



2020 BENEFITS ENROLLMENT GUIDE

Your guide to choosing your 2020 benefits

Welcome to your 2020 Benefits Enrollment Guide

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This interactive guide is designed to allow you to easily find the information you need to know about your 2020 benefits. You will also find that some content is “clickable” to provide you with further details or resources. “Clickable” content will appear in bolded blue font and will be briefly highlighted each time you land on a new page or when you hover your mouse over select content.



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Affordable, Healthy, Protected

This is CareFirst’s promise

Welcome to your 2020 Benefits Guide. This Guide can help you:

- Understand what’s changing for 2020 and what actions you need to take
- Review your plan options, and examples, to decide which medical option is right for you
- Get better acquainted with online health and wellness tools and what they can do for you
- Discover easy ways to save on health care costs and take advantage of tax-savings programs



2020 Open Enrollment is February 3 through February 14, 2020

If you have questions about your benefits after reviewing the information in this Benefits Guide, email the CareFirst Corporate Benefits Department at Corporate.Benefits@carefirst.com. Or, call 410-998-7355 or 877-838-3791.



Enrollment and Eligibility

How to enroll

Enroll between **February 3** and **February 14, 2020** by either:

- Logging on to HR InTouch by visiting cfbenefits.hrintouch.com and clicking on *Open Enrollment 2020*,
- Visiting insidecarefirst.com and clicking on the *2020 Open Enrollment* banner, or
- Downloading and logging into the BenefitFocus app (available from the Apple or GooglePlay store)

The benefits you elect will go into effect on April 1, 2020.

Who is eligible?

Part-time associates (i.e., those working at least 20 hours per week) and full-time associates are eligible to enroll themselves and their spouse or domestic partner and/or dependent children up to age 26 in benefits.

Changing your elections

After Open Enrollment, you will not be able to change your elections until the next Open Enrollment period in 2021 unless you have a qualified life status change, such as

the birth of a child, marriage or divorce that affects your benefits. Benefits changes must be made within 30 days of a qualified life status change (or 60 days for the birth of a child).

Why you need to take action

This year, CareFirst will be expanding the nicotine user surcharge to apply to both associates and spouses or domestic partners. To avoid the surcharge, non-nicotine-users must attest to non-user status (even if you don't want to change your benefits in 2020) and nicotine-users must complete a cessation program by Open Enrollment. [Click here](#) for more details.

Additional benefits that require active enrollment:

- If you wish to take advantage of PTO-Purchase (you may purchase up to 40 hours)
- If you wish to contribute to a Flexible Spending Account (FSA) or Health Savings Account (HSA) in 2020
- To ensure you have the dental coverage you need (see [page 19](#) for plan change details)

New associates

[Click here](#) to review enrollment instructions for new hires.

If you do nothing:

- You and your spouse or domestic partner will incur the \$30 per person per pay-period nicotine-user surcharge.
- Elections in place for 2019 (with the exception of those mentioned to the left) will carry forward into 2020 at the new rates. Note the following exception: Current dental coverage enrollees will default into the BlueDental Plus 1500 Plan.
- PTO-Purchase, FSA and HSA elections will default to zero (active enrollment is required to participate in these benefits).



2020 Benefits Enrollment Checklist

Before you enroll, consider any life changes in the past year, or upcoming changes, that may affect your health or financial wellbeing. Review your benefits options carefully and make sure to take advantage of savings opportunities available to you.

Remember, the choices you make will remain in place throughout the year and you won't be able to make changes until next year's Open Enrollment, unless you have a qualified life event.

If you are benefits-eligible and there is already a checkmark in this column, you are automatically enrolled!

Benefit	I plan to enroll!
HEALTH CARE BENEFITS	
HealthyBlue Regional Plan	<input type="checkbox"/>
HealthyBlue National Plan	<input type="checkbox"/>
HealthyBlue National (CDH) 1500 Plan with HSA	<input type="checkbox"/>
BlueDental Plus 1500 Plan	<input type="checkbox"/>
BlueDental Plus 3000 Plan	<input type="checkbox"/>
BlueVision Plus Plan	<input type="checkbox"/>
LIFE AND ACCIDENT INSURANCE	
Basic Life and Accidental Death & Dismemberment (AD&D) Insurance	<input checked="" type="checkbox"/>
Supplemental Life and Accidental Death and Dismemberment (AD&D) Insurance	<input type="checkbox"/>
Supplemental Child and/or Spouse/Domestic Partner Life and Accidental Death and Dismemberment (AD&D) Insurance	<input type="checkbox"/>
Business Travel Accident Insurance	<input checked="" type="checkbox"/>
DISABILITY	
Short Term Disability	<input checked="" type="checkbox"/>
Long Term Disability	<input checked="" type="checkbox"/>

Benefit	I plan to enroll!
SAVINGS	
Health Savings Account (must be enrolled in the HealthyBlue National (CDH) 1500 Plan)	<input type="checkbox"/>
Health Care FSA	<input type="checkbox"/>
Limited Health Care FSA	<input type="checkbox"/>
Dependent Care FSA	<input type="checkbox"/>
Adoption Assistance	<input type="checkbox"/>
CareFirst 401(k) Plan	<input checked="" type="checkbox"/>
VOLUNTARY AND WORK/LIFE BENEFITS	
Long-Term Care Insurance	<input type="checkbox"/>
Group Legal Benefits	<input type="checkbox"/>
Identity Theft Protection— <i>New!</i>	<input type="checkbox"/>
Critical Illness Insurance	<input type="checkbox"/>
Accident Insurance	<input type="checkbox"/>
Hospital Indemnity Insurance— <i>New!</i>	<input type="checkbox"/>
Tuition Reimbursement	<input type="checkbox"/>
CareBridge Employee Assistance Program (EAP)	<input checked="" type="checkbox"/>
Paid Time Off Purchase (PTOP)	<input type="checkbox"/>
Paid Parental Leave	<input checked="" type="checkbox"/>
Caregiver Leave— <i>New!</i>	<input checked="" type="checkbox"/>



What's Changing in 2020?

Salary threshold change to the premium contribution structure

As you may recall, CareFirst introduced a new model for **premium contributions for health insurance** based on income last year. The salary threshold for associates who pay a percentage of their base salary in the premium structure has changed from \$100,000.01—\$110,000 to \$100,000.01—\$115,000. You can calculate your 2020 premiums using the Premium Calculator found on the Open Enrollment section of InsideCareFirst.

Domestic partners will be eligible for benefit coverage

As part of CareFirst's continued commitment to equity and inclusion, effective April 1, 2020, domestic partners will be eligible dependents on our medical, dental and vision plans. To qualify, you must have resided together in the same residence for at least one year and intend to do so indefinitely. Further eligibility requirements are listed on the **Affidavit of Domestic Partnership** found on [insidecarefirst.com](https://www.insidecarefirst.com), which must be completed, notarized, and returned to Corporate Benefits by March 1, 2020. Note

that domestic partners are not eligible for pre-tax benefits (per the IRS) so the portion of benefits covering domestic partners will be taxed.

Coverage for dependents turning age 26

Effective April 1, 2020, coverage for dependents turning age 26 will end on the last day of the month containing their birthday.

The nicotine surcharge will also apply to spouses and domestic partners in 2020

The nicotine-user surcharge* will now apply to both associates and their spouses or domestic partners.

Remember: Even if you don't plan to make changes to your benefit elections for 2020, you must certify your nicotine user status on HR InTouch during Open Enrollment, as well as the status of your covered spouse or domestic partner.

* You will pay a nicotine-user surcharge of \$30 per person per pay-period (\$780 annually per person) if you or your spouse or domestic partner use nicotine products, do not agree to complete a cessation program by Open Enrollment or if you fail to certify that you do not use nicotine products. Review the [Nicotine Surcharge FAQs](#) for more details.





What's Changing in 2020?

You will have two dental plan options

Both plans have the same dental network and allow you the flexibility to see any dentist you choose. Here are the key differences between the plans:

- BlueDental Plus 1500 offers a lower annual maximum, higher copays and orthodontia coverage for dependents up to age 19, for a lower premium.
- BlueDental Plus 3000 offers a higher annual maximum, lower copays and orthodontia coverage for all ages, for a higher premium.

See [page 19](#) for more details about both plan options.

Changes to tax-saving accounts

Enrollees of the HealthyBlue (CDH) 1500 Plan with HSA, should make note of the increase to the annual maximum contribution limit for Health Savings Accounts (HSAs). The new limits, including CareFirst seed contributions, will be \$3,550 for individual coverage and \$7,100 for family coverage. The catch-up contribution limit for those over age 55 will remain at \$1,000.

The annual maximum contribution limit for the Health Care Flexible Spending Account (FSA) will increase to \$2,750.

Also, the administrator is changing from PayFlex to Further. You can still roll over up to \$500 into next year. Balance transfers will occur by August 2020 (after the 91 day runout period is complete). Current FSA holders may submit claims to [PayFlex](#) through June 30, 2020 for costs incurred in the 2019–2020 plan year.

New and enhanced protective coverage

Action required (if you wish to elect these new benefits):

- As a companion to the enhanced Critical Illness & Accident coverage (which now provide richer benefits to participants), you will be offered the opportunity to elect Hospital Indemnity coverage through Allstate. This coverage can help cover some of the out-of-pocket medical costs that come with unexpected hospital visits. See [page 28](#) for details.
- You will now be offered Identity Theft coverage through InfoArmor. This comprehensive identity protection plan provides 24/7 monitoring and alerts, full-service remediation, and identity theft reimbursement in the event of wrongdoing. See [page 32](#) for details.

