361.27	\$512.73	\$520.93
TM + Spouse + 4 or more Children	\$146.15	\$160.79	\$178.55	\$205.45	\$241.79	\$270.95	\$359.65	\$510.44	\$591.67
CIGNA & UHC PREMIER HDHP	<\$30K	\$30K-\$49,999	\$50K-\$74,999	\$75K-\$99,999	\$100K-\$149,999	\$150K-\$199,999	\$200K-\$349,999	\$350K-\$499,999	\$500K+
TM Only	\$18.08	\$19.91	\$22.17	\$25.60	\$35.08	\$38.82	\$63.42	\$112.50	\$120.91
TM + Child	\$94.19	\$103.63	\$115.10	\$132.71	\$151.00	\$169.02	\$224.35	\$273.72	\$290.18
TM + 2 Children	\$54.80	\$60.30	\$67.01	\$77.28	\$90.96	\$101.58	\$134.83	\$174.26	\$187.41
TM + 3 Children	\$57.33	\$63.10	\$70.10	\$80.77	\$95.07	\$106.20	\$140.97	\$200.07	\$253.91
TM + 4 or more Children	\$59.87	\$65.89	\$73.20	\$84.27	\$99.19	\$110.82	\$147.10	\$208.78	\$320.40
TM + Spouse	\$62.41	\$68.68	\$76.30	\$87.77	\$103.30	\$115.45	\$153.24	\$217.49	\$386.90
TM + Spouse + 1 Child	\$123.68	\$136.07	\$151.11	\$174.21	\$205.04	\$229.71	\$304.90	\$343.73	\$356.68
TM + Spouse + 2 Children	\$128.24	\$141.10	\$156.69	\$180.52	\$212.45	\$238.04	\$328.11	\$399.41	\$423.18
TM + Spouse + 3 Children	\$132.81	\$146.12	\$162.26	\$186.82	\$219.87	\$246.37	\$339.60	\$481.97	\$489.67
TM + Spouse + 4 or more Children	\$137.38	\$151.14	\$167.84	\$193.12	\$227.28	\$254.69	\$338.07	\$479.81	\$556.17

Pharmacy — Cigna & UHC

	CIGNA & UHC ECONOMY IN-NETWORK	CIGNA & UHC STANDARD IN-NETWORK	CIGNA & UHC PREMIER HDHP IN-NETWORK
Deductible (separate)	\$500 Per Individual	\$500 Per Individual	You pay \$0 (no deductible) for ACA preventive care class.
Pharmacy	Tier 1: \$10 Tier 2: 70% after pharmacy deductible Tier 3: 50% after pharmacy deductible Tier 4: 50% after pharmacy deductible	Tier 1: \$10 Tier 2: 70% (\$150 Max) after pharmacy deductible Tier 3: 50% (\$300 Max) after pharmacy deductible Tier 4: 50% (\$500 Max) after pharmacy deductible	Tier 1: After deductible, then \$10 copay Tier 2: After deductible, then 25% (\$40 min/\$60 max) Tier 3: After deductible, then 40% (\$60 min/\$100 max) Tier 4: After deductible, then 40% (\$60 min/\$500 max)
Maintenance Drugs or Mail Order	Tier 1: \$20 Tier 2: 70% after pharmacy deductible Tier 3: 50% after pharmacy deductible Tier 4: Not covered	Tier 1: \$20 Tier 2: 70% (\$450 Max) after pharmacy deductible Tier 3: 50% (\$900 Max) after pharmacy deductible Tier 4: Not covered	Tier 1: After deductible, then \$25 copay Tier 2: After deductible, then 25% (\$100 min/\$150 max) Tier 3: After deductible, then 40% (\$150 min/\$250 max) Tier 4: Not covered

Using your pharmacy benefits

OptumRx is your plan's pharmacy services manager and is committed to helping you find cost-effective ways to get your medications.

