



EMPLOYEE BENEFITS

MEDICAL INSURANCE

There are four different health insurance networks to choose from:

- BlueCross BlueShield of TN PPO Network S Plan
- BlueCross BlueShield of TN PPO Network P Plan
- Cigna Local Plus Plan
- Cigna Open Access Plan



Standard PPO Plan Cost (per pay period)

Coverage Type	<u>BCBS PPO S Network</u>	<u>Cigna Local Plus</u>	<u>BCBS PPO P Network</u>	<u>Cigna Open Access</u>
Employee Only	\$88.50	\$88.50	\$99.00	\$99.00
Employee & Child(ren)	\$215.50	\$215.50	\$233.00	\$233.00
Employee & Spouse	\$364.50	\$364.50	\$404.00	\$404.00
Family	\$402.00	\$402.00	\$439.50	\$439.50

The Standard Preferred Provider Organization (PPO) plan has a lower monthly premium than the Premier PPO, and higher out-of-pocket costs (deductible, copays, and coinsurance) when paying for care.

All health care options cover the same services and treatments, but medical necessity decisions may vary by carrier. Eligible care billed as preventive is free if you use an in-network provider.

MEDICAL BENEFITS

Medical benefits are processed through Cigna and BlueCross BlueShield of TN (BCBST).

The Cigna plan offers options in both Local Plus and Open Access Plus Networks. The Local Plus option has a smaller network that includes Erlanger Hospital and TC Thompson's Hospital. Cigna's LocalPlus Network is a cost effective solution to help control medical costs. The OAP is Cigna's national network that includes most providers and hospitals (including Parkridge). As of 2/1/2026 CIGNA LP and OAP do not include Memorial Hospital or providers. Cigna plans are in network only. Cigna plans are available in all 50 states.

The BCBST plan offers options in both the S and P Networks. The S Network includes Erlanger and Parkridge hospitals (Memorial is no longer in the S Network). Providers in the S Network are subject to change. The P Network is BCBST's largest network and includes Erlanger, Parkridge, and Memorial hospitals.

When selecting a plan, make sure your physicians are in network. To find an in-network provider near you, go to www.mycigna.com for Cigna or www.bcbst.com for BCBST. Click on "Find A Doctor." Please be sure to consult either the online directory or the customer service department to confirm that your provider participates in the network.

PHARMACY

All health plans include full prescription drug benefits. The health plan you choose determines your out-of-pocket prescription costs, including copay, coinsurance, deductible and out-of-pocket maximum. How much you pay for prescriptions depends on several things, including:

- The drug tier: Your choice of a generic, non-preferred brand or specialty drug will help determine the price
- The quantity: The day supply you receive: A 30-day (or less than a 30-day) or a 90-day (greater than a 31-day supply).
- Where you fill your prescription: You can fill at a retail, Retail-90, mail order pharmacy or specialty pharmacy.

Benefits Grid

Standard PPO Plan	<u>BCBS PPO S & P In-Network</u>	<u>Cigna LP & OAP In-Network</u>
Deductible (Individual/Family)	\$1,300/\$3,250	\$1,300/\$3,250
Out of Pocket Max (Individual/Family)	\$4,400/\$11,000	\$4,400/\$11,000
Benefits Overview		
Preventive Care Visits	\$0	\$0
Primary Care Office Visits	\$30	\$30
Specialist Office Visit	\$50	\$50
Urgent Care	\$50	\$50
Telehealth	\$15	\$15
Most Diagnostic/Lab Services	20%	20%
Emergency Room	20%	20%
Pharmacy - Prescriptions		
Generic/Tier 1 - Retail \$	\$14	\$14
Preferred/Tier 2 - Retail \$\$	\$50	\$50
Non-Preferred/Tier 3 - Retail \$\$\$	\$100	\$100
Specialty Drug Tier (1/2/3) - Retail %	30%	20%/30%/40%

BEHAVIORAL HEALTH/EMOTIONAL WELLBEING

All members enrolled in medical insurance with Partners for Health have behavioral health benefits through Optum Behavioral Health. Here4TN emotional wellbeing services are available to all those enrolled in a Partners for Health medical plan and benefits-eligible dependents. With EWS, those who are eligible get five counseling visits, either in-person or virtual, per problem, per year, per individual at no cost to you.