Action not required:

- There are two enhancements to [Short Term Disability \(STD\)](#) coverage. Tenure bands will be eliminated and all associates will be eligible for 100% of pay for the first six weeks (after a 1 week elimination period), followed by 66 ²/₃% of pay for the following 19 weeks. Coverage for deliveries via caesarean section will be extended from six to eight weeks based upon medical necessity.
- [Long Term Disability \(LTD\)](#) coverage, previously offered by Lincoln Financial, will be provided by CareFirst. The 60% monthly disability benefit will be tax-free. Effective April 1, 2020, associates will begin paying the small tax associated with the benefit, which will allow you to receive your benefit tax-free should you ever need to go out on LTD.
- Your [Basic and Supplemental Life and Accidental Death & Dismemberment \(AD&D\) Insurance](#) coverage, previously offered by Prudential, will be offered through CareFirst. Basic coverage for full- and part-time associates will increase to 1x salary with a minimum of \$50,000 and a maximum of \$500,000.



What's Changing in 2020?

Family leave benefits and Paid Time Off (PTO) changes

Caregiver leave (effective April 1, 2020)

Caregiver leave provides associates who are primary caregivers with two weeks of paid leave at 100% pay to care for a qualifying family member in need.

Paid parental leave (effective April 1, 2020)

Paid parental leave can be taken within the first 12 months of the birth, adoption or foster placement of a child and will be taken AFTER Short Term Disability coverage ends (if applicable).

Paid Time-Off (effective January 1, 2021)

PTO accrual will be capped at six weeks. The carryover maximum will be capped at two weeks and must be used by the end of July of the following year.

Transportation Account changes

The transit benefit administrator will change to Further later in 2020. This change includes the Parking FSA, which will not be available until this change is complete. No action will be required during Open Enrollment. Look for more information about how to enroll through Further in the coming months.

Sharecare wellness program incentives

Beginning on April 1, 2020 through the end of the plan on the last day of February 28, 2021, you can earn a maximum of \$1,000 in incentives for participating in the Sharecare wellness program. Learn more on [page 34](#).



For more information regarding any of your benefits, refer to your [CareFirst Benefits Guide at \[insidecarefirst.com\]\(https://insidecarefirst.com\)](#).





Your HealthyBlue Medical Plan Options

This section will provide information about your CareFirst Medical (including prescription drug) coverage options. You can also find information about 2020 premiums and coverage details by plan.

Your health care benefits

- [HealthyBlue Medical Plans at a glance](#)
- [HealthyBlue Medical Plan coverage details](#)
- [Prescription Drug coverage details](#)
- [HealthyBlue Medical Plan premiums](#)



HealthyBlue Medical Plans at a glance

Before you enroll in a medical plan, there’s a lot to consider, including your medical care needs, how much each option will cost per month, any deductibles you must pay before the plan pays, and your future financial plan. Focus on what you need now and what you expect you’ll need in the future. To help you decide, review the table below, the side-by-side plan detail comparison tables, and the sample scenarios on the following pages.

Ask yourself:	Then this plan may be for you		
	HEALTHYBLUE REGIONAL PLAN	HEALTHYBLUE NATIONAL PLAN	HEALTHYBLUE NATIONAL (CDH) 1500 PLAN WITH HSA
Do you live in Maryland, Washington, D.C. or Northern Virginia?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Do you need to access doctors outside of the Maryland, Washington, D.C. or Northern Virginia region?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Do you want to save for your future/retiree health care costs?			<input checked="" type="checkbox"/>
Do you want to receive free money from CareFirst for your HSA?			<input checked="" type="checkbox"/>
Do you expect to seek preventive care free of charge?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Do you mind having more deducted from your paycheck and paying less when you receive care?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Would you generally rather save more with lower paycheck deductions and pay more when you receive care?			<input checked="" type="checkbox"/>
Are you ineligible for an HSA (because you have Medicare or Tricare)?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

HealthyBlue Medical Plan coverage details

Benefits	HealthyBlue Regional Plan		HealthyBlue National Plan		HealthyBlue National (CDH) 1500 Plan with HSA	
Location	Maryland, D.C. and Northern Virginia		All		All	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Copayments						
Medical	\$0 PCP \$30 Specialist \$30 Urgent Care Facility	After Deductible: \$50 PCP \$50 Specialist	\$0 PCP \$30 Specialist \$30 Urgent Care Facility	After Deductible: \$50 PCP \$50 Specialist	After Deductible: \$0 PCP \$30 Specialist \$30 Urgent Care Facility	After Deductible: \$0 PCP \$50 Specialist
Prescription Drug	\$0 Generic and Insulin \$40 Preferred Brand \$60 Non-formulary Brand \$40 Preferred Specialty \$60 Non-formulary Specialty		\$0 Generic and Insulin \$40 Preferred Brand \$60 Non-formulary Brand \$40 Preferred Specialty \$60 Non-formulary Specialty		\$0 Select Generic and Insulin AFTER DEDUCTIBLE for all other drugs: \$0 Generic \$40 Preferred Brand \$60 Non-formulary Brand \$40 Preferred Specialty \$60 Non-formulary Specialty	
Annual Deductible						
Individual	\$500	\$1,000	\$1,000	\$2,000	\$1,500	\$3,000
Family Aggregate	\$1,000	\$2,000	\$2,000	\$4,000	\$3,000	\$6,000
Medical Out-of-Pocket Max						
Individual	\$2,000	\$4,000	\$3,000	\$6,000	\$4,000	\$6,000
Family Aggregate	\$4,000	\$8,000	\$6,000	\$12,000	\$6,550	\$12,000
Preventive Care and Wellness Benefits						
Routine Physical Exam, Well-child Care, Routine GYN Visits and Cancer Screenings	No Charge	Deductible, then No Charge	No Charge	Deductible, then No Charge	No Charge	Deductible, then No Charge



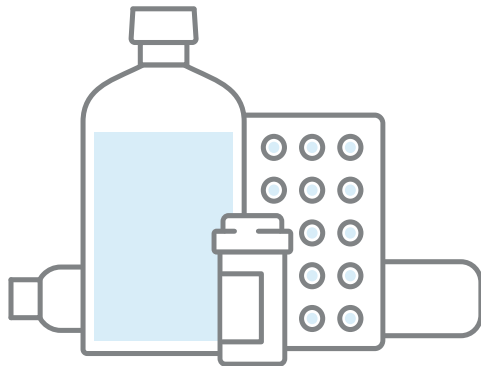
Benefits	HealthyBlue Regional Plan		HealthyBlue National Plan		HealthyBlue National (CDH) 1500 Plan with HSA	
Location	Maryland, D.C. and Northern Virginia		All		All	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Labs & Testing, Diagnostic/Treatment Services						
X-ray and Lab Tests	Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50	Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50	After Deductible: Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50
Other Diagnostic Services	Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50	Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50	After Deductible: Freestanding Facility: \$0 Hospital: \$50	After Deductible: \$50
Allergy Testing and Shots	No Deductible PCP: No Charge Specialist: \$30 Copay per visit	\$50 Copay per visit, After Deductible	\$30 per visit	\$50 per visit	After Deductible: \$30 Copay per visit	After Deductible: \$50 per visit
Outpatient Office Surgery (Physician charges)	Physician's Office/PCP: No Charge, No Deductible Specialist: \$30	After Deductible: \$50 per visit	Physician's Office/PCP: No Charge, No Deductible Specialist: \$30	After Deductible: \$50 per visit	Physician's Office/PCP: No Charge, No Deductible Specialist: \$30	After Deductible: \$50 per visit
Maternity Services (Note: You must enroll a baby within 60 days of birth.)						
Prenatal and Postnatal Office Visits	No Charge	After Deductible: Pre- and Post-natal Visits: \$50	No Charge	After Deductible: Pre- and Post-natal Visits: \$50	No Charge	After Deductible: Pre- and Post-natal Visits: \$50
Delivery and Facility Services	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission
Nursery Care of Newborn	After Deductible: No Charge		After Deductible: No Charge		After Deductible: No Charge	
Emergency Services						
Ambulance Services	\$50 Copay		\$50 Copay		After Deductible: \$50 Copay	
Emergency Room	\$300 Copay		\$300 Copay		After Deductible: \$300 Copay	

Benefits	HealthyBlue Regional Plan		HealthyBlue National Plan		HealthyBlue National (CDH) 1500 Plan with HSA	
Location	Maryland, D.C. and Northern Virginia		All		All	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Hospitalization						
Inpatient Facility Services	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission
	All hospital admissions must be pre-certified		All hospital admissions must be pre-certified		All hospital admissions must be pre-certified	
Outpatient Facility Services	Freestanding Facility: \$100 After Deductible: Hospital: \$300	After Deductible: Freestanding Facility and Hospital: \$500	Freestanding Facility: \$100 After Deductible: Hospital: \$300	After Deductible: Freestanding Facility and Hospital: \$500	After Deductible: Freestanding Facility: \$100 Hospital: \$300	After Deductible: Freestanding Facility and Hospital: \$500
Inpatient Physician Services	No Charge After Deductible		No Charge After Deductible		Deductible applies	
Outpatient Physician Services	No Charge After Deductible		No Charge After Deductible		Deductible applies	
Mental Health and Substance Use Disorder (All inpatient mental health and substance abuse treatment must be preauthorized)						
Inpatient Mental Health and Substance Use Disorder	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission	After Deductible: \$300 per admission	After Deductible: \$500 per admission
Outpatient Mental Health and Substance Use Disorder	No Charge	After Deductible: \$50	No Charge	After Deductible: \$50	After Deductible: No Charge	After Deductible: \$50
Miscellaneous						
Outpatient Physical, Occupational and Speech Therapy	\$30 per visit	After Deductible: \$50 per visit	\$30 per visit	After Deductible: \$50 per visit	After Deductible: \$30 per visit	After Deductible: \$50 per visit
	100-visit limit per benefit period (per plan year); combined in- and out-of-network benefit		100-visit limit per benefit period (per plan year); combined in- and out-of-network benefit		100-visit limit per benefit period (per plan year); combined in- and out-of-network benefit	
Hearing Care	Hearing Exam: PCP: No Charge Specialist: \$30 per visit After Deductible: Hearing Aids: \$30 Copay	After Deductible: Hearing Exam: \$50 Hearing Aids: \$50	Hearing Exam: PCP: No Charge Specialist: \$30 per visit After Deductible: Hearing Aids: \$30 Copay	After Deductible: Hearing Exam: \$50 Hearing Aids: \$50	After Deductible: Hearing Exam: PCP: No Charge Specialist: \$30 per visit Hearing Aids: \$30 Copay	After Deductible: Hearing Exam: \$50 Hearing Aids: \$50
	Limited to one hearing aid per ear per 36-month period		Limited to one hearing aid per ear per 36-month period		Limited to one hearing aid per ear per 36-month period	
Vision	\$10 Routine Exam	\$33 of Allowed Benefit	\$10 Routine Exam	\$33 of Allowed Benefit	\$10 Routine Exam	\$33 of Allowed Benefit
Home Health Care	After Deductible: \$30 per visit	After Deductible: \$50 per visit	After Deductible: \$30 per visit	After Deductible: \$50 per visit	After Deductible: \$30 per visit	After Deductible: \$50 per visit
	Pretreatment plan required		Pretreatment plan required		Pretreatment plan required	

