

Making the Most of Your High Deductible PPO Plan and Health Savings Account (HSA)

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The Caltech High Deductible PPO Plan provides coverage and flexibility—as well as tax advantages.

This guide can help you understand your medical plan, getting care, paying for expenses, using an HSA and more.

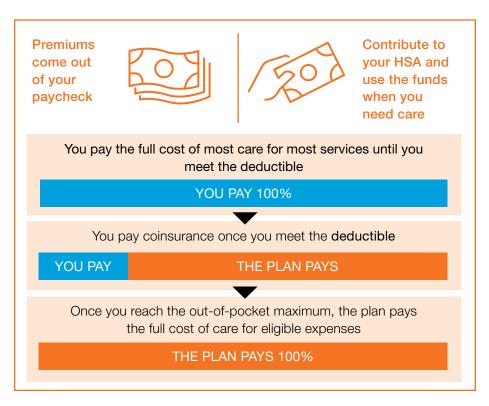
High Deductible PPO Plan Overview

What is a High Deductible PPO Plan?

Having a High Deductible PPO plan means you pay the full cost of most care until you meet a certain amount (the "deductible"). Once you meet the deductible, the plan begins to cover the majority of your costs and you pay the rest ("coinsurance"). Your plan offers:

- Greater flexibility when it comes to providers
- Lower premiums
- The unique opportunity to save through a Health Savings Account (HSA) to pay for health care expenses

How the Caltech High Deductible PPO Plan works



Terms to know

Annual deductible: The money you must pay out of pocket each year before your plan starts sharing costs. If you're covering family member(s) in addition to yourself, an embedded deductible applies. That means each member of your family has an individual deductible amount. If any one of you meets the individual amount, the plan starts paying coinsurance for that person. If expenses for two or more of you reach the family deductible amount, all of you are considered to have met the deductible.

Coinsurance: The percentage of your costs that you'll be responsible for paying once you've paid your deductible amount.

Explanation of Benefits (EOB): Lets you know whether or not the services you received are covered by the insurance company; the amount the plan pays for covered services, if you have met your deductible; and how much you owe your health care provider.

In-network: Providers, pharmacies, and facilities that offer special negotiated rates contracted with Anthem. Find them at **anthem.com/ca/Caltech > Care**.

Out-of-network: Providers, physicians, hospitals, or other health care providers that are out-of-network are those that do not participate in a health plan's network. The provider is not contracted with the health insurance plan to accepted negotiated rates. This means that if you decide to use an out-of-network provider, you will typically pay more or the full amount for the service received.

Out-of-pocket maximum: The most you're required to pay out of pocket each year (deductible and coinsurance combined) for covered plan expenses before the plan covers eligible expenses at 100% for Anthem contracted providers.

Usual & Customary (UC): The amount insurance pays for a medical service based on what providers in the geographic area usually charge for the same or similar medical service. When you go out of network, you pay any amount your provider charges above UC, even after you meet your out-of-pocket maximum (exceptions may apply for certain emergency situations).

Getting Care

Locating an in-network doctor or pharmacy

You will pay less when you stay within Anthem's network. To find an in-network provider, visit **anthem.com/ca/Caltech > Care**.

- The plan pays 100% of your in-network preventive care—including annual physicals with preventive tests, well-child care and well-woman care.
- The plan pays for 80% of in-network / 60% of out-of-network expenses once you meet your deductible, until you reach your out-of-pocket maximum.

Included Health¹ will help you find an in-network physician or specialist in your area. They can also deliver a remote second opinion from a top-rated specialist for you. Visit Included Health's website at **includedhealth.com/caltech** to get started.

Network considerations

Have preferred health care providers? Check to see if your preferred providers are in network.

Looking for providers? Consider the medical offices, pharmacies, urgent care facilities, and hospitals that are both in-network and accessible to you if you need care.

If you go out of network, remember...

- Your annual out-of-pocket maximum is higher—you'll spend more before the plan covers all your medical expenses for the remainder of the year for covered expenses.
- You'll be responsible for any charges above Usual & Customary even if you reached the out-of-pocket (OOP) maximum.

