

Comparing the Whole Health Plan and the BCBS CDHP

To help you understand how the CDHP and the Whole Health Plan (WHP) work, as well as the differences between them if you have the option to choose between both plans, review the information below.

Plan Feature	Whole Health Plan				CDHP		
	In-Network			Out-of-Network	In-Network	Out-of-Network	
Preventive Care	M+W Preferred Providers	Preferred Tier	Expanded Tier				
		\$0, not subject to deductible			60% after deductible	\$0, not subject to deductible	60% after deductible
	Preventive care like annual physicals and screenings are 100% covered when you use an in-network provider (subject to certain guidelines)						
Annual Deductible <ul style="list-style-type: none"> Individual Family 	\$0 (PWA only)	\$1,875	\$3,750	\$7,500	\$3,750	\$7,500	
		\$2,125 (PWA)/ \$2,800 (HSA)	\$5,250	\$10,500	\$5,250	\$10,500	
Annual Deductible Explanation	<ul style="list-style-type: none"> Zero cost for services provided by Preferred Providers and Amazon Care with PWA* You pay the full cost of covered services (including prescription drugs) until you reach the deductible If you enroll dependents <ul style="list-style-type: none"> Due to IRS HSA guidelines, the full family deductible must be met before the plan begins to pay benefits for any one person. One family member or a combination of family members can satisfy the family deductible The Whole Health Plan has two in-network tiers (details on page 19 of the Annual Enrollment Guide). When you use the Preferred Tier, the deductible is approximately half that of the Expanded Tier, which matches the CDHP deductible. 				<ul style="list-style-type: none"> You pay the full cost of covered services (including prescription drugs) until you reach the deductible If you enroll dependents: <ul style="list-style-type: none"> The plan will pay benefits for any family member who meets the individual deductible Once the family deductible is met, the plan begins to pay benefits for all family members. One family member or a combination of family members 		
Coinsurance	<p>Once you meet the annual deductible, you and the plan share in the cost of covered services:</p> <ul style="list-style-type: none"> You pay 25% of the cost of in-network services The plan pays 75% of the cost of in-network services 						
Out-of-Pocket Maximum <ul style="list-style-type: none"> Individual Family 	\$0 (PWA only)	\$3,325	\$6,650	\$13,300	\$6,650	\$13,300	
		\$6,650	\$13,300	\$26,200	\$13,300	\$26,200	
Out-Of-Pocket Explanation	<ul style="list-style-type: none"> After you reach the out-of-pocket maximum (OOP max), the plan pays 100% of in network covered expenses for the remainder of the year. If you enroll dependents: <ul style="list-style-type: none"> The plan will pay 100% for any family member who meets the individual OOP max Once the family OOP max is met, the plan begins to pay benefits for all family members. One family member or a combination of family members can satisfy the family OOP max. The Whole Health Plan has two in-network tiers (details on page 17 of the Annual Enrollment Guide). When using the Preferred Tier, the OOP max is approximately half that of the Expanded Tier, which matches the CDHP OOP max 				<ul style="list-style-type: none"> After you reach the out-of-pocket maximum (OOP max), the plan pays 100% of in-network covered expenses for the remainder of the year If you enroll dependents: <ul style="list-style-type: none"> The plan will pay 100% for any family member who meets the individual OOP max Once the family OOP max is met, the plan begins to pay benefits for all family members. One family member or a combination of family members can 		
Funding Accounts	<ul style="list-style-type: none"> You have a choice between the HSA and PWA WFM contributes to your account (up to \$1,300 for individual/up to \$1,800 for family) Use the funds to pay for eligible health care expenses that are subject to the deductible, your coinsurance and other qualifying health care expenses 						

*If you elect the PWA, this care is not subject to the deductible. If you elect the HSA, this care may be subject to the Preferred Tier deductible.