Prescription drug coverage details

All associates enrolled in a HealthyBlue medical plan automatically receive prescription drug coverage administered through CVS/Caremark. The cost for your prescription drug coverage is included in the cost of your medical coverage, but what you pay for your prescriptions at the pharmacy will vary based on the HealthyBlue medical option you choose.

Details on copay amounts and out-of-pocket maximums for each plan can be found in the table on [page 12](#).



If you enroll in the:	
HEALTHYBLUE REGIONAL PLAN	HEALTHYBLUE NATIONAL (CDH) 1500 PLAN WITH HSA
OR	
HEALTHYBLUE NATIONAL PLAN	
You pay copays for both your nonmaintenance and long-term, maintenance prescriptions until you meet your annual out-of-pocket maximum. Copays and deductibles are waived for insulin.	You pay 100% of the discounted cost of your non-maintenance prescription drugs up to your annual deductible, and then you pay copays until you meet your out-of-pocket maximum. For long-term, maintenance medications, you pay nothing if you and your doctor choose generic drugs from the HealthyBlue Select Generics list. Copays and deductibles are waived for insulin.

Manage your costs

CareFirst offers programs and solutions to help you stick with your prescription drug regimen and manage your costs:

Save money with a 90-day prescription supply. When you fill your prescription at a CVS retail location or via mail order, you pay only two copays for a 90-day supply. If you pick up maintenance medications at a non-CVS pharmacy, you can only receive a 30-day supply and you must pay the copay each time.*

Talk to your doctor about generic medications. Generic medications are just as safe and effective as their brand-name counterparts and will save you money. [Click here to view the full list of covered medications on the Formulary 3 list.](#)

Use online tools and resources. You have single-sign-on access to the CVS/Caremark portal through *My Account*. Visit the portal to:

- See the details of your prescription coverage (including how much you've spent in relation to your out-of-pocket maximum or compared to last year)
- View cost break downs by family member, look up how much medications cost with the *Check Drug Cost Tool*
- Print a current list of medications to take with you when you visit your doctor

* Prescription drugs are subject to the deductible for HealthyBlue National (CDH) 1500 Plan enrollees.



Registering for Mail Service Pharmacy is easy!

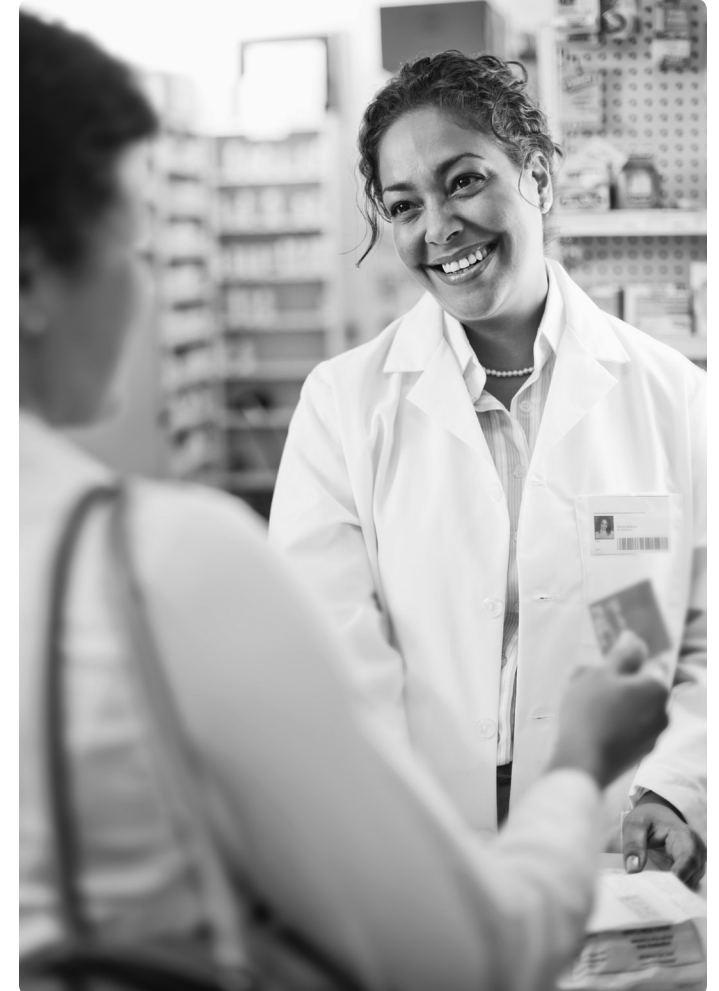
1. Visit **My Account** and click on the Coverage tab.
2. Select Drug and Pharmacy Resources.
3. Then click on My Drug Home and request a new prescription to start the process.

Once you are registered, you'll be able to refill prescriptions online, by phone or via email, schedule automatic refills, check and pay account balances, and receive email notifications about your order status.

If your doctor decides a medication is brand necessary, remind them to write "**Dispense as Written**," or "**DAW**," on your brand-name prescription order to avoid paying both the nonpreferred brand copay plus the cost difference between the generic and the brand-name drug.



Reminder: Insulin and diabetes supplies are covered at 100%!



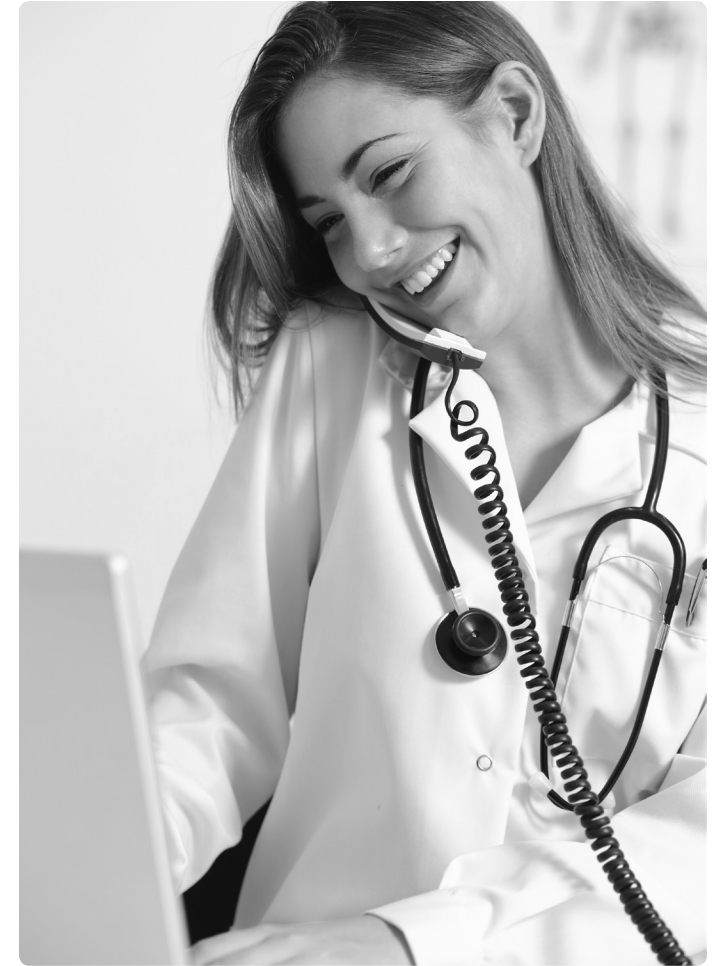


HealthyBlue Medical Plan premiums

Your premiums are determined by a salary-based premium contributions structure. The table on the following page provides associate contribution figures per pay period. Associates with base salaries of \$100,000 and below, \$115,000.01 and above, and those Executives in Salary Band X will pay a flat rate. Associates with base salaries between \$100,000.01 and \$115,000 will pay an amount based on a percent of their base salary as of December 31, 2019 and the plan they select (contribution amounts will not change if your salary changes throughout the year)*. [See pages 25–27](#) for sample scenarios to help you as you make your decisions for next year.

** Associates who cover their domestic partner on their medical plan will pay an imputed income tax on the portion of the premium covering their domestic partner.*

If you want to compare the cost by plan at your salary, let us do the math for you! Click here to use the 2020 Premium Calculator on insidecarefirst.com.



