PHYSICAL HEALTH

2024 MEDICAL PLANS

You have a choice of three consumer-driven health plans (CDHPs). All three plans have:

- **Same nationwide network of providers**
- **Free preventive care** with a Tier 1 (HealthSync) or Tier 2 (in-network) provider and **free generic preventive medications,** as well as $10-or-less generic non-preventive prescriptions after you meet your deductible
- Purdue HSA contributions ($200 individual/$400 family)*

**Those not eligible for HSAs will be offered an HRA.*

PREMIER CDHP

- Highest premiums
- Lowest deductible
- Lowest out-of-pocket maximum

STANDARD CDHP

Middle-of-the-road premiums, deductible and out-of-pocket maximum

LIMITED CDHP

- Lowest premiums
- Highest deductible
- Highest out-of-pocket maximum

ANNUAL PREMIUMS

	Premier CDHP	Standard CDHP	Limited CDHP
Employees earning under $50,250			
Employee Only	$271.56	$121.68	$44.76
Employee & Children	$496.92	$219.48	$75.24
Employee & Spouse	$1,418.88	$609.24	$179.28
Employee & Working Spouse	$2,168.88	$1,359.24	$929.28
Employee & Family	$1,962.24	$825.00	$212.52
Employee & Family (Working Spouse)	$2,712.24	$1,575.00	$962.52
Employees earning $50,250 or more			
Employee Only	$923.28	$457.20	$113.40
Employee & Children	$1,553.88	$823.44	$307.44
Employee & Spouse	$2,389.20	$1,477.56	$928.68
Employee & Working Spouse	$3,889.20	$2,977.56	$2,428.68
Employee & Family	$3,242.16	$2,004.12	$1,258.20
Employee & Family (Working Spouse)	$4,742.16	$3,504.12	$2,758.20

Frozen Benefit Rates

Benefit deduction rates for Jan. 1 – Dec. 31, 2024, will be based on employee salaries effective on Sept. 30, 2023. This means the rates for coverage you elect during open enrollment will not change during the 2024 calendar year when you have any changes that affect your salary. So, for example, employees who receive pay increases in 2024 that take them over the medical salary tier will not see a change in their medical plan rate until January 2025.

These rates do not include:

Additional tobacco-user premium of $1,000 for employee and $1,000 for covered spouse.

PHYSICAL HEALTH

2024 MEDICAL PLANS

CHOOSING THE RIGHT MEDICAL PLAN

The difference among the plans is how you manage your healthcare dollars—do you prefer to pay more upfront (premium), so your costs throughout the year will be lower (out-of-pocket)? Or do you like to pay less in premiums and, if you need care, pay more during the year for medical services?

Premier CDHP	Standard CDHP	Limited CDHP
Highest premiums in exchange for the lowest deductible and out-of-pocket maximum.	Middle-of-the-road premiums, deductible and out-of-pocket maximum.	Lowest premiums in exchange for the highest deductible and out-of-pocket maximum.

Pay full cost of services before deductible

Remember – you receive free preventive care with a Tier 1 (HealthSync) or Tier 2 (in-network) provider and free generic preventive medications!

May use **Health Savings Account (HSA)** or **Health Reimbursment Arrangements (HRA)** for eligible expenses

Purdue contributes to HSA/HRA ($200 individual/$400 family)

+

With an HSA, you can also contribute pre-tax dollars as well

May also use **Limited Purpose Flexible Spending Account (LPFSA)** for eligible dental and vision expenses

Only **you** can contribute pre-tax dollars

After you meet your deductible, you and Purdue share costs (**coinsurance**)

After you **meet your out-of-pocket maximum**, you pay nothing for covered services for the rest of the year

TERMS TO KNOW

Coinsurance: Percentage of costs you pay for covered services after you meet your deductible

Deductible: Amount you pay before the plan covers any medical benefits or copays take effect

Out-of-pocket maximum: Highest amount you would pay for covered medical and prescription expenses in a given year

Premium: Amount you pay each pay period for coverage; deducted from your paycheck

NETWORK OPTIONS

Tier 1 (HealthSync): Most affordable care option; providers include Franciscan Health, Ascension St. Vincent, Lutheran Health Network and the Center for Healthy Living

Tier 2 (in-network): Next most affordable option; large network of Anthem providers

Out-of-network: Least affordable option; providers outside of HealthSync and Anthem networks