¹Included Health is available to all eligible employees and their covered dependents enrolled in a Caltech medical plan at no cost.



STAY IN NETWORK TO SAVE!

- ✓ Preventive care is 100% covered
- ✓ Plan pays a greater portion once the deductible is met
- ✓ Avoid paying costs above Usual & Customary





Paying For Health Care Expenses

Annual deductible

You pay the full cost of care for non-preventive services until you meet your plan's deductible. So, be prepared to pay these amounts out of pocket:

For just you		For you and your family
Anthem High Deductible PPO	\$3,300	\$6,600

It pays to stay in network! Once you meet the deductible, the plan covers the majority of your costs—80% when you stay in-network or 60% when you go out of network.

Remember! Be prepared to pay for the full cost of non-preventive medications until you meet your deductible.

Preventive care

Preventive care is important for your overall health and well-being, helping keep you healthier and identifying problems earlier. Making healthy choices and getting routine preventive care can help you stay well and catch problems early.

Preventive care exams are covered at 100% and not subject to the deductible when you see in-network providers. That means you pay nothing out of pocket.

Regular checkups are separate from any other doctor's visit for sickness or injury. In addition to physical exams, these visits focus on preventive care, such as:

- Your annual checkup In addition to a physical exam, your annual checkup can include important general health screenings for high blood pressure, cholesterol and other health conditions.
- Cancer screenings Most people don't experience cancer symptoms when diseases are in their earliest, most treatable stages. That's why screenings are recommended at certain times and intervals throughout your life. For example, it's recommended that both men and women begin colorectal cancer screenings starting at age 45. Other preventive screenings for women include Pap tests and mammograms. For men, prostate specific antigen tests to screen for prostate cancer might be recommended.
- **Childhood immunizations** Immunizations for children include Hepatitis A and B, chickenpox, measles, and MMR.
- Adult immunizations These include Tdap boosters and immunizations against pneumococcal conjugate and shingles
- Yearly flu vaccine Flu vaccines can help reduce your risk of getting the flu by up to 60%. If you do happen to get the flu, having the flu vaccine can significantly reduce the chances of serious flu symptoms that may lead to hospitalization.

Important! Talk to your contracted provider and ensure they understand what services are considered preventive and covered at 100%. Otherwise, your provider may bill you for a service subject to the deductible. Speak with Anthem's customer service or dedicated Anthem Concierge for more details.



Estimating health care expenses¹

Did you know you can get an idea of how much a service would cost beforehand?

You have options to choose from:

Request your provider conduct a pre-estimate with Anthem.



Use your Anthem account to get an estimate.



¹ Be sure to consult a financial professional before making savings decisions.

To help you estimate your health care expenses, look at your prior year's health care costs* and usage to understand what was provided in the past. This will help you plan for future expected services (office visits, prescriptions, lab work, dental work, glasses/contacts, etc.) for you and your family. You will also want to plan and be prepared for unexpected costs (e.g., an urgent care visit and Rx).

Use this space to help you estimate your out-of-pocket expenses, which can also be your HSA contribution election:

Medical:

Dental: Vision:

Other qualified medical expenses**:

Total health care costs health care costs and HSA election ***:

As a reminder you can adjust your HSA contributions (increase, decrease, stop, or start) anytime through the year.

- * Prior health care costs should be available by contacting your insurance company, usually by visiting their website where the EOBs are posted.
- ** Visit <u>healthequity.com/hsa-qme</u> to learn more about qualified medical expenses (QME) under an HSA.
- ***If you are not enrolled in a High Deductible plan all year or change your dependent enrollment, you may need to prorate your election. Visit www2.healthequity.com/calculator/hsa-contribution for more information.

The HSA: A Better Way to Spend and Save

Health Savings Account (HSA) overview

You have access to a tax-advantaged Health Savings Account (HSA) because you selected an HSA-eligible medical plan. An HSA is a bank account that allows you to set aside pre-tax* dollars—contributed by you—for qualified medical expenses now or in the future.

