Your 2025 Medical Plans at a Glance

When comparing the plans, it's important to note that a separate deductible, out-of-pocket maximum, and coinsurance apply to out-of-network services. The table below reflects annual amounts.

Note: Employees scheduled to work 20 to 29 hours per week and separate paycheck costs apply.

	CDHP Blue with HSA		CDHP Green with HSA	
How the Options are Different				
Your annual medical paycheck costs¹ (excludes tobacco-free discount and working spouse/partner surcharge)	Full-Time Employees	Part-Time Employees	Full-Time Employees	Part-Time Employees
	\$634 Individual	\$4,549 Individual	\$300 Individual	\$4,164 Individual
	\$2,593 2-Party	\$9,761 2-Party	\$1,718 2-Party	\$8,886 2-Party
	\$4,570 2-Party Plus	\$14,981 2-Party Plus	\$3,258 2-Party Plus	\$13,670 2-Party Plus
Tobacco-free discount	(\$240)		(\$240)	
Medical surcharge for working spouse/partner	\$1,200		\$1,200	
Deductible	In-Network	Out-of-Network	In-Network	Out-of-Network
	\$2,100 Individual	\$4,200 Individual	\$3,600 Individual	\$7,200 Individual
	\$4,200 2-Party	\$8,400 2-Party	\$7,200 2-Party	\$14,400 2-Party
	\$4,200 2-Party Plus	\$8,400 2-Party Plus	\$7,200 2-Party Plus	\$14,400 2-Party Plus
Out-of-pocket maximum	In-Network	Out-of-Network	In-Network	Out-of-Network
	\$4,200 Individual	\$8,400 Individual	\$7,200 Individual	\$14,400 Individual
	\$8,400 2-Party	\$16,800 2-Party	\$14,400 2-Party	\$28,800 2-Party
	\$8,400 2-Party Plus	\$16,800 2-Party Plus	\$14,400 2-Party Plus	\$28,800 2-Party Plus
How the Options are the Same				
K-C's HSA contribution ²	Full-Time Employees		Part-Time Employees	
	\$700 Individual		\$350 Individual	
	\$1,400	2-Party	\$700	2-Party
	\$1,400 2-Party Plus		\$700	2-Party Plus
Preventive care	In-Network: K-C pays 100%. Out-of-Network: You pay 100% until you reach the out-of-network deductible, then K-C pays 60%.			
Coinsurance, office visits, urgent care, emergency room, hospitalizations, lab, x-ray, imaging, mental health inpatient and outpatient	In-Network: You pay 100% until you reach the in-network deductible, then K-C pays 80%. Out-of-Network: You pay 100% until you reach the out-of-network deductible, then K-C pays 60%.			
How Both Options Cover Prescription Drugs				
Preventive	K-C pays 100% for preventive prescriptions.			
Maintenance ³	K-C pays 100% for certain maintenance prescriptions.			
Generic, brand preferred, and non-preferred brand	You pay 100% until you meet the deductible, then K-C pays 80%.			

 $^{^1\!}Amounts$ may differ based on rounding.

²ELT and grades 1-4 are not eligible for K-C's HSA contribution.

³To learn which maintenance prescriptions are included, log in to <u>caremark.com</u> or call CVS/caremark at **888-797-8911**.