PHYSICAL HEALTH

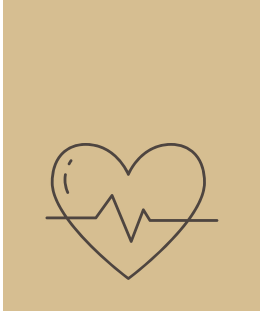
2024 MEDICAL PLANS

		Premier CDHP	Standard CDHP	Limited CDHP
University's Contribution to Employee's HSA or HRA	Employee only	$200	$200	$200
	Employee + one or more covered family members	$400	$400	$400
Healthy Boiler Incentive to Employee's HSA or HRA **(see page 20 for incentive structure)**	Employee only	$450	$450	$450
	Employee + one or more covered family members	$900	$900	$900
Deductible Medical & Rx Combined	Employee only	**$1,600 (Tier 1/HealthSync)** $2,300 (Tier 2/in) $4,600 (Tier 3/out)	**$2,050 (Tier 1/HealthSync)** $2,825 (Tier 2/in) $5,275 (Tier 3/out)	**$3,050 (Tier 1/HealthSync)** $4,075 (Tier 2/in) $6,650 (Tier 3/out)
	Employee + one or more covered family members	**$3,200 (Tier 1/HealthSync)** $4,600 (Tier 2/in) $9,200 (Tier 3/out)	**$4,100 (Tier 1/HealthSync)** $5,650 (Tier 2/in) $10,550 (Tier 3/out)	**$6,100 (Tier 1/HealthSync)** $8,150 (Tier 2/in) $13,300 (Tier 3/out)
Coinsurance		**90%/10% (Tier 1/HealthSync)** 80%/20% (Tier 2/in) 60%/40% (Tier 3/out)	**90%/10% (Tier 1/HealthSync)** 80%/20% (Tier 2/in) 60%/40% (Tier 3/out)	**90%/10% (Tier 1/HealthSync)** 75%/25% (Tier 2/in) 55%/45% (Tier 3/out)
Out-of-Pocket Maximum Medical & Rx Combined (includes deductible & coinsurance)	Employee only	**$2,400 (Tier 1/HealthSync)** $3,550 (Tier 2/in) $9,200 (Tier 3/out)	**$4,300 (Tier 1/HealthSync)** $5,325 (Tier 2/in) $10,150 (Tier 3/out)	**$5,550 (Tier 1/HealthSync)** $7,075 (Tier 2/in) $13,150 (Tier 3/out)
	Employee + one or more covered family members	**$4,800 (Tier 1/HealthSync)** $7,100 (Tier 2/in) $18,400 (Tier 3/out)	**$8,600 (Tier 1/HealthSync)** $10,650 (Tier 2/in) $20,300 (Tier 3/out)	**$11,100 (Tier 1/HealthSync)** $14,150 (Tier 2/in) $26,300 (Tier 3/out)
Center for Healthy Living Office Visit	West Lafayette/ Northwest	$25 towards ded.; coins. applies after ded.	$25 towards ded.; coins. applies after ded.	$25 towards ded.; coins. applies after ded.
	Fort Wayne	Ded. & coins.	Ded. & coins.	Ded. & coins.
Primary Care Office Visit		Ded. & coins.	Ded. & coins.	Ded. & coins.
Specialty Care Office Visit		Ded. & coins.	Ded. & coins.	Ded. & coins.
Preventive Care		100% coverage (in) Ded. & coins. (Out)	100% coverage (in) Ded. & coins. (Out)	100% coverage (in) Ded. & coins. (Out)
Emergency Room		Ded. & coins.	Ded. & coins.	Ded. & coins.
Urgent Care Facility		Ded. & coins.	Ded. & coins.	Ded. & coins.

Employees may contribute to their HSAs if eligible, up to a combined University and employee limit of **$4,150/employee and $8,300/employee plus one or more covered family members.** Additional rules apply to employees with spouses who also have HSAs, HRAs and FSAs.

PHYSICAL HEALTH

PHARMACY & LAB



For more details, visit purdue.edu/hr/Benefits/prescription/index.php

		Premier, Standard & Limited CDHPs	
		Prescription Drugs	
		Retail (30-day supply)	Mail Order (90-day supply)
Generic	Preventive	100% coverage	100% coverage
	Non-preventive	Deductible, then actual cost up to max of $10	Deductible, then actual cost up to max of $20
Preferred Brand Name	Preventive	No deductible, 35% to max of $50	No deductible, 35% to max of $100
	Non-preventive	Deductible, then 35% to max of $50	Deductible, then 35% to max of $100
Non-Preferred Brand Name	Preventive	No deductible, 50% up to max of $75	No deductible, 50% up to max of $150
	Non-preventive	Deductible, then 50% up to max of $75	Deductible, then 50% up to max of $150
Specialty Rx		Deductible then 55% up to max of $250	Deductible, then 55% up to max of $250

		Premier, Standard & Limited CDHPs
		Labs *(Tier 1 labs are part of HealthSync)*
Tier 1 Labs, including Center for Healthy Living and PUSH Labs	Preventive	100% coverage
	Non-preventive	Deductible and coinsurance
Tier 2 Labs (In-network)	Preventive	100% coverage
	Non-preventive	Deductible and coinsurance
Tier 3 Labs (Out-of-network)		Deductible and coinsurance

REMINDER: FORMULARY CHANGES ARE MADE ON A QUARTERLY BASIS. IF YOU ARE AFFECTED, YOU WILL BE NOTIFIED BY CVS.