Set up your online account

Once registered on myuhc.com, access the pharmacy section to:

- Manage your home delivery medications
- Set up email or text message reminders
- Check your order status

Use the UnitedHealthcare app

Manage your prescription benefit and home delivery orders with the UnitedHealthcare app on your smartphone or tablet.

Use a network pharmacy

Be sure to fill your prescriptions at a network pharmacy, otherwise they may not be covered or you may pay more. Finding a network pharmacy is easy:

- Log in to myuhc.com
- Or use the UnitedHealthcare app
- Or call the number on your health plan ID card

Home delivery from OptumRx

Use OptumRx® home delivery to help manage the medications you take regularly. Home delivery is reliable and offers the following advantages:

- Cost savings
 - You may pay less for your medication with a 3-month supply through OptumRx®.
- Convenience
 - Get free standard shipping.
 - 24/7 access and reminders
 - Speak to a pharmacist any time, any day. Set up medication reminders.

You may be able to refill your home delivery prescriptions automatically through the Automatic Refill program.

If you need your medication right away, ask your doctor for a 1-month prescription to fill at a local pharmacy and a 3-month prescription you can use to set up home delivery.

CHOOSE HOME DELIVERY

BY GOING ONLINE:

Visit myuhc.com, register and follow the simple step-by-step instructions.

BY PHONE:

Call the member phone number on the back of your plan ID card. It's helpful to have your plan ID card and medication bottle available.

BY EPREScribe:

Your doctor can send an electronic prescription to OptumRx. Prescriptions for controlled substances, such as opioids, can only be ordered by ePrescribe.

Health Savings Account

HEALTH SAVINGS ACCOUNT

The HSA not only allows you to set aside pre-tax dollars out of your paycheck to help pay for your insurance deductible and out-of-pocket medical expenses, but it also offers a **triple tax savings!**

Your contributions...



Are deducted from your paycheck on a pre-tax basis



Grow tax deferred while in your account



Are not taxed upon withdrawal, as long as they are used to pay qualifying medical expenses

The funds you save can help cover your immediate medical expenses and can be used to cover your expenses long term even after you retire. In addition, **your HSA is not a use-it or lose-it account. You can keep your money in the account for as long as you want, and your account is portable** — it goes with you if you ever leave the company.

Also, if your HSA balance is above \$1,000, you have the ability to **invest your money** so it grows even more!

Your Eligibility

There are specific requirements to open and contribute to an HSA. It's important to identify your HSA eligibility status during your enrollment. You are eligible for an HSA if:

- **You are enrolled in a high deductible health plan** (including the HDHP) and have no other health coverage.
- You or your covered spouse do **not** participate in a Healthcare Flexible Spending Account.
- You are **not** enrolled in Medicare.
- You are **not claimed as a dependent** on someone else's tax return.

Eligible Expenses

Some common eligible expenses may include:

- Deductibles, coinsurance, copayments
- Dental and vision care expenses
- Additional orthodontia expenses not covered by a dental plan
- Prescription drug costs
- Over-the-counter medications prescribed by a physician (for example, insulin)
- Procedures or expenses that are medically necessary
- Doctor-prescribed weight loss programs

Visit IRS Publication 502 for more details on eligible expenses:

<https://www.irs.gov/publications/p969>.

2024 HSA LIMITS

The IRS limits HSA contributions on a yearly basis. The 2024 limits are:

- **Individual** - \$4,150
- **Family** - \$8,300
- **Age 55 and older** - an additional \$1,000 per year for catch-up contributions

CHANGING YOUR CONTRIBUTION

Changes to your HSA contributions may be made anytime during the year online through the Asbury Benefits website or by calling **877-815-1730**.

YOU ENROLLED – NOW WHAT?

Upon election, the HSA bank account is opened in the team member's name with Optum Bank. All funds are 'owned' by the participant once deposited in the account. If the account is not approved by Optum Bank, the team member's funds will be refunded and any future HSA contributions will be stopped. A debit card will be provided for you to use. You can use your debit card to pay for your qualified out-of-pocket expenses.

