

What's New for 2025

It's Time to Consider Your Benefit Needs for 2025

Open Enrollment is October 28 – November 15, 2024. This is when you should review your Beth Israel Lahey Health (BILH) benefits and consider the needs of you and your family for the upcoming year. **With all new medical plans available for 2025, it's important to take time to explore all your options to ensure you have the best coverage.**

Open Enrollment: October 28 – November 15, 2024

Open Enrollment is your annual opportunity to update your benefit elections and make the most of the benefit plans offered by BILH. Benefit elections you make when you enroll will be effective January 1, 2025.

This Guide is intended for benefits-eligible employees only. Complete details of the benefit plans are included in the official plan documents. If there is any difference between the information presented in this summary and the official plan documents, the plan documents will govern. This statement does not constitute an employment contract, nor does it provide a guarantee of future employment. The company reserves the right to amend, modify or terminate any of the plans in any manner in whole or part, at any time.

Healthcare Costs Are Rising

At BILH, we are dedicated to the health and wellness of our patients, our employees, and their families. Over the past five years, we've worked to create a comprehensive benefits package for employees of our health system. Starting in 2025, employees will pay the same rates for all benefits, no matter where they work within the system.

Each year, we assess our medical plans to ensure they remain high-quality and cost-effective, despite the significant increases in healthcare costs in recent years. In response, we are introducing a range of new, market-competitive medical plans to help manage these costs. Under most of the plans you will continue to save when using BILH providers and hospitals, which supports our system.

Be sure to take time to review the new options and select the plan that best suits your needs. It's important to consider your total costs when choosing a medical plan—the amount you pay for coverage, along with all out-of-pocket expenses for any care received.

We are providing several ways for you to learn more about our new medical plans:

- Join a virtual Medical Plan Information Session
- Attend a Benefits Fair
- Schedule a virtual consultation with Harvard Pilgrim.

For details, including dates and times, visit **Benefits Central** at <https://flimp.live/BILH-Benefits>.

What's Changing for 2025

- **New:** Four new medical plan options* offered through Harvard Pilgrim Health Care
 - Those with a base salary under \$60,000 per year will pay less from their paycheck if they elect the BILH Network Premier HMO.
- **Increased prescription copays** (the cost you pay out-of-pocket for prescriptions) for most medications, with lower costs at BILH pharmacies for the HMOs.
- Slight increase in rates for **vision** coverage.**
- Enhancements to the **Accident, Critical Illness and Hospital Indemnity plan** benefits.**

*There are no other changes to benefits or rates for 2025.***

**Plus an additional PPO plan option for those who live 20 or more miles from a BILH Tier 1 Primary Care Provider (PCP).*

***Does not apply to Exeter; see separate communications.*

You must take action:
Actively elect a medical option
if you want coverage in 2025



During the Open Enrollment period, you must enroll in the medical plan of your choice to ensure you have the most appropriate coverage for you and your family in 2025. If you currently participate in a BILH medical plan and do not actively make an election during Open Enrollment your coverage will default to the BILH Network Premier HMO, which may not be what is best for your needs. For that reason, it is important that you enroll in the plan of your choice.

Don't Forget BILH Benefits Central is Here to Help!

You and your dependents have access to **BILH Benefits Central** for more benefits details at the tips of your fingers.



Scan here to visit the site any time on your **mobile device** or visit **<https://flimp.live/BILH-Benefits>**.



Your Enrollment Resources

There are key resources to help you understand and choose the right benefits for you and your family. Visit Benefits Central at **<https://flimp.live/BILH-Benefits>** for dates, times and information about how to access these resources.



Benefits Fairs



Medical Plan Information Sessions



Harvard Pilgrim Virtual 1:1

2025 BILH Medical Plan Options

Most benefits-eligible employees can choose from four new medical plan options:

- Three health maintenance organization (HMO) options
- One preferred provider organization (PPO) option

These plans include a range of coverage levels and costs, giving you the flexibility to select the one that is right for you and your family. While each plan offers comprehensive medical coverage, there are several differences between them. There is no such thing as the “best” plan. Each has features that make them the “best” fit for you based on your individual and/or family situation. That’s why it’s so important to understand what each plan provides!

