Medical

SelectHealth - 3200 HSA Qualified High Deductible Health Plan - SelectMed			
	In-Network	Out-of-Network*	
Preventive Care Services			
See list of covered preventive services on pages 8-9, & 26	Covered 100%	Not Covered	
Deductible	You Pay	You Pay	
Employee Only / Family	\$3,200 / \$6,400	\$6,400 / \$12,800	
Out of Pocket Maximum			
Employee Only / Family	\$3,200 / \$6,400	\$8,500 / \$17,000	
Includes Copays, Coinsurance & Deductibles			
Office Visits	You Pay	You Pay	
Primary Care Provider	Covered 100% AD	40% AD	
Specialist Physician	Covered 100% AD	40% AD	
Urgent Care	Covered 100% AD	40% AD	
Diagnostic Lab / X-Ray Services	You Pay	You Pay	
Minor	Covered 100% AD	40% AD	
Major	Covered 100% AD	40% AD	
Hospital Services**	You Pay	You Pay	
Outpatient	Covered 100% AD	40% AD	
Inpatient	Covered 100% AD	40% AD	
Maternity	Covered 100% AD	40% AD	
Durable Medical Equipment**	Covered 100% AD	40% AD	
Emergency Room	Covered 100% AD		
Mental Health Services**	You Pay	You Pay	
Office Visits	Covered 100% AD	40% AD	
Inpatient / Outpatient	Covered 100% AD	40% AD	
Chiropractic up to 20 visits per year	Covered 100% AD	Not Covered	

AD: After Deductible; HDHP: High Deductible Health Plan

Medical Cost			
	WELLNESS RATE Annual Physical Required	NON-WELLNESS RATE Without Annual Physical	
SelectHealth - 3200 Medical Plan	Employee Cost Bi-Weekly (26)	Employee Cost Bi-Weekly (26)	
Employee Only	\$63.22	\$90.47	
Two-Party	\$110.09	\$159.14	
Family	\$150.42	\$209.28	

Wellness Rate

*Washington County makes a higher monthly contribution when you receive an annual physical. You are initially enrolled at the "Wellness Rate", to remain at this rate, submit proof of service to HR within 60 days of the effective coverage date.

^{*}Member pays balance of billed charges above In-Network Rate. To receive the maximum benefits from the plan you should always use in-network providers. To find an in-network provider, visit www.selecthealth.org

^{**}Preauthorization may be required



HSA Preventive Drug List - Covered 100%

2024 Consumer Directed Healthcare (CDH) Preventive **Medications - Standard Plus Generics Only**

This list provides examples of commonly prescribed preventive medications. It is not an all-inclusive list; but many examples of medications in each category are listed.

This list does not indicate coverage. Please check with your plan administrator and/or benefit information materials if you have questions on coverage. Your cost share will be determined by your plan's drug coverage and formulary plan.

Coverage prior to the deductible being met may not be provided for every strength or dosage form of a listed medication.

ASTHMA/COPD

arformoterol albuterol HFA albuterol nebulizer solution albuterol oral breyna

budesonide oral inhalation cromolyn nebulizer solution ipratropium/albuterol

nebulizer solution ipratropium

nebulizer solution fluticasone/salmeterol

formoterol

levabuterol nebulizer solution

metaproterenol montelukast roflumilast terbutaline oral theophylline

tiotropium cap-inhaler

wixela inhub zafirlukast zileuton er

BONE DISEASE AND FRACTURES

alendronate ibandronate oral raloxifene risedronate risedronate dr zoledronic acid 5mg

CAVITIES

periomed sodium fluoride rinse, gel, cream, paste, tabs and drops

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COLONOSCOPY PREPARATION*

gavilyte-c gavilyte-g gavilyte-n PEG-3350/electrolytes sodium, potassium and magnesium sulfates

DEPRESSION

citalopram escitalopram fluoxetine fluoxetine dr fluvoxamine fluvoxamine er paroxetine paroxetine er sertraline

DIABETES

acarbose breyna generic syringes, lancets and needles glimepiride glipizide glipizide er alipizide/metformin glyburide glyburide micronized glyburide/metformin metformin metformin er miglitol nateglinide pioglitazone pioglitazone/glimepiride pioglitazone/metformin repaglinide repaglinide/metformin saxagliptin

saxagliptin/metformin

HEART DISEASE AND

STROKE BLOOD THINNERS

aspirin, 81 mg* & 325 mg aspirin-dipyridamole er clopidogrel dabigatran dipyridamole jantoven prasugrel warfarin

CHOLESTEROL LOWERING

HMG-COA REDUCTASE INHIBITORS*

atorvastatin fluvastatin fluvastatin er lovastatin pravastatin rosuvastatin simvastatin

OTHER CHOLESTEROL LOWERING AGENTS

amlodipine/atorvastatin cholestvramine cholestyramine light colesevelam colestipol ezetimibe ezetimibe/simvastatin fenofibrate fenofibric acid fenofibric acid dr gemfibrozil icosapent ethyl niacin niacin er prevalite