Healthcare Flexible Spending Account

A Healthcare FSA and Dependent Care FSA allows you to set aside pretax dollars to pay for eligible healthcare expenses. The annual maximum is \$3,050 for the Healthcare FSA and \$5,000 for Dependent Care. You do not have to be enrolled in any of Asbury's benefits to participate in the FSA plan.

Eligible healthcare expenses include medical, pharmacy, dental, and vision out-of-pocket expenses. Your contributions should be budgeted expenses that you know you will incur. If you don't use all of your funds, you will lose them at the end of the year. This is called the "Use it or lose it" rule. So be sure to **use all of your annual FSA contributions or incur eligible expenses by December 31, 2024, and request reimbursement by March 31, 2025**, or you will forfeit the monies you contributed during 2024.

Eligible Expense examples:

- Deductibles, coinsurance, and copays under your medical, dental, and vision plans
- LASIK or other vision correction surgery
- Hearing aids
- Psychiatric and psychological counseling
- Certain over-the-counter medications if accompanied by a prescription

For a complete listing of eligible healthcare expenses that qualify for reimbursement, please refer to www.irs.gov, Publication 502, Medical and Dental Expenses.

Auto Submission

If you go to the doctor and forget to use the debit card dollars directly for a copay that has to be paid at the time of service, you will receive a reimbursement from any available FSA dollars.

If you go to the doctor and don't have to pay anything upfront, any billed expense (such as a deductible) that is not paid using your debit card will be reimbursed to you from any available FSA dollars. You can then use that reimbursement to pay the provider.

Orthodontia

If using FSA for child orthodontia treatment, please contact UHC at **844-562-6294** to inquire about payment procedures before you elect the amount to contribute in 2024.



USE IT OR LOSE IT

DECEMBER 31, 2024

Services must be performed by December 31, 2024, to be eligible for reimbursement.



MARCH 31, 2025

You must submit reimbursement claims by March 31, 2025. If you do not request reimbursement by that date, you will forfeit the unused money contributed during 2024.

HSA vs. FSA

	HEALTH SAVINGS ACCOUNT	HEALTHCARE FSA	DEPENDENT CARE FSA
Can I be enrolled in the High Deductible Health Plan (HDHP)?	Yes (but you cannot have both an FSA and HSA)	Yes (but you cannot have both an FSA and HSA)	Yes (but you cannot have both an FSA and HSA)
Can I be enrolled a Non-HSA Plan?	No	Yes	Yes
Do I have to be enrolled in an eligible medical plan through Asbury?	Yes. You must be enrolled in the HDHP 5500 or the Premier HDHP option to have the HSA.	No. You don't have to be enrolled in medical through Asbury.	No. You don't have to be enrolled in medical through Asbury.
What healthcare expenses can this be used for?	Deductibles, copays, coinsurance, dental expenses, vision expenses, prescription drugs, and more. See a full list at https://www.irs.gov/publications/p969 .	Deductibles, copays, coinsurance, dental expenses, vision expenses, prescription drugs, over-the-counter medications accompanied by a doctor's prescription, and more. See a full list at https://www.irs.gov/publications/p502 .	Childcare for dependents, age 12 or younger. Including daycare, preschool, and summer day camp. You can also pay for adult care for a spouse or a dependent who is incapable of self-care, including elder care and in-home aids. See a full list at https://www.irs.gov/publications/p502 .
What are the annual IRS limits?	\$4,150 for a single and \$8,300 for a family. Additional \$1,000 of catch up contributions if you are age 55+.	The annual minimum is \$260 and the annual maximum is \$3,050.	The annual limit is \$5,000.
Do the funds roll over year after year?	Yes. You own the account and the money rolls over to the next year.	No. You will lose these funds at the end of the year if you do not use them.	No. You will lose these funds at the end of the year if you do not use them.
Are there investment options?	Yes, for balances over \$1,000.	No.	No.

THE HSA AND FSA

The IRS does **not** permit a participant to contribute to both an HSA and a Healthcare FSA at the same time. Also, if you are enrolled in Medicare, you are not eligible to contribute to an HSA.