Here’s a high-level look at how HMOs and PPOs compare:

If Your Base Salary Is Less Than \$60,000 and You Use Mostly BILH Providers...

You will pay less for medical coverage in 2025 if you elect the BILH Network Premier Plan. If this applies to you, you will see the lower rate when you enroll.

HMO and PPO: What’s Different?

BILH HMOs:

- Providers are tiered
- Pay the lowest amount when you use BILH providers (Tier 1)
- Must live in Harvard Pilgrim’s enrollment area*
- Lower premium than PPO
- Requires a Primary Care Provider (PCP) and referrals to specialists (unless you have a BILH PCP)
- No out-of-network care except in emergency

Both HMO and PPO:

- Same medical care is covered
- No cost for preventive care and outpatient mental health care
- Includes prescription drug coverage through ScriptWellRx
- Resources and support from Harvard Pilgrim Health Care

BILH PPO:

- Providers are not tiered
- Access to any provider you choose (in- or out-of-network)
- Pay less when you choose in-network providers
- Highest premium of all plan options
- PCP and referrals to specialists not required

** MA, ME, NH, and certain areas of RI, VT, CT and NY*



Choosing a Medical Plan

With new medical plan options, it can be hard to know how to decide which plan is best for you. Here are some key points to consider:

- **Premiums:** Consider the amount you will pay out of your paycheck , which is determined by the plan you choose and who you cover.
- **Plan selection:** When you make your election, you are choosing a *plan*, not a *tier* for the HMO plans. You can see providers in any of the tiers covered by your HMO plan. **Note:** Dana-Farber Cancer Institute will be Tier 2 in 2025.
- **Cost at the time of care:** Under the HMOs, how much you pay when you receive care is determined by which tier the provider and facility fall under. The lower the tier, the lower your out-of-pocket costs will be.
- **Providers:** When you are choosing your plan, consider where you see your providers/receive services and how often you seek care.
 - **Do you receive all care from BILH facilities and providers?** The BILH Network Premier HMO might make sense for you—you'll pay the least out of your paycheck. Just remember, there's no coverage for Tier 3 care in the BILH Network Premier HMO.
 - **Do you have a Tier 3 provider who you want to continue seeing?** You'll need to choose the Flex HMO or Flex Plus HMO. When choosing between these plans, think about how often you see this provider/receive these services. If once or twice a year, does it make sense to pay less out of your paycheck and more when you go to the doctor (Flex HMO)? If more often, consider the Flex Plus HMO to pay more out of your paycheck and less when you go to the doctor.
 - **Do you receive all your care in Tiers 2 and 3?** Look at the Flex HMO and Flex Plus HMO. If you're exclusively using Tier 3 and you receive care often, consider the Flex Plus HMO (more out of your paycheck but less at the time of service).
 - **Can you move any care into Tier 1?** Remember, you can mix and match tiers within the plan that you choose.
- **Flexibility:** Want to be able to see any provider? Consider the BILH Access PPO, but remember that this plan has the highest premium out of your paycheck.