Plan Name and Coverage Tier	2020 Per Pay Associate Contributions*			
	\$100,000 and below	\$100,000.01 to \$115,000 (variable - % of salary)	\$115,000.01 and above	Executives (Salary Band X)
HEALTHYBLUE REGIONAL PLAN				
Individual	\$69.78	2.24%	\$99.08	\$168.31
Individual + Spouse or Domestic Partner**	\$111.84	3.59%	\$158.79	\$278.79
Individual + Child(ren)	\$100.63	3.23%	\$142.87	\$244.41
Family**	\$137.08	4.40%	\$194.62	\$333.08
HEALTHYBLUE NATIONAL PLAN				
Individual	\$113.71	3.65%	\$161.44	\$230.67
Individual + Spouse or Domestic Partner**	\$201.57	6.47%	\$286.17	\$406.17
Individual + Child(ren)	\$159.20	5.11%	\$226.02	\$327.56
Family**	\$239.57	7.69%	\$340.13	\$478.59
HEALTHYBLUE NATIONAL (CDH) 1500 PLAN WITH HSA				
Individual	\$52.96	1.70%	\$75.19	\$144.42
Individual + Spouse or Domestic Partner**	\$82.25	2.64%	\$116.77	\$236.77
Individual + Child(ren)	\$78.51	2.52%	\$111.46	\$213.00
Family**	\$104.05	3.34%	\$147.73	\$286.19



All associates can participate in CareFirst's Sharecare wellness program and earn up to \$1,000 in incentives, which can be used to offset the cost of your benefits. Visit carefirst.com/sharecare or pages 33-36 to learn more.

* Figures in this table do not include the nicotine-user surcharge. Nicotine-users (including covered spouses/domestic partners) will incur a \$30 per person per pay-period surcharge to the premiums listed above.

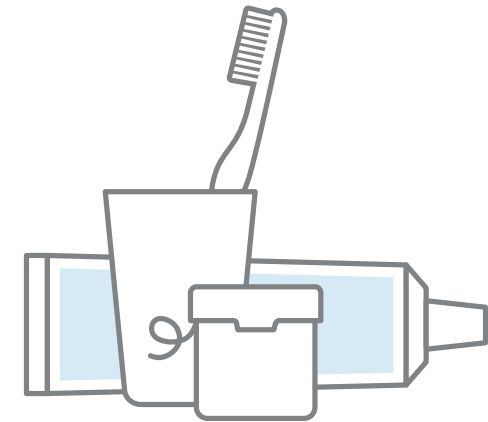
** Domestic partners are not eligible for pre-tax benefits (per the IRS) so the portion of benefits covering domestic partners will be taxed.

Your Dental Plan Options

Your dental plan options offer a national network of providers. Review the table below for coverage details.

	BlueDental Plus 1500		BlueDental Plus 3000	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Maximum	\$1,500		\$3,000	
Waived from Annual Maximum	Class I		Class I	
Annual Deductible (Individual/Family)	\$50/\$150	\$75/\$225	\$25/\$75	\$50/\$150
Waived from Deductible	Class I & V	Class I & V	Class I & V	Class I & V
Orthodontia Lifetime Maximum	\$1,500 per child, up to age 19		\$3,000 per member (no age limit)	
Type Of Expense	Plan Pays			
Class I: Preventive and diagnostic treatment, no deductible (Oral exam, cleanings, x-rays)	100% of allowed benefit*	65% of allowed benefit	100% of allowed benefit*	90% of allowed benefit
Class II: Basic dental services (Fillings, caps, composite)	70% of allowed benefit	50% of allowed benefit	90% of allowed benefit	80% of allowed benefit
Class III: Major surgical services (Periodontics, root canal, extractions)	70% of allowed benefit	50% of allowed benefit	90% of allowed benefit	80% of allowed benefit
Class IV: Major restorative services (Dentures, crowns, bridges)	50% of allowed benefit	30% of allowed benefit	60% of allowed benefit	50% of allowed benefit
Class V: Orthodontia—up to the lifetime maximum per person, no deductible	50% of allowed benefit	30% of allowed benefit	60% of allowed benefit	50% of allowed benefit

* Three cleanings per plan year.



Your Vision Plan Option

Professional vision services including routine eye examinations, eyeglasses and contact lenses offered by CareFirst BlueCross BlueShield through the Davis Vision, Inc. national network of providers.

BlueVision Plus Plan	In-Network	Out-of-Network
Eye Exam	Covered in full	\$45 of Allowed Benefit
Frames	Tower Collection: Covered in full Non-Tower Collection: \$45 of Allowed Benefit	\$45 of Allowed Benefit
Contact Lenses (initial supply)	Medically necessary contacts: Covered in full Conventional single vision contact lenses: \$97 of Allowed Benefit Conventional bifocal contact lenses: \$127 of Allowed Benefit Contact lenses fitting fee: \$60 of Allowed Benefit	Medically necessary contacts: \$285 of Allowed Benefit Conventional single vision contact lenses: \$97 of Allowed Benefit Conventional bifocal contact lenses: \$127 of Allowed Benefit Contact lenses fitting fee: \$60 of Allowed Benefit
Spectacle Lenses	Basic single, bifocal, trifocal and lenticular: Covered in full	Basic single: \$52 of Allowed Benefit Basic bifocal: \$82 of Allowed Benefit Basic trifocal: \$101 of Allowed Benefit
Lenticular (progressive)	Covered in full	\$181 of Allowed Benefit



Your Bi-Weekly Pre-tax Payroll Deductions			
	BlueDental Plus 1500 Plan	BlueDental Plus 3000 Plan	BlueVision Plus
Individual	\$2.51	\$7.40	\$0.75
Individual + Spouse or Domestic Partner*	\$5.23	\$14.42	\$1.45
Individual + Child(ren)	\$3.78	\$10.82	\$1.16
Family*	\$6.19	\$18.85	\$1.86

* Domestic partners are not eligible for pre-tax benefits (per the IRS) so the portion of benefits covering domestic partners will be taxed.



Paying for Your Benefits: Tax Savings Accounts

The difference between HSAs and FSAs

Like a Flexible Spending Account, or FSA, a Health Savings Account, or HSA, lets you set aside pre-tax money to pay for eligible out-of-pocket medical expenses. Both accounts will be administered by Further in 2020. What's different:

HSA	FSA
CareFirst deposits "seed money*" (\$700 for individuals or \$1,400 for families) for associates enrolled in the HealthyBlue National (CDH) 1500 Plan	All your own contributions
All funds carry over from year to year to increase your balance	Maximum carryover amount of \$500 from year to year
CareFirst seed money is available at the beginning of the plan year. Your contributions are deposited into your account and available for use following each payroll deduction.	The full amount of your annual election is available at the beginning of the plan year.
Invest your balance (like a 401(k) plan) and save it to pay for medical expenses in the future	No investment or long-term savings option; pre-tax savings for current medical expenses only



* Seed money is prorated based on start date for new hires.

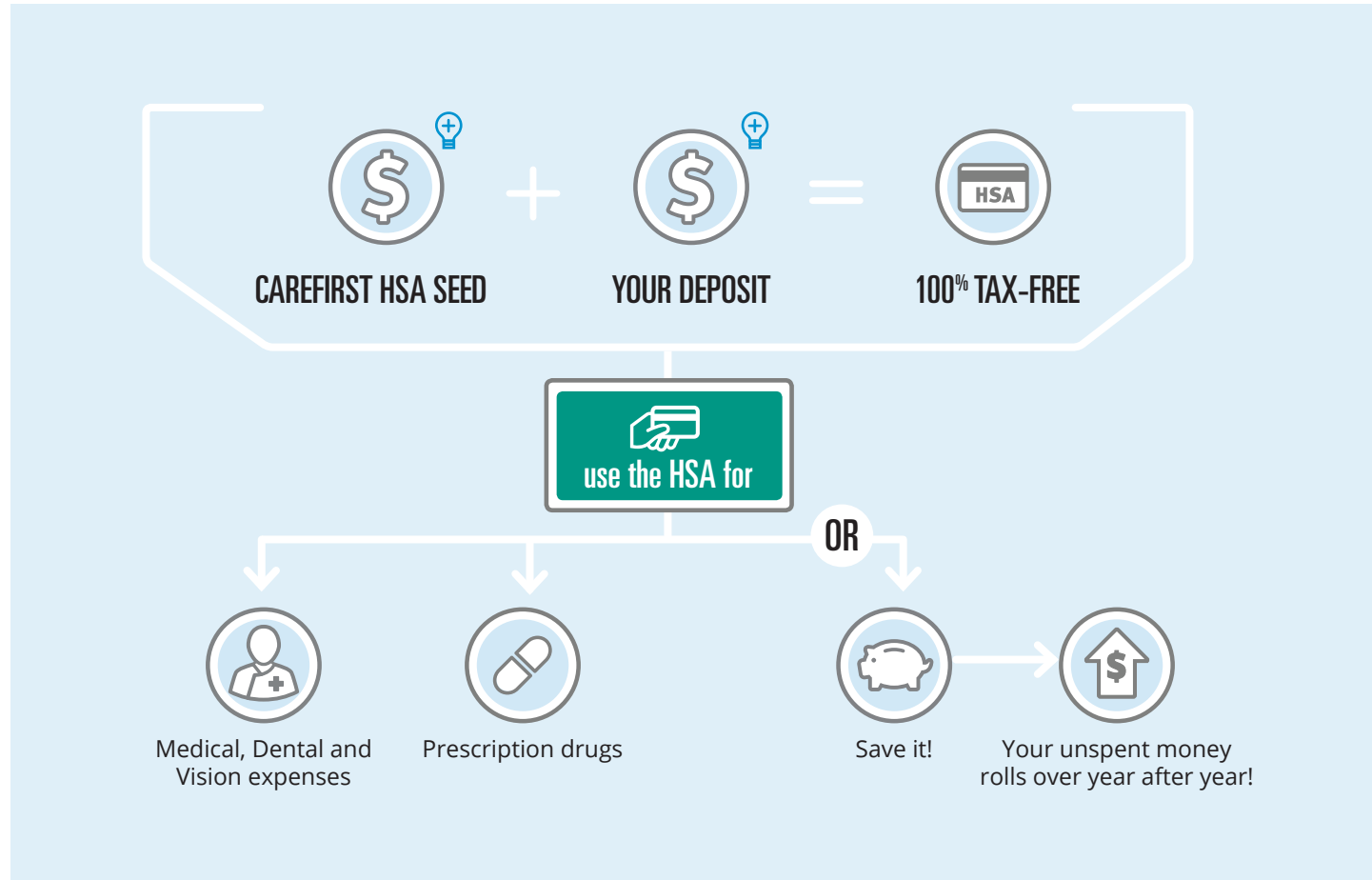
Here's how an HSA works:

The HealthyBlue National (CDH) 1500 Plan comes with a Health Savings Account (HSA). CareFirst deposits, or “seeds,” your HSA account with \$700 at the beginning of the plan year if you choose individual coverage or \$1,400 for other coverage levels. This amount is prorated if you join the plan after the beginning of the plan year.

