

2026 Proposed Plan Options	LivingWell CDHP		LivingWell PPO		LivingWell Basic CDHP		HDHP Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Lifetime Maximum	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Health Reimbursement Arrangement (HRA)	Single \$500; Family \$1,000		Not Applicable		Single \$250; Family \$500			
Annual Deductible*	Single \$1,500 to <b>\$1,550 (+\$50)</b> Family \$2,750 to <b>\$2,900 (+\$150)</b>	Single \$2,750 to <b>\$2,900 (+150)</b> Family \$5,250 to <b>\$5,550 (+300)</b>	Single \$1,000 to <b>\$1,050 (+50)</b> Family \$1,750 to <b>\$1,850 (+\$100)</b>	Single \$1,750 to <b>\$1,850 (+\$100)</b> Family \$3,250 to <b>\$3,450 (+\$200)</b>	Single \$2,000 to <b>\$2,100 (+\$100)</b> Family \$3,750 to <b>\$3,950 (+\$200)</b>	Single \$3,250 to <b>\$3,450 (+\$200)</b> Family \$6,250 to <b>\$6,600 (+\$350)</b>	Single \$2,000 to <b>\$2,100 (+\$100)</b> Family \$4,000 to <b>\$4,200 (+\$200)</b>	Single \$4,000 to <b>\$4,200 (+\$200)</b> Family \$8,000 to <b>\$8,450 (+\$450)</b>
Out-of-Pocket Maximum**	Single \$3,000 to <b>\$3,150 (+\$150)</b> Family \$5,750 to <b>\$6,050 (+\$300)</b>	Single \$5,750 to <b>\$6,050 (+\$300)</b> Family \$11,250 to <b>\$11,900 (+\$650)</b>	Single \$3,000 to <b>\$3,150 (+\$150)</b> Family \$5,750 to <b>\$6,050 (+\$300)</b>	Single \$5,750 to <b>\$6,050 (+\$300)</b> Family \$11,250 to <b>\$11,900 (+\$650)</b>	Single \$4,000 to <b>\$4,200 (+\$200)</b> Family \$7,750 to <b>\$8,200 (+\$450)</b>	Single \$7,750 to <b>\$8,200 (+\$450)</b> Family \$11,250 to <b>\$11,900 (+\$650)</b>	Single \$8,050 to <b>\$8,300 (+\$250)</b> Family \$16,100 to <b>\$16,650 (+\$550)</b>	Single \$16,100 to <b>\$16,650 (+\$550)</b> Family \$32,200 to <b>\$33,300 (+\$1,100)</b>
Deductibles & Out-of-Pocket Maximums for In-Network and Out-of-Network providers accumulate separately and do not cross apply.								
Co-Insurance	Plan: 80% Member: 20%	Plan: 50% Member: 50%	Plan: 75% Member: 25%	Plan: 50% Member: 50%	Plan: 70% Member: 30%	Plan: 50% Member: 50%	Plan: 70% Member: 30%	Plan: 50% Member: 50%
Emergency Room	Deductible then 20% to <b>\$250 copay*</b> then Deductible then <b>25% (+5%)</b> *waived if admitted	Deductible then 20% to <b>\$250 copay*</b> then Deductible then <b>25% (+5%)</b> * waived if admitted	\$150 to <b>\$250 (+\$100)</b> copay* then Deductible then 25% *waived if admitted	\$150 to <b>\$250 (+\$100)</b> copay* then Deductible then 25% *waived if admitted	Deductible then 30% to <b>\$250 copay*</b> then Deductible then 30% *waived if admitted	Deductible then 30% to <b>\$250 copay*</b> then Deductible then 30% *waived if admitted	Deductible then 30%	Deductible then 30%
Doctor's Office Visits	Deductible then 20%	Deductible then 50%	Co-Pay: \$25 PCP; \$50 Specialist	Deductible then 50%	Deductible then 30%	Deductible then 50%	Deductible then 30%	Deductible then 50%
Rx								
GLP-1 Weight Loss Drugs	Deductible then 20% to <b>Deductible then 25% (+5%)</b>	Deductible then 50%	\$40 to <b>Deductible then 25%</b>	\$80 to <b>Deductible then 50%</b>	Deductible then 30%	Deductible then 50%	Deductible then 30%	Deductible then 50%
2025 Actuarial Value	91.7%		89.1%		87.8%		81.8%	
2026 Actuarial Value	91.2%		88.7%		87.3%		81.4%	
% Savings	0.5%		0.3%		0.6%		0.5%	
Medical Design Change Savings	<b>\$8,319,119</b>		<b>\$3,813,877</b>		<b>\$505,007</b>		<b>\$6,261</b>	
GLP-1 Design Change Savings	<b>\$9,287,315</b>		<b>\$20,227,389</b>		<b>\$0</b>		<b>\$0</b>	
Total Savings					<b>\$42,158,968</b>			

Total Remaining Balance After FSA & HRA Reserve as of 12/31/2026 (including 18.2% ER premium increase for 2026)  
Remaining Gap

**(\$39,427,205)**  
\$2,731,763