To enroll and choose your ongoing or one-time contribution amount:

Campus Benefits Office	JPL Benefits Office	
Go to MyBenefits.caltech.edu or click on MyBenefits in access.caltech.edu	Go to JPL Space and select workday.	

The money contributed to your HSA rolls over from year to year and is yours to keep...even if you leave Caltech, switch medical plans, or retire.

* Contributions are exempt from federal and FICA taxes. Contributions are also exempt for state income tax for all states except CA and NJ.

Key features of your HSA

- Contributions can be made on a pre-tax basis through payroll contributions or with post-tax funds from another account.
- All unused money in the HSA at the end of the calendar year rolls over to the next calendar year. This is not a use-it-or-lose-it account.
- Use the money in your account to pay qualified medical expenses as they happen—or save it to pay future claims down the road. It's your choice!
- You can view and change your HSA contributions at any time throughout the year:

Campus Benefits Office	JPL Benefits Office	
Go to MyBenefits.caltech.edu or click on MyBenefits in access.caltech.edu	Go to JPL Space and select workday.	

You can save receipts now and request reimbursement later or even after you retire. These features can make an HSA a unique part of your retirement strategy.



High Deductible PPO + HSA = A Perfect Match

<u>Click here</u> or scan the QR code with your smartphone to watch a short video explaining why the High Deductible PPO Plan and HSA belong together!





Contributing to an HSA

Contributing to an HSA is easy now that you are enrolled in the High Deductible PPO plan!

Campus Benefits Office	JPL Benefits Office	
Go to MyBenefits.caltech.edu or click on MyBenefits in access.caltech.edu	Go to JPL Space and select workday.	

The money contributed to your HSA rolls over from year to year and is yours to keep, even if you leave Caltech, switch medical plans, or retire.

Once you start contributing to the HSA, your account with HealthEquity will automatically be set up for you. Remember, you can update your contribution amounts at any time. You are responsible for ensuring you do not contribute more than the annual IRS maximum

Coverage Type	2025 Annual Contribution Limit ¹	
Individual Coverage	\$4,300	
Family Coverage	\$8,550	

 $^{^1\}mbox{lf}$ you are age 55 or older, you can make an additional "catch-up" contribution of up to \$1,000 each year

Three reasons to save with your HSA

Consider contributing enough funds to your HSA each year to meet your deductible and pay coinsurance in the event you have a major medical event. Any dollars you don't use will roll over to the next calendar year or can be invested—tax-free—to function as health savings for the future. Plus, contributing pre-tax dollars to your HSA reduces your taxable income!



Estimate your typical annual health care spending, as well as any upcoming needs such as surgery or pregnancy.

2 SAVE FOR THE UNEXPECTED

Consider setting aside additional funds in case of an unexpected illness or injury.

3 CONSIDER LONG-TERM SAVINGS AND RETIREMENT GOALS

The HSA is portable and never expires, making it a valuable retirement savings vehicle. You can contribute the maximum amount allowed by the IRS, invest your dollars and allow the growth to compound over time.



How to use your HSA to cover your health care needs

It's easy to pay for IRS-qualified health care expenses with your HSA. You can pay some providers from your HSA directly with a debit card, or you can pay out-of-pocket and reimburse yourself later. There is no deadline to reimburse yourself for a medical expense you paid for out-of-pocket. You can submit reimbursements next week, next year or several years after the expense is incurred. That means you can let your HSA grow for decades, and then take a lump-sum reimbursement distribution in the future, tax-free. Simply keep the documentation (receipt or EOB) from the expense to substantiate the claim if you are audited by the IRS. Note: You can only reimburse yourself for expenses that occurred after the date the account was established.

Visit <u>healthequity.com/hsa-qme</u> and <u>irs.gov/publications/p502</u> to learn more about qualified medical expenses (QME) under an HSA.

Tax benefits

HSAs offer significant tax advantages: contributions through payroll deductions are pre-tax, growth is tax-deferred, and spending is tax-free.