The total HSA contribution amount allowable by the IRS in 2020 is \$3,550 for individuals or \$7,100 other coverage levels. Subtracting CareFirst’s seed money from those totals, this means individuals can personally add up to \$2,850 tax-free dollars and families can add up to \$5,700 tax-free dollars to their account. If you turn 55 or older in 2020, you can make a catch-up contribution of an additional \$1,000.

You can use the money in your HSA to pay for most out-of-pocket medical expenses or save it for future years. Any money left in your HSA rolls over—you can invest it and earn interest. If you leave CareFirst, your HSA balance is yours to keep for future health care expenses, including expenses you incur during retirement.

** Members who are enrolled in the HealthyBlue Regional Plan, the HealthyBlue National Plan, Tricare or Medicare are not eligible to open or contribute to an HSA.*





More about FSAs

CareFirst offers several Flexible Spending Accounts to help you pay for health care and dependent care expenses with pre-tax dollars. Beginning in 2020, our FSA administrator is changing from **PayFlex** to Further. If you had a Health Care FSA in 2019 with a rollover balance, the transfer will occur in August 2020. Current FSA participants may submit claims to PayFlex through June 30, 2020 for costs incurred in the 2019–2020 plan year.

Health Care FSA

The annual maximum contribution limit for the Health Care FSA is \$2,750. Contributions to the account, made through payroll deductions, can be used for eligible out-of-pocket expenses such as copays and deductibles for medical, dental, vision and prescription costs. You will receive a debit card from Further loaded with your full election. You can roll over up to \$500 from year to year—any funds over that amount will be forfeited.

Limited Health Care FSA

Enrollees in the HealthyBlue National (CDH) 1500 Plan, which comes with an HSA, are only eligible to open and contribute to a Limited Health Care FSA. This FSA functions the same as the Health Care FSA, except that you can only use the funds for dental and vision expenses. You will receive a debit card from Further loaded with your full election.

Dependent Care FSA

The Dependent Care FSA can be used for eligible dependent care expenses such as day care centers for child or elder care, after school care or day camp (up to age 13), or home care for the elderly or disabled. You can contribute up to \$5,000 per household per year to this account. Funds do not roll over from year to year.

To use the account, you must pay the provider first and then submit to Further for reimbursement. Or, you can set up automatic reimbursement of the amount you have saved. You will not receive a debit card for use with this FSA. Remember: Unlike the Health Care FSA, when you submit for reimbursement for dependent care expenses, you may only receive the amount that has already been saved through your payroll contributions.

Other savings accounts

Adoption assistance

The CareFirst Adoption Assistance plan helps you pay for expenses such as legal and adoption fees, temporary foster care, and medical examinations for your adopted child. There is a maximum contribution amount of \$14,300 per year. Funds do not roll over from year to year. Please consult with a tax advisor before selecting this benefit.




Flexible Spending Accounts are 'use it or lose it' accounts. This means you should be sure to use the money in your account to avoid losing it, as the full balance does not roll over from plan year to plan year.

Example tables



The following examples are provided to help you make informed choices and not to influence your decisions. You should consider your own unique situation before selecting a medical option.



Meet David

David has a salary of \$50,000 

- He is single with a young child
- David completes all activities necessary to earn the maximum annual Sharecare wellness incentive of \$1,000
- David and his child receive annual physical exams, recommended preventive screenings, and other services. Click on 'Medical services' and 'Prescription Drug' in the table above for details.

David's Coverage	HealthyBlue Regional (MD, D.C. or Northern VA)	HealthyBlue National	HealthyBlue National (CDH) 1500 with HSA
Annual Paycheck Deduction	\$2,616.30	\$4,139.10	\$2,041.20
Preventive Care—Out-of-Pocket Costs			
- Medical services	No charge	No charge	No charge
- Prescription drugs	N/A	N/A	N/A
Total Preventive	\$0	\$0	\$0
Non-Preventive Care—Out-of-Pocket Costs			
- Medical services 	\$150 copays	\$150 copays	\$1,200 copays
- Prescription drug 	\$80 copays	\$80 copays	120 generic*/\$400 brand
Total Out-of-Pocket	\$230	\$230	\$1,720
Total Cost Before Credits/HSA (Paycheck Deduction + OOP Costs)	\$2,846.30	\$4,369.10	\$3,761.20
CareFirst's HSA Contribution	N/A	N/A	\$1,400
David's Net Costs in 2020 (if he uses HSA money)	\$2,846.30	\$4,369.10	\$2,361.20
Sharecare Wellness Incentive Earned	\$1,000	\$1,000	\$1,000
Net Costs in 2020 (if he applies his Sharecare incentive earnings to his paycheck)	\$1,846.30	\$3,369.10	\$1,361.20

* Cost applies for drugs not found on the HealthyBlue Select Generics list; there is no cost if David and his doctor choose drugs from the HealthyBlue Select Generics list.

Looking at all three options and adding up his costs respectively, David would save \$485 over the course of the year by enrolling in the HealthyBlue National (CDH) 1500 Plan with HSA. He could save even more if he contributed more tax-free money to his HSA.



Meet Sandra

Sandra has a salary of \$105,000

- Sandra is single
- Sandra completes all activities necessary to earn the maximum annual Sharecare wellness program incentive of \$1,000
- Sandra is generally healthy and makes sure to get her annual physical exam and other preventive screenings. Click on 'Medical services' and 'Prescription Drug' in the table above for details.

Sandra's Coverage	HealthyBlue Regional (MD, D.C. or Northern VA)	HealthyBlue National	HealthyBlue National (CDH) 1500 with HSA
Annual Paycheck Deduction	\$2,352.00	\$3,832.50	\$1,785.00
Preventive Care—Out-of-Pocket Costs			
- Medical services	No charge	No charge	No charge
- Prescription drugs	N/A	N/A	N/A
Total Preventive	\$0	\$0	\$0
Non-Preventive Care—Out-of-Pocket Costs			
- Medical services	\$30 copays	\$30 copays	\$325 copays
- Prescription drug	\$40 copays	\$40 copays	\$40 generic*/\$200 brand
Total Out-of-Pocket	\$70	\$70	\$565
Total Cost Before Credits/HSA (Paycheck Deduction + OOP Costs)	\$2,422.00	\$3,902.50	\$2,350.00
CareFirst's HSA Contribution	N/A	N/A	\$700
Sandra's Net Costs in 2020 (if she uses HSA money)	\$2,422.00	\$3,902.50	\$1,650.00
Sharecare Wellness Incentive Earned	\$1,000	\$1,000	\$1,000
Net Costs in 2020 (if she applies her Sharecare incentive earnings to her paycheck)	\$1,422.00	\$2,902.50	\$650.00

* Cost applies for drugs not found on the HealthyBlue Select Generics list; there is no cost if Sandra and her doctor choose drugs from the HealthyBlue Select Generics list.









Looking at all three options and adding up her costs respectively, Sandra would save \$772 over the course of the year by enrolling in the HealthyBlue National CDH Plan. And, she could save even more by contributing more tax-free money to her HSA.



Meet Maya

Maya has a salary of \$150,000 

- Maya is married with two children under the age of 26
- Maya completes all activities necessary to earn the maximum annual Sharecare wellness incentive of \$1,000
- Maya and her family receive annual physical exams, recommended preventive screenings, and other services. Click on 'Medical services' and 'Prescription Drug' in the table above for details.

Maya's Coverage	HealthyBlue Regional (MD, D.C. or Northern VA)	HealthyBlue National	HealthyBlue National (CDH) 1500 with HSA
Annual Paycheck Deduction	\$5,060.00	\$8,843.50	\$3,841.00
Preventive Care—Out-of-Pocket Costs			
- Medical services	No charge	No charge	No charge
- Prescription drugs	N/A	N/A	N/A
Total Preventive	\$0	\$0	\$0
Non-Preventive Care—Out-of-Pocket Costs			
- Medical services 	\$90 copays / Hospital: deductible + \$300 copays	\$90 copays / Hospital: deductible + \$300 copays	\$90 copays (deductible has been met) / Hospital: deductible + \$300 copays
- Prescription drug 	\$80 brand / Rx copay	\$80 brand / Rx copay	\$80 brand / Rx copay (deductible has been met)
- Deductible applied	\$1,000	\$2,000	\$3,000
Total Out-of-Pocket	\$1,470	\$2,470	\$3,470
Total Cost Before Credits/HSA (Paycheck Deduction + OOP Costs)	\$6,530.00	\$11,313.50	\$7,311.00
CareFirst's HSA Contribution	N/A	N/A	\$1,400
Maya's Net Costs in 2020 (if she uses HSA money)	\$6,530.00	\$11,313.50	\$5,911.00
Sharecare Wellness Incentive Earned	\$1,000	\$1,000	\$1,000
Net Costs in 2020 (if she applies her Sharecare incentive earnings to her paycheck)	\$5,530.00	\$10,313.50	\$4,911.00

Looking at all three options and adding up her costs respectively, Maya would save \$619 over the course of the year by enrolling in the HealthyBlue National CDH Plan. And, she could save even more by contributing more tax-free money to her HSA.