2024 CDH Preventive Medications - Standard Plus Generics Only

HIGH BLOOD PRESSURE	BETA BLOCKERS	DIURETICS	
ACE INHIBITORS	acebutolol	chlorthalidone	
benazepril captopril enalapril	atenolol betaxolol bisoprolol metoprolol succinate er	hydrochlorothiazide indapamide metolazone OTHER HIGH BLOOD	
fosinopril lisinopril moexipril perindopril quinapril ramipril trandolapril	metoprolol tartrate nadolol nebivolol pindolol propranolol propranolol er timolol	PRESSURE COMBINATIONS amlodipine/atorvastatin amlodipine/benazepril amlodipine/olmesartan amlodipine/olmesartan/hctz amlodipine/telmisartan amlodipine/valsartan amlodipine/valsartan/hctz	
ACE INHIBITORS/DIURETIC COMBINATIONS	BETA BLOCKER/DIURETIC COMBINATIONS	trandolapril/verapamil er MALARIA	
benazepril/hctz captopril/hctz enalapril/hctz fosinopril/hctz	atenolol/chlorthalidone bisoprolol/hctz metoprolol/hctz propranolol/hctz	atovaquone/proguanil chloroquine mefloquine primaquine	
lisinopril/hctz quinapril/hctz	CALCIUM CHANNEL BLOCKERS	MISC ANTIVIRALS	
ANGIOTENSIN II RECEPTOR ANTAGONISTS	amlodipine cartia xt	emtricitabine/tenofovir disoproxil fumarate (TDF) 200mg/300mg*	
candesartan eprosartan irbesartan losartan olmesartan telmisartan valsartan	 diltiazem diltiazem cd diltiazem er felodipine er isradipine matzim la nicardipine nifedipine 	DBESITY benzphetamine diethylpropion diethylpropion er phendimetrazine phendimetrazine er phentermine SMOKING-CESSATION*	
ANGIOTENSIN II RECEPTOR ANTAGONISTS/DIURETIC COMBINATIONS	nifedipine er nisoldipine er tiadylt er — taztia xt	bupropion sr 150mg nicotine gum, lozenges and patches	
candesartan/hctz irbesartan/hctz	verapamil verapamil er	varenicline VITAMINS OR	
losartan/hctz olmesartan/hctz	verapamil er pm verapamil sr	MINERALS folic acid* generic prenatal vitamins	

generic pediatric multivitamins

with fluoride*

Express Scripts manages your prescription benefit for your employer, plan sponsor, or health plan. For specific questions on coverage, please call the phone number on your member ID card or visit our website express-scripts.com.

telmisartan/hctz

valsartan/hctz

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^{*}Please note that some of these medications are also subject to the Affordable Care Act (ACA) and may be covered by your plan at 100%. In addition, there are some medications that are subject to ACA that are not on this list i.e. contraceptives and some breast cancer preventatives that maybe also covered by your plan at 100%.

Health Savings Account

What is a Health Savings Account (HSA)?

A qualified high deductible health plan with a Health Savings Account is an alternative to traditional health insurance plans. The HSA is a savings product that offers a different way for consumers to pay for their health care costs. HSAs enable you to pay for current qualified expenses and save for future medical and retiree health expenses on a tax-free basis.

You must be covered by a Qualified High Deductible Health Plan (QHDHP) to be able to contribute to an HSA. You own and control the money in your HSA. As your account balances grow, you may also decide what types of investments to make with your HSA money.

You and/or your employer may contribute to your HSA, up to the legal maximum. In 2024, the maximum annual contribution for single enrollee set by the IRS is \$4,150, and the maximum family contribution is \$8,300. A catch-up contribution, up to an additional \$1,000, is allowed for individuals who are 55 years or older. Please see the contribution chart below to determine the amount contributed to your HSA by your employer.

What you can do with your HSA

- Pay qualified health care expenses: Use the HealthEquity online PayChoice payment platform at www.MyHealthEquity.com to pay for qualified health care expenses. You can use your debit card, request a check by phone or online, or transfer funds online
- Save money for future medical expenses: You may not have significant health care expenses every year, but saving the maximum amount every year helps you build a sizeable savings for when you are faced with larger medical expenses
- Save for post-retirement expenses: Once you reach age 65, you can use your HSA funds to pay for anything you wish. Qualified medical expenses are still not taxed; any other expenses are subject to tax but not penalties

Your HSA is *your* money. Whatever you do not spend in a given year rolls over to the next. If you change jobs or retire, your HSA balance goes with you.

	HSA Annual Limi	ts	
	Employee Only Coverage	Two-Party Coverage	Family Coverage
2024 Maximum Contribution to HSA	\$4,150	\$8,300	\$8,300
Catch-up Contribution age 55 & older	\$1,000	\$1,000	\$1,000



Employer Contribution				
Coverage	Annual Total	Per Pay Period (26)		
Employee Only	\$750	\$250 Front-Loaded and \$20 Per Pay Period		
Two-Party	\$1,000	\$350 Front-Loaded and \$26 Per Pay Period		
Family	\$1,500	\$500 Front-Loaded and \$40 Per Pay Period		