

BENEFITS THAT SHOW UP

in all of life's moments, big and small

Make your benefit decisions
during open enrollment:
October 28 – November 8, 2024
bluecrossma.org/associate

DISCOVER BENEFITS DESIGNED FOR THE LIFE YOU'RE LIVING

When you need expert care.

When you need extra support.

When you need the right guidance.

Your benefits are there.





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IT ALL STARTS WITH SHOWING UP FOR YOU

Our mission is to show up for everyone like they're the only one. The first step is showing up for you and your family. That's why we provide a robust benefits package that goes way beyond medical coverage.

LET'S GET GOING



1. Explore

Discover all your benefits and make the most of what's available to you. Read through this decision guide or visit bluecrossma.org/associate.



2. Choose

Make your plan elections. Don't forget to review your beneficiaries and save your confirmation page. Sign in to Workday to enroll at wd5.myworkday.com/bcbsma/login.html.



If you don't enroll...

Here's what will carry over: medical, dental, vision, disability, life insurance, and HSA contributions.

Here's what won't carry over: FSA elections and contributions. To be eligible for the rollover, you must elect a health care or limited purpose FSA for 2025. Dependent care FSAs aren't eligible for the rollover.

DEDUCTIBLE? COPAY? NEED A REFRESHER ON WHAT THESE MEAN?

Before diving deep, get to know the most important terms and phrases. Read the glossary on [page 30](#).

IN THE SPOTLIGHT FOR 2025

PLAN RATES

To continue providing you with a competitive benefits package, the following cost changes will take effect in 2025:

- There will be a 5.9% cost increase for both medical plans.
- **For the PPO plan:** deductibles will increase from \$1,600 to \$1,700 for individual coverage and from \$3,200 to \$3,400 for individual +1 or family coverage.
- **For the HMO plan:** deductibles will increase from \$1,250 to \$1,350 for individual coverage and from \$2,500 to \$2,700 for individual +1 or family coverage.
- There will be no rate changes for the dental and vision plans in 2025.

HEALTH FINANCIAL ACCOUNTS

A Blue Cross-funded health financial account is automatically paired with each medical plan. The account type depends on the medical plan you select:

- **PPO:** Health savings account (HSA)
- **HMO:** Health reimbursement arrangement (HRA)

These accounts help offset your out-of-pocket costs. The HSA and HRA contributions from Blue Cross **will remain the same for 2025**.

You also have the option of signing up for a flexible spending account (FSA). If you elect a health care or limited purpose FSA, up to \$640 from your 2024 balance will roll over and be available to use in 2025.

Discover how to use these accounts to maximize your savings on [pages 19 and 23](#).



“When I needed it when my children were younger, the HSA came in very handy. Now that it's just my husband and I, I like that any remaining balance is rolled over for our future needs.”

Maryann Ward, your colleague in the treasury division

SHOWING UP IN THE MOMENTS THAT MATTER

And they all matter. That's why your benefits package is designed to support your total well-being, including physical, emotional, financial, and social health. Here are just a few perks you should know about.

MAVEN

Maven provides free, 24/7 virtual support for family building, pregnancy, parenting, and menopause. Get unlimited video appointments and messaging with experts, access to resources and provider-led classes, and a dedicated Care Advocate. Learn more at mavenclinic.com/join/bcbsma-asc.

FINANCIAL FINESSE

Our confidential, no-cost Financial Finesse benefit offers tools, resources, and coaching to help you make informed financial choices. Talk with a financial coach Monday through Friday from 9:00 a.m. to 8:00 p.m. ET by calling 1-833-224-5233 or via live chat. To learn more, visit ffhub.com/thrive.

Bright Horizons.

Family care benefits

We offer a range of no-cost and subsidized family care benefits through Bright Horizons. You can get:

- One-on-one, expert support for finding care, navigating the college application process and tuition costs, and helping a loved one with special needs
- Back-up care for your family, including children and adult or elder loved ones, when there's a disruption in your regular care arrangement
- Virtual or in-person tutoring for grades K-12 or undergraduate and graduate courses
- A \$100 credit for pet sitting through Rover or Wag

To sign up and explore these benefits, go to clients.brighthouse.com/bcbsma.