Other Health Care and Income Protection Benefits

Critical Illness

Critical Illness insurance, offered through Allstate, can help ease the financial impact of a covered illness such as invasive cancer, heart attack, stroke, coronary artery bypass surgery, major organ transplant, and end stage renal failure. You may elect a coverage amount of \$10,000, \$20,000 or \$30,000 for yourself and cover your spouse and/or dependent children for 50% of the coverage amount.

Accident

Accident insurance through Allstate can cover the out-of-pocket costs incurred from suffering a wide range of off-the-job accidental injuries that require emergency room visits, physicians treatment, x-rays, physical therapy and more. Benefits are paid regardless of any other health insurance benefits you may receive and can pick up where other insurance leaves off.

Hospital Indemnity (New!)

Hospital Indemnity insurance through Allstate can help cover some of the out-of-pocket medical costs that come with unexpected hospital visits, which is especially helpful if your major medical deductible has not been met. Cash benefits are paid directly to you, regardless of other coverage, for use toward deductibles, copays, premiums or daily living expenses. Please note that benefits are not paid for emergency room treatment or outpatient procedures.

Short Term Disability

Short Term Disability (STD) benefits begin following a 7 day elimination period. Associates must use PTO or PTOB for this first week. CareFirst then provides 100% pay for weeks two through six and 66 2/3% for the remaining 19 weeks.

Long Term Disability

If you are totally disabled after 180 days of Short Term Disability (STD), CareFirst provides **Long Term Disability (LTD)** up to 60% of your base salary as replacement income (monthly maximum of \$15,000).

Paid parental leave

CareFirst provides **Paid Parental Leave** to associates who have a new child through birth, adoption, surrogacy or foster placement with six continuous weeks paid leave at a rate of 100% pay for use within 12 months from the date of the child's birth.

Caregiver leave (New!)

Effective April 1, 2020, CareFirst provides **Caregiver Leave** associates who are primary caregivers with two weeks of leave (100% of pay) to care for a qualifying family member. Find more information on [insidecarefirst.com](https://www.insidecarefirst.com).





Business Travel Accident insurance

CareFirst covers associates with **Business Travel Accident insurance** for \$250,000 in case of death or a covered loss as the result of a covered business travel accident.



Basic Life and AD&D insurance

CareFirst provides all full-time and part-time associates with **Basic Life insurance and Basic AD&D insurance** of 1 times annual earnings (minimum of \$50,000 and maximum of \$500,000). Beginning in April 2020, coverage will be offered through CareFirst instead of Prudential.

Supplemental Life and AD&D insurance*

Associates may purchase **Supplemental Life insurance** in increments of \$25,000 up to a maximum of \$900,000, guaranteed issue of \$500,000 for new hires. During Open Enrollment, those already enrolled in Supplemental Life may increase by \$25,000 without medical underwriting. Associates may purchase **Supplemental AD&D coverage**, on either an individual or family basis, in increments of \$25,000 up to a maximum of \$250,000.

Supplemental Spouse, Dependent and Family Life and AD&D insurance*

Associates may purchase **Supplemental Spouse Life insurance** for their spouse in increments of \$25,000 up to a maximum of \$350,000, guaranteed issue of \$50,000 for new hires. Previously waived enrollments and/or increases during the open enrollment period are subject to medical underwriting. **Supplemental Child Life** insurance may be purchased for \$10,000 (you pay one flat rate regardless of how many children you cover). **Family AD&D** insurance may be purchased in increments of \$25,000 up to a maximum of \$250,000.

** Enrollment or increases in coverage elected outside of new hire enrollment will be subject to medical underwriting.*

Care Support programs

Managing chronic conditions and associated costs can feel overwhelming. CareFirst is here to help! Through one-on-one coaching and support programs, you'll receive confidential support at every step of your health care journey—all included as part of your medical benefits! Once you decide to sign up, you choose how involved you want to be.

In addition to providing assistance with chronic care management, CareFirst's Care Support programs offer a variety of other support services. You can receive help from a nurse, health coach or pharmacy technician in these health care areas:

Personal coaching support to help you achieve your health goals	Managing treatment for a serious illness or injury	Managing multiple chronic conditions	Transitioning from hospital to home	Managing medication for specific conditions, multiple medications or specialty medications for chronic conditions	Managing mental health and/or substance abuse issues
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You may receive a letter, postcard or call explaining the Care Support programs and inviting you to participate. Or, you can learn more and initiate contact with a nurse, health coach or pharmacy technician by visiting carefirst.com/takethecall.





Work/Life Benefits

Visit [insidecarefirst.com](https://www.insidecarefirst.com) for more details about these programs.

Employee Assistance Program

CareFirst provides all associates and their family members with the Carebridge Employee Assistance Plan (EAP), a confidential resource for access to assistance, work-life balance, life management, and wellness information. Call 800-437-0911 or visit [myliferesource.com](https://www.myliferesource.com) and use Access Code 5w857.

Tuition reimbursement

CareFirst offers [tuition assistance](#) up to a maximum of \$5,250 per calendar year for full-time associates and \$2,625 per year for part-time associates. Tuition assistance is based on the grade you receive and reimbursement is subject to pre-approval. Course content must be part of a degree program offered through an accredited school and must pertain to a CareFirst job family.

Student Debt Employer Contribution program

CareFirst provides associates with \$50 per month (up to a lifetime maximum of \$3,000 per associate) in student loan debt assistance. All associates scheduled to work 20 hours or more per week are eligible upon hire. Loans must be in good standing and be held in the associate's name for the associate's education to qualify. Payments are made directly to the loan administrator and are separate from and in addition to associate monthly loan payments.

You can enroll through Fidelity on a rolling basis by visiting [401k.com](https://www.401k.com), where you can select the link to the program and enter your loan information, including a copy of your most recent loan statement.

Paid Time Off—Base

Base Annual Paid Time Off (PTO) hours are determined by Career Bands. Visit the Benefits Overview page's Time Off section on [insidecarefirst.com](https://www.insidecarefirst.com) for details. New hires should visit [page 38](#) for more information.

Paid Time Off—Purchase

Full-time associates may purchase up to 40 hours of PTO (5 days). Part-time associates may purchase PTO in 5-hour increments, based on their regularly scheduled work hours.





Parking and transportation

Beginning in the second quarter of 2020, all associates can save up to \$270 per month for public parking and transit expenses incurred for your commute to work. CareFirst also provides associates with a transportation subsidy or parking benefit in specific locations. You may only participate in one of the transportation benefits.

Other work/life benefits

Group Legal plan

The **Group Legal plan** administered through ARAG Group allows you to take advantage of a network of legal professionals who provide services for will preparation, real estate issues, civil decrees, bankruptcy, divorce, adoption, purchase of a home, criminal matters and consumer debt.

Identity Theft (*new!*)

Identity Theft coverage through InfoArmor provides comprehensive 24/7 monitoring and alerts, full-service remediation, and identity theft reimbursement in the event of wrongdoing. Find out more at [MyPrivacyArmor.com](https://www.myprivacyarmor.com).

Long Term Care insurance

Group **Long Term Care insurance** through UNUM provides coverage for care received either at home or in a facility, when you or a covered family member needs assistance with activities of daily living (such as bathing, dressing, eating, etc.) or suffers a severe cognitive impairment (such as Alzheimer's disease).

Auto/Homeowners insurance

You can purchase Auto or Homeowners insurance through Liberty Mutual at a discounted rate. The amount you pay is based on the type of coverage you select, the amount of coverage you choose, and other pertinent personal factors. Premiums are paid directly to Liberty Mutual. Visit [libertymutual.com](https://www.libertymutual.com) or call 800-835-0894 for more information and to enroll.



401(k) retirement plan

The **CareFirst 401(k) Plan** provides an excellent opportunity to save for retirement with defined contributions through payroll deductions. You can make two types of contributions:

- 401(k): Pre-tax contributions that are taxed at withdrawal.
- Roth 401(k): After-tax contributions that you withdraw tax-free from your account when you retire.

When you make pre-tax and/or Roth contributions to your 401(k) account, CareFirst will match 100% of the first 1% of eligible compensation you contribute and 50% of the next 5% of eligible compensation you contribute. Whether or not you decide to contribute, CareFirst provides all associates with an additional 2% contribution based on your current 401(k) eligible compensation. You must contribute all year to receive CareFirst's full matching contribution.

The annual 401(k) limit is \$19,500 for the 2020 calendar year. If you are age 50 or over, you can contribute an additional \$6,500.



Getting the Most Out of Your Benefits

CareFirst is committed to helping you live your healthiest life. That's why we offer an abundance of programs and resources to manage your health and financial wellbeing. Review the information on the following pages to find out more about these benefits and how to get the most out of them.