- Your pre-tax contributions are exempt from federal and FICA taxes.
 Contributions are also exempt from state income tax for all states except CA and NJ.
- All interest earned from any investments through your HSA is 100% tax-deferred, meaning the funds grow without being subject to taxes.
- Your HSA funds are not taxed when you use the funds for eligible expenses (i.e., deductibles, prescriptions, vision, and eligible dental care).

Saving for future health care expenses

Think of an HSA as an extra retirement account. If you are already maxing out your 403(b) contributions, your HSA can serve as another place for you to save for your future health care expenses when you retire. While developed as a way to manage the cost of high health insurance deductibles, HSAs also provide an opportunity for long-term savings.

HSA funds remain in your account from year-to-year if you don't spend them, and you retain ownership of the account if you leave your job or switch health plans. That means any investment earnings in your HSA have the potential to grow for decades, effectively creating an additional tax-advantaged retirement fund that you can earmark for health care expenses later in life.

Keep in mind, if you switch from a high deductible health plan to another type of health plan, you cannot contribute to the HSA until you are once again covered by a high deductible health plan. You can, however, still use the HSA to pay for qualified expenses.

You aren't allowed to contribute to an HSA once you've enrolled in any part of Medicare or other disqualifying coverage. In addition to using your HSA for qualified medical expenses, after age 65 you can use it for non-medical expenses without penalty, though you'll have to pay taxes on those withdrawals. Consult a tax professional to get help converting these tax-deferred dollars to taxable income.

Investing with your HSA

The HSA is more than a savings account; you can invest your funds in a select group of mutual funds once you have \$1,000 in your account. Any money earned on your investments grows tax-free. Your account balance remains liquid and can be used to pay for eligible expenses at any time.



Tax rules to consider

Your HSA is a bank account that you own, and because of its unique tax advantages, it's strictly governed by the IRS. Keep these rules and tips in mind so you can make the most of your savings opportunities:

Eligibility

If any of these situations apply to you, you may not be able to contribute to an HSA:

- Have additional coverage elsewhere, which includes an FSA, Tricare
- You are enrolled in any part of Medicare (Parts A and/or B)
- Claimed as a dependent on another person's tax return
- If an employee and their spouse both work for the Institute, their combined contribution limit to their respective HSAs is the annual statutory maximum for family contributions. (Both spouses may not contribute the family maximum to their respective HSAs.)

Call HealthEquity at (866) 346-5800 (available 24/7) for more information about IRS rules in these situations.

State tax rules

HSA taxation may vary by state, and in CA and NJ, HSAs are subject to state taxes. Consult your tax professional or financial advisor about the rules that apply for you.

Manage your HSA contributions

You can change your contributions online anytime:

Campus Benefits Office

Go to MyBenefits.caltech.edu or click on MyBenefits in access.caltech.edu

JPL Benefits Office

Go to **JPL Space** and select



It's up to you to make sure your total yearly contributions don't exceed the annual limit. If you contribute too much, you may need to pay an excess-contribution penalty tax.

Administrative fees

Like other financial accounts, HSAs have fees, including:

- A maintenance fee of \$3.95 per month if your account balance is less than \$2,500 and you are not enrolled in a Caltech HSA.
- Investment fees
- Additional fees may apply for paper statements and account closures.

Visit <u>learn.healthequity.com/caltech</u> for more details about any fees that may apply to your HSA.



Practical Ways to Use Your High Deductible PPO and HSA

Don't delay preventive health care services

Preventive care is the stuff you do to stay healthy. Why go to the doctor if you're healthy? The simple answer: preventive care can help you stay healthier, and, as a result, lower your health care costs.

For example, immunizations are considered preventive care. That's because vaccines help protect you and those around you from diseases, like tetanus, measles, chicken pox, seasonal flu and COVID-19.

Preventive care can also help detect health problems such as high blood pressure, diabetes or certain cancers when they are in their early stages and they're most treatable. Of course, tackling health issues early helps you get or stay on a healthy track and reduces the risk of developing other health conditions.