Overview of 2025 BILH Medical Plan Options*

	BILH Network Premier HMO	Flex HMO	Flex Plus HMO	Access PPO*
Paycheck Cost	\$	\$\$	\$\$\$	\$\$\$\$
Tiers Covered	Tier 1 and Tier 2 only	Tiers 1, 2, and 3	Tiers 1, 2, and 3	N/A
Plan Highlights	<ul style="list-style-type: none">• Lowest premium of all plan options.• 2-tier plan.• No coverage for Tier 3 or out-of-network unless in an emergency.• Uses providers from BILH Network Premier HMO network (mostly BILH providers).	<ul style="list-style-type: none">• Higher premium than BILH Network Premier HMO.• 3-tier plan.• No out-of-network coverage unless in an emergency.• Uses providers from Flex HMO network.	<ul style="list-style-type: none">• Similar to Flex HMO, with higher premium and lower deductible.• 3-tier plan.• No out-of-network coverage unless in an emergency.• Uses providers from Flex HMO network.	<ul style="list-style-type: none">• Highest premiums.• No tiers.• Coverage for in- and out-of-network providers.
You May Want to Choose This Plan If....	<ul style="list-style-type: none">• You mostly use Tier 1 providers, but sometimes use Tier 2.• You never use Tier 3 providers except in an emergency.• You do not anticipate major medical services.• You want a plan with the lowest premium contribution.• You would rather pay more for care when received and a lower contribution from your paycheck.• Your base salary is less than \$60,000 and you use Tier 1 providers, since your premium will be lower for this plan.	<ul style="list-style-type: none">• You mostly use Tier 1 and 2 providers, but want access to Tier 3 providers if needed.• You want a “mid-range” deduction from each paycheck for your premiums.	<ul style="list-style-type: none">• You want regular access to Tier 3 providers, along with Tier 1 and 2 providers.• You are willing to pay a higher premium from your paycheck to have access to Tier 3 providers, and to pay less when you receive services from those providers.	<ul style="list-style-type: none">• You want to be able to see any provider (in- and out-of-network).• You are willing to pay the highest premiums from your paycheck in exchange for access to any provider you wish.

Key Features of New Medical Plan Options*

	BILH Network Premier HMO		Flex HMO			Flex Plus HMO			Access PPO	
	Tier 1	Tier 2	Tier 1	Tier 2	Tier 3	Tier 1	Tier 2	Tier 3	In-Network	Out-of-Network
Annual Deductible (member/family)	\$1,000/\$2,000	\$2,500/\$5,000	\$1,000/\$2,000	\$2,500/\$5,000	\$6,000/\$12,000	\$500/\$1,000	\$1,500/\$3,000	\$3,000/\$6,000	\$500/\$1,000	\$2,000/\$4,000
Out-Of-Pocket Maximum (member/family)	\$3,000/\$6,000		\$8,000/\$16,000			\$8,000/\$16,000			\$6,000/\$12,000	
Preventive Care Visits	\$0 (covered in full)		\$0 (covered in full)			\$0 (covered in full)			\$0 (covered in full)	30% coinsurance after deductible
PCP Office Visits	\$0 (covered in full)	\$50 copay	\$0 (covered in full)	\$50 copay	\$80 copay	\$0 (covered in full)	\$30 copay	\$50 copay	\$20 copay	30% coinsurance after deductible
Specialist Office Visits	\$40 copay	\$100 copay	\$40 copay	\$100 copay	\$160 copay	\$40 copay	\$60 copay	\$100 copay	\$40 copay	30% coinsurance after deductible
Emergency Room	\$200 copay		\$200 copay			\$200 copay			\$150 copay	
Inpatient Hospital	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	50% coinsurance after deductible	10% coinsurance after deductible	20% coinsurance after deductible	40% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible
Prescription Drug Copays	BILH Pharmacy—Up to 30 Days: \$5 generic, \$25 preferred brand, \$40 non-preferred brand/specialty BILH Pharmacy—Up to 90 Days: \$12.50 generic, \$62.50 preferred brand, \$100 non-preferred brand/specialty Non-BILH Pharmacy—Up to 30 Days Only: \$10 generic, \$30 preferred brand, \$60 non-preferred brand, \$100 specialty								30-Day Supply: \$10 generic, \$30 preferred brand, \$60 non-preferred brand, \$100 specialty (90-day supply also available)	

* Those who live more 20 or more miles from a BILH PCP also have access to the Basic Out-of-Area PPO.

Benefits Department

529 Main Street

4th Floor

Charlestown, MA 02129

New Medical Plans Coming for 2025

Choose the Best Plan for Your Needs

We are introducing four new medical plan options for 2025. These include a range of coverage levels and costs, giving you the flexibility to select the plan that is right for you and your family. Make your election between October 28 and November 15, 2024.