My Account at a Glance

My Account is an online tool for associates in enrolled in CareFirst health care benefits. Sharecare wellness program enrollees also have access to some applicable *My Account* features. Access the following valuable resources from a computer, tablet or smartphone:

Home

View your coverage, deductible, copays, claims and out-of-pocket costs and access the Message Center

My coverage

Access your plan information, update your insurance information, view/order ID cards, order and fill prescriptions, view prescription drug claims or find a pharmacy

Claims

Check your paid claims, deductible and out-of-pocket totals, research your Explanation of Benefits (EOB) history, and review your year-end claims summary

Doctors

Select or change your primary care provider (PCP), search for a specialist, or access the *Ask a Nurse* advice line

My health

Learn about your wellness program options, locate an online wellness coach and check out the discounts offered through Blue 365

Plan documents

Look up forms and other plan documentation

Tools

Find the Treatment Cost Estimator, Drug Pricing Tool and Provider Comparison Tool



sharecare

The Sharecare wellness program

The **Sharecare wellness program** is a new points-based incentive program that puts you in charge. All associates (even those without CareFirst medical coverage) can earn up to \$1,000 by doing things like completing health challenges, tracking your daily steps, sleep or nutrition, and more! Redeem points for rewards like a lump sum payment, gift cards, merchandise, or even a payroll contribution that can help offset the cost of your benefits.

Look for programs labeled Sharecare here and then visit **My Account** to get started. You will need to enter your **My Account** username and password and complete a one-time Sharecare registration.



Download the Sharecare wellness program mobile app to access program tools and resources whenever and wherever you need them.

Get a snapshot of your health and potential risks

Biometric screening

Biometric Screenings will be offered on site or at CVS MinuteClinic locations. You can also visit your Primary Care Physician (PCP) for a screening and record the results in Sharecare.

RealAge® test (Sharecare)

Get a comprehensive assessment of your current health status by taking the RealAge Test. The results arm you with real-time information about how your lifestyle choices are helping you stay younger—or making you age faster—than your calendar age. It takes just 8 to 10 minutes and completion unlocks additional Sharecare activities. The highly personalized results and recommendations will help you make better lifestyle choices, or continue with current healthy behaviors in an effort to lower your RealAge.

Get support

Scale Back Lifestyle Change Program (Sharecare)

Scale Back is a free interactive, telemedicine-based diabetes prevention program developed by the Centers for Disease Control (CDC). This 12-month program helps participants lose 5–10% of their body weight and significantly reduce the risk of developing type 2 diabetes and associated chronic diseases. Participants are offered 26 interactive lessons, personal health coach guidance, a digital scale, and other tools and resources to support your weight loss success.

According to the Centers for Disease Control and Prevention, a 10% weight loss could reduce an overweight person's lifetime medical costs between \$2,200 and \$5,300.

Disease management and lifestyle coaching (Sharecare)

Customized, confidential programs help associates experiencing a serious injury or illness, living with or at risk of chronic conditions, or who are or were recently hospitalized. You may receive a call from a nurse or health coach explaining the programs and inviting you to participate in one-on-one coaching or support.



Craving to Quit (Sharecare)

Craving to Quit is a free, confidential 21-day program designed to help you kick your tobacco habit for good. Developed and tested in conjunction with leading research universities, the program will help you master techniques to control your cravings and change your habits. To get started, visit carefirst.com/sharecare, navigate to the *Achieve* section, select *Programs*, then *Stop Smoking*.

While over 70% of U.S. smokers want to quit, fewer than 5% who attempt to quit on their own succeed.

Get moving

Blue 365 discounts

Visit carefirst.com/wellnessdiscounts to get great discounts from top national and local retailers on fitness gear, gym memberships, family activities, healthy eating options and more!

Harvard studies suggest that walking at least three hours a week can lower women's risk of stroke, heart attack and cardiac death by over 30%.



Don't forget that you can earn up to \$1,000 in incentives for participating in Sharecare wellness program activities like taking the RealAge test, selecting a primary care provider, or completing challenges available through the app.





Get saving

Treatment Cost Estimator

Avoid surprises and save money by comparing costs for procedures, office visits, lab tests and surgery from different doctors, hospitals and medical facilities using the **Treatment Cost Estimator** on *My Account* under the Tools tab.

Financial Wellness Center

The Prudential Financial Wellness Center on insidecarefirst.com provides interactive and insightful tools to help you manage your day-to-day finances and budget. You can receive personalized guidance from financial professionals, review a library of engaging, topic-specific videos and educational articles, receive virtual coaching and participate in onsite and online learning seminars.

SmartShopper

SmartShopper saves money and helps you earn cash when you have certain medical procedures. Use SmartShopper to compare convenient, in-network locations and choose the best option. You can save money and earn a share of the overall savings as a cash reward once your claim is paid. Visit **[My Account](#)** or contact the Personal Assistant Team at 888-345-2873 for more information.

Nearly 25% of working Americans report high levels of financial stress, which can result in poor physical and emotional health, higher rates of substance abuse and depression, as well as interpersonal and family conflict.



Get connected

Find a Doctor

It's easier than ever to locate in-network providers, facilities, labs and hospitals. Log on to **[My Account](#)** for a seamless search experience to find care near you.

CareFirst Video Visit

Whether your doctor's office is closed, you're traveling or have children at home and can't go in to the doctor's office, use CareFirst Video Visit to securely connect to a doctor 24 hours a day, 7 days a week from your smartphone, tablet or computer. Video Visits cost the same as your PCP sick office visit copay—up to \$60. Download the CareFirst Video Visit app (available from the Apple or GooglePlay store) to get started.

Intake Assessment and Appointment Unit (IAA)

The IAA provides behind the scenes clinical support for members with behavioral health and substance use disorder needs. This program was established to ensure members are connected to programs or clinical services appropriate for their needs. Call 800-245-7013 or visit **carefirst.com/mentalhealth** to get started.



New Hires

How to enroll

Within 30 days of your hire date, go to HR InTouch at cfbenefits.hrintouch.com and follow the prompts to set up your Username and Password by selecting *Register Your Account*. You will need to enter the Social Security numbers and birth dates for yourself and any dependents you are adding to your benefits, so have those handy before you begin.

Required documentation

You must provide appropriate documentation (such as a birth certificate or a marriage license or domestic partner affidavit) to substantiate the eligibility of your dependents. Send this documentation to corporate.benefits@carefirst.com within 30 days of benefits election or your dependents could be prevented from remaining on your coverage.

Medical ID cards

You should receive your medical ID cards within about three weeks after you enroll. You will receive one card for your medical and prescription drug benefits and an additional card for your dental and/or vision benefits for each person covered. Temporary ID cards may be available online on *My Account* (member.carefirst.com) after your 31st day of employment.

The nicotine surcharge

The nicotine-user surcharge applies to both associates and their spouse or domestic partner. **You must certify your nicotine user status, as well as the status of your covered spouse or domestic partner on HR InTouch during enrollment.** See [page 4](#) for details.



If you do not take action to enroll:

You will receive default medical coverage under the HealthyBlue National (CDH) 1500 Plan with HSA, individual coverage. You will not be covered under the dental, vision or any other program that requires enrollment, and your spouse and other dependents will not be covered. You will also be charged a \$30 per pay-period nicotine-user surcharge, regardless of your user status. Unless you have a qualified life status change that affects your benefits, you won't have another chance to enroll in benefits until 2020.



401(k) retirement plan

New hires are automatically enrolled in the CareFirst 401(k) plan at a 6% contribution rate (pre-tax) starting with your second paycheck. The money will be automatically invested for you in the T. Rowe Price Retirement Trust Fund with a target retirement date closest to the year you might retire based upon your current age. If you want to change your automatic contribution rate of 6% before your first paycheck, you have 12 days from your date of hire to do so, otherwise you can change your contribution rate at any time.

While you are always 100% vested in your own contributions, you become fully vested in the company match after two years of vesting service.

The additional 2% contribution has a vesting requirement of three years. See [page 32](#) for more details.

Paid Time Off—Base

Annual PTO hours: Career Bands			
Years	II, A, SA, SMA, SII	B, C, SB, SC, SMB	X
<5 years	120	160	200

New Hires receive a prorated portion of PTO, depending on their date of hire. Part-time associates receive a prorated amount of PTO, based on the number of hours worked during each pay period. The allotted number of annual PTO hours increases after your 5th year of employment and continues to increase following a tenured schedule.

Vendor contact list

If you have questions regarding the following benefits, please visit [My Account](#) or use the following contact information:

Benefit	Vendor	Contact Information
Medical	CareFirst	800-313-2223
Prescription	CVS Caremark	800-241-3371
Dental	CareFirst	866-891-2804
Vision	DavisVision	800-783-5602
Health Savings Account	Further	866-758-6119
Flexible Spending Accounts	Further	866-758-6119
Life Insurance	CareFirst	For claim inquiries: 866-959-7306 / For EOI inquiries: medical.underwriting@groupclaims.com
401(k) / Student Debt Employer Contribution	Fidelity	800-835-5095 / 401k.com
Disability & Family Leave	Reed Group	888-763-6468
Employee Assistance Program (EAP)	Carebridge	800-437-0911 / myliferesource.com Access Code: 5w857
Identity Theft Protection	InfoArmor	800-789-2720 / MyPrivacyArmor.com



Legal Notices

For a detailed summary of our Legal Notices, please refer to the online Associate Benefits Guide on the Corporate Benefits page at insidecarefirst.com.

Special enrollment rights under HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 provides the following special enrollment rights. If you do not enroll for medical coverage for yourself and your dependents (including your spouse) because of other health insurance coverage and your other coverage subsequently ends, you may be able to enroll yourself or your dependents in this plan. You must request enrollment within 30 days after your other coverage ends. You will need to provide proof that your other coverage has ended. In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents as long as you request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

If you, your spouse or your eligible dependent child loses coverage under Medicaid or a state Children's Health Insurance program (S-CHIP) or becomes eligible for state-provided premium assistance, the affected

individual(s) have 60 days from the date of the event to elect to be covered under CareFirst's plans. Contact the Corporate Benefits Department, **410-998-7355** or **877-838-3791** for more information.