Use in-network providers

When making an appointment or scheduling a procedure, an important question to ask is, "Is this provider in my network?" Using in-network doctors and service providers will significantly reduce your out-of-pocket medical expenses and ensure that any costs you incur are applied towards your plan's deductible and out-of-pocket maximum.

To find an in-network doctor or provider, visit anthem.com/ca/Caltech > Care.

Save on medication costs

- Using generic drugs is one way to save money. Generics have the same active ingredients as the brand-name drugs they are based on.
- Pay with tax-advantaged dollars when you use your HSA.
- Your Anthem High Deductible PPO plan includes free access to Integrity Pharmaceutical Advisors (IPA), a firm of independent pharmacists who serve as a personalized concierge to assist you and your physician with any changes. IPA pharmacists are available to answer questions and discuss possible alternative medications with you and/or your physician for situations such as:
 - Facilitating a review and appeal process if you and/or your physician believe a prescription drug change will cause adverse effects
 - Assisting you and your prescribing physician with finding alternative prescriptions, including help with reducing your out-of-pocket costs
 - Questions about medications and the diseases they treat, including specialty medications, oncology and rare diseases
 - Prescription coverage benefit information

To schedule an appointment, reach out by phone or online, available 24/7:

- Call (844) 453-7043
- Web: <u>calendly.com/caltech-jpl/appointment</u>
- Appointments are offered weekdays from 8 a.m. 8 p.m. PT (minimum 48-hour advance booking)

Manage health care costs

Health care costs can be daunting, especially when they're unexpected or higher than anticipated. Here are some tips to help you prepare for out-of-pocket medical expenses:

- Adjust your contributions anytime throughout the year, including adding one-time contributions.
- Your Anthem account will have your Explanation of Benefits (EOBs) to confirm how much you should pay your provider. If you find a discrepancy, ask the provider's office or contact Anthem's Concierge for assistance.
- Access your HealthEquity account for your HSA balance and your Anthem claims.
- Keep track of all your eligible health care expenses!
 - The Anthem and HealthEquity portals will have information about medical claims and HSA, but there are many qualified medical expenses under the IRS guidelines. Visit <u>healthequity.com/hsa-qme</u> to learn more about qualified medical expenses (QME) under an HSA.
- If needed, work with your provider to develop a payment plan while you contribute toward an HSA throughout the year.



Learn More

If you want to	Contact	
Get a recommendation for an in-network physician or get a second opinion	Included Health (800) 929-0926 Monday – Friday 5 a.m. – 6 p.m. PT includedhealth.com/caltech	Download the Included Health mobile app at includedhealth.com/get-the-app
Talk to an Anthem Concierge about your Anthem High Deductible PPO health plan	At Campus in the HR Building Ruben Rodriguez (626) 395-6628 rrodrig5@caltech.edu	
	At JPL Ramona Mickel (303) 907-5983 ramona.mickel@anthem.com	
Speak to Anthem Customer Service	Anthem (866) 820-0765 Monday – Friday 8 a.m. – 6 p.m. PT anthem.com/ca/caltech	Download the Sydney Health mobile app at anthem.com/member-resources/sydney-app
Get more information about using your HSA	HealthEquity (866) 346-5800 24/7/365 support learn.healthequity.com/caltech	Download the HealthEquity mobile app at healthequity.com/mobile-app
Speak with a pharmacist at Integrity Pharmaceutical Advisors (IPA)	(844) 453-7043 Monday – Friday 8 a.m. – 8 p.m. PT	calendly.com/caltech-jpl/appointment
Contact the Human Resources Benefit Offices	Caltech (626) 395-6443 Monday – Friday 8 a.m. – 5 p.m. PT hrbenefits@caltech.edu hr.caltech.edu	
	JPL AskHR (818) 354-4447 Monday – Thursday 8 a.m. – 5 p.m. PT Non-RDO Friday 8 a.m. – 4 p.m. PT RDO Friday Closed	
	Submit an AskHR Inquiry at servicenow.jpl.nasa.gov/hrportal	

Note: This document is a summary of benefits and is not a contract. It describes benefits and resources in general terms. For current and comprehensive benefits information, please reference all plan documents and supporting materials.