Patient protection notice

CareFirst generally allows the designation of a Primary Care Provider. You have the right to designate any Primary Care Provider who participates in the plan's network and who is available to accept you or your family members. A directory of network providers is available at carefirst.com. For children, you may designate a pediatrician as the Primary Care Provider.

You do not need prior authorization from CareFirst or from any other person (including a Primary Care Provider) in order to obtain access to obstetrical or gynecological care from a health care professional in the plan's network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan or following procedures for making referrals. A list of

participating health care professionals who specialize in obstetrics or gynecology can be found on carefirst.com.

Federally required information on mastectomy services for all medical plans

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For women receiving mastectomy-related benefits, coverage will be provided, in a manner determined in consultation with the attending physician and patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prosthesis; and
- Treatment of physical complications of the mastectomy, including lymphedemas.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under each option under the plan.



Important notice about maternity coverage and newborn length of stay

Under federal law, group health plans and health insurance issuers offering group insurance coverage generally may not restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to:

- Less than 48 hours following a normal vaginal delivery; or
- Less than 96 hours following a cesarean section.

However, the plan or health insurance issuer may pay for a shorter stay if the attending provider (e.g., physician, nurse midwife or physician assistant), after consultation with the mother, discharges the mother or the newborn earlier.

In addition, under federal law, plans and issuers may not set the level of benefits or out-of-pocket costs so that any later portion of the 48-hour (or 96-hour) stay is treated in a manner less favorable to the mother or the newborn than any earlier portion of the stay. A plan or issuer also may not, under federal law, require that a physician or other health care provider obtain authorization for prescribing a length of stay up to 48 hours (or 96 hours). However, to use certain providers or facilities, or to reduce your out-of-pocket costs, you may be required to obtain precertification. Please contact your health plan's member services unit for more information.

Notice of health information privacy practices (HIPAA)

The privacy of your medical information is important to us. The HIPAA Privacy Notice is for Associate Group Health Plans by CareFirst, Inc., and its affiliated, subsidiary and related entities. The HIPAA Notice describes how medical information about you may be used and disclosed and how you can get access to this information.

For more information about our privacy practices or for a copy of the HIPAA Privacy Notice, please contact us using the information provided.

Contact:

CareFirst HIPAA Compliance and Privacy Office

Telephone: 800-853-9236

Fax: 410-505-6692

E-mail: privacy.office@carefirst.com

Address:

CareFirst Privacy Office
10455 Mill Run Circle
Owings Mills, MD 21117

Final notice

If the information presented in this guide does not agree with the official contract and/or document wording, the official contract and/or document will always govern.

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. which are independent licensees of the Blue Cross and Blue Shield Association. The Blue Cross® and Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

What is an Aggregate Deductible?

Associates who select a family plan must reach the aggregate deductible before the plan begins paying its share. This deductible can be met by one member of the family or a combination of members.



As a family, we have one family deductible that applies to all of us.



When one, or a combination, of us has expenses that meet the family deductible, the deductible is considered to be met for all of us.






Then, the plan begins paying its cost share for the whole family.

Pop-up page: 12

 CareFirst's HSA seed amounts*: **\$700** or **\$1,400**
 for individuals for other coverage levels

** Seed amount for new hires is prorated based on hire date.*

Pop-up page: 23

 In 2020:  Individuals can add up to \$2,850*  Families can add up to \$5,700*

** Maximum contribution is inclusive of CareFirst HSA seed amount.*

Pop-up page: 23



David

Since David's annual income is less than \$100,000, he will pay a flat annual rate for his medical coverage under our premium contribution structure. See page 18 for details.

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David

Review the following information to understand how the copays in this row were calculated for each plan.



Medical services for David and his child included:

4	pediatrician visits (no fee)
2	specialist visits
3	allergist visits

HealthyBlue Regional Plan:

$$\begin{array}{r} \$30 \\ \times 5 \text{ visits (specialist \& allergist)} \\ \hline \$150 \\ \text{copays} \end{array}$$

HealthyBlue National Plan:

$$\begin{array}{r} \$30 \\ \times 5 \text{ visits (specialist \& allergist)} \\ \hline \$150 \\ \text{copays} \end{array}$$

HealthyBlue National (CDH) 1500 Plan:

$$\begin{array}{r} \$150 \\ \times 4 \\ \hline \$600 \end{array} + \begin{array}{r} \$150 \\ \times 2 \\ \hline \$300 \end{array} + \begin{array}{r} \$100 \\ \times 3 \text{ visits (specialist \& allergist)} \\ \hline \$300 \end{array} = \$1,200$$

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David



Prescription drugs for David and his child included:

3	generic medications
2	preferred brand retail medications

Review the following information to understand how the copays in this row were calculated for each plan.

HealthyBlue Regional Plan:

$$\frac{\$0}{x4} + \frac{\$40}{x2} = \$80 \text{ copays}$$

generic Rx preferred Rx

HealthyBlue National Plan:

$$\frac{\$0}{x4} + \frac{\$40}{x2} = \$80 \text{ copays}$$

generic Rx preferred Rx

HealthyBlue National (CDH) 1500 Plan:

$$\frac{\$40}{x3} + \frac{\$200}{x2} = \$520 \text{ for Rx}$$

\$120 for generic Rx \$400 for preferred Rx



Sandra

Since Sandra earns more than \$100,000 and less than \$115,000, she will pay a medical premium contribution amount that is based on a percentage of her salary. This percentage is determined by the plan and coverage level she selects. See page 18 for details.

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Sandra

Review the following information to understand how the copays in this row were calculated for each plan.



Medical services for Sandra included:

1	primary care provider (PCP) visit (no fee)
1	specialist visit

HealthyBlue Regional Plan:

$$\frac{\$30 \times 1 \text{ visit (specialist)}}{\$30 \text{ copays}}$$

HealthyBlue National Plan:

$$\frac{\$30 \times 1 \text{ visit (specialist)}}{\$30 \text{ copays}}$$

HealthyBlue National (CDH) 1500 Plan:

$$\frac{\$125 \times 1 \text{ visit (PCP)}}{\$125 \text{ copay}} + \frac{\$200 \times 1 \text{ visit (specialist)}}{\$200 \text{ copay}} = \$325 \text{ copay}$$

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Sandra



Prescription drugs for Sandra included:

1	generic medication
1	preferred brand retail medication

Review the following information to understand how the copays in this row were calculated for each plan.

HealthyBlue Regional Plan:

$$\begin{array}{r} \$0 \\ \times 4 \\ \hline \$0 \end{array} + \begin{array}{r} \$40 \\ \times 1 \\ \hline \$40 \end{array} = \$40 \text{ copays}$$

generic Rx preferred Rx

HealthyBlue National Plan:

$$\begin{array}{r} \$0 \\ \times 4 \\ \hline \$0 \end{array} + \begin{array}{r} \$40 \\ \times 1 \\ \hline \$40 \end{array} = \$40 \text{ copays}$$

generic Rx preferred Rx

HealthyBlue National (CDH) 1500 Plan:

$$\begin{array}{r} \$40 \\ \times 1 \\ \hline \$40 \end{array} \text{ for generic Rx} + \begin{array}{r} \$200 \\ \times 1 \\ \hline \$200 \end{array} \text{ for preferred Rx} = \$240 \text{ for Rx}$$



Maya

Since Maya's income is more than \$115,000, she will pay a flat annual rate for her medical coverage under the premium contribution structure. See page 18 for details.

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Maya

Review the following information to understand how the copays in this row were calculated for each plan.



Medical services for Maya and her child included:

6	primary care provider (PCP) visits
3	specialist visits
1	overnight stay in a hospital for kidney stones

HealthyBlue Regional Plan:

<i>Office visits:</i>	<i>Hospital visits:</i>
$\begin{array}{r} \$30 \\ \times 3 \text{ visits} \\ \hline \end{array}$ <small>(specialist)</small>	$\begin{array}{r} \$300 \\ \times 1 \text{ overnight} \\ \hline \end{array}$ <small>stay</small>
\$90 copays	\$300 copays

HealthyBlue National Plan:

<i>Office visits:</i>	<i>Hospital visits:</i>
$\begin{array}{r} \$30 \\ \times 3 \text{ visits} \\ \hline \end{array}$ <small>(specialist)</small>	$\begin{array}{r} \$300 \\ \times 1 \text{ overnight} \\ \hline \end{array}$ <small>stay</small>
\$90 copays	\$300 copays

HealthyBlue National (CDH) 1500 Plan:

<i>Office visits:</i>	<i>Hospital visits:</i>
$\begin{array}{r} \$30 \\ \times 3 \text{ visits} \\ \hline \end{array}$ <small>(specialist)</small>	\$300 overnight stay
\$90	

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Maya



Prescription drugs for Maya and her child included:

4	generic medication
2	preferred brand retail medication

Review the following information to understand how the copays in this row were calculated for each plan.

HealthyBlue Regional Plan:

$$\begin{array}{r}
 \$0 \\
 \times 4 \\
 \hline
 \$0
 \end{array}
 +
 \begin{array}{r}
 \$40 \\
 \times 2 \\
 \hline
 \$80
 \end{array}
 = \$80 \text{ copays}$$

generic Rx
preferred Rx

HealthyBlue National Plan:

$$\begin{array}{r}
 \$0 \\
 \times 4 \\
 \hline
 \$0
 \end{array}
 +
 \begin{array}{r}
 \$40 \\
 \times 2 \\
 \hline
 \$80
 \end{array}
 = \$80 \text{ copays}$$

generic Rx
preferred Rx

HealthyBlue National (CDH) 1500 Plan:

$$\begin{array}{r}
 \$0 \\
 \times 4 \\
 \hline
 \$0
 \end{array}
 +
 \begin{array}{r}
 \$40 \\
 \times 2 \\
 \hline
 \$80
 \end{array}
 = \$80 \text{ for Rx}$$

generic Rx
preferred Rx