Education assistance programs

Get student loan repayment support, including contributions of up to \$75 per month, and tuition assistance of up to \$10,000 per year for undergraduate and graduate programs, certifications, and continuing education programs. To learn more, go to aspire.edassist.com.

BENEFITS THAT SHOW UP, JUST LIKE YOU

You show up when it counts — and so do your benefits. You have access to no-cost, unlimited, on-demand support all year long. Connect one-on-one with experts across a wide range of specialties.

Can't find childcare?

Meet with a Bright Horizons Family Concierge.

Hoping to buy a house?

Meet with a financial coach and create a game plan.

Thinking about retirement?

Get a retirement consultation with our benefits team.

Feel like you're starting menopause?

Meet with an OB/GYN through Maven and get your questions answered.

Have a child thinking about college?

Meet with a college coach through Bright Horizons for admissions process, essay writing, and financial aid support.

Check out your well-being benefits at www2.bluecrossma.net/well-being. (You must be connected to VPN to access.)



“After my maternity leave, I was thrilled to check out the postpartum resources on Maven. I was assigned a care team of pediatric sleep coaches, lactation consultants, and strength coaches, among others. It's been great to know that I can book an appointment so quickly and get advice. Such a great benefit!”

Courtney Clark, your colleague on the people team

YOUR PLAN CHOICES

A robust, competitive benefits package.

Find what works for you.

YOUR BENEFITS OVERVIEW



HERE'S WHAT'S OFFERED IN 2025

Benefit	Key features	Eligibility ¹								
Medical Page 14	Blue Care Elect Saver — Choice (PPO) includes an HSA with Blue Cross contributions. Network Blue New England Deductible (HMO) includes an HRA with Blue Cross contributions.	You can enroll: • Yourself • Your spouse/domestic partner • Your children up to age 26								
Dental Page 26	Dental Blue® covers in-network preventive care, basic care (e.g., fillings, root canals), major care (e.g., crowns, dentures, implants), and orthodontia.									
Vision Page 26	Blue 20/20 PLUS , powered by EyeMed Vision Care®, covers comprehensive eye exams, eyeglasses, and more.									
Financial accounts Pages 19, 23	A Blue Cross-funded account is automatically paired with each medical plan to help offset your costs. Depending on the plan selected, these include: • PPO: HSA (Health savings account) • HMO: HRA (Health reimbursement arrangement) You also have the option to elect flexible spending accounts (FSAs), including: • Health care FSA • Limited purpose FSA • Dependent care FSA If you elect a health care or limited purpose FSA for 2025, up to \$640 from your 2024 balance will roll over and be available to use in 2025.	Financial accounts available by medical plan: <table border="0"> <tr> <td>PPO</td> <td>HMO</td> </tr> <tr> <td>• HSA*</td> <td>• HRA*</td> </tr> <tr> <td>• Limited purpose FSA</td> <td>• Health care FSA</td> </tr> <tr> <td>• Dependent care FSA</td> <td>• Dependent care FSA</td> </tr> </table> Financial accounts available if you don't elect a medical plan: • Health care FSA • Dependent care FSA <small>*Non-tax dependents, like domestic partners, aren't eligible for the Blue Cross contribution.</small>	PPO	HMO	• HSA*	• HRA*	• Limited purpose FSA	• Health care FSA	• Dependent care FSA	• Dependent care FSA
PPO	HMO									
• HSA*	• HRA*									
• Limited purpose FSA	• Health care FSA									
• Dependent care FSA	• Dependent care FSA									
Life insurance Page 28	Basic coverage of 1x your annual salary, ² up to a maximum of \$750,000, is automatically provided to eligible associates. Associates who work 30 or more hours per week have the option to buy additional coverage up to 2x their annual salary, ² up to a maximum of \$750,000.	Basic coverage automatically provided for: Associates who work 15 or more hours per week								
Long-term disability (LTD) Page 28	Basic coverage of 60% of your monthly salary ² is automatically provided for eligible associates. You have the option to buy additional LTD coverage equal to 66-2/3% of your monthly salary, ² up to a monthly maximum of \$12,500.	Basic coverage automatically provided for: Full-time associates who work 30 or more hours per week								

1. Eligibility Qualified Status: The benefits you choose during open enrollment are effective for the entire 2025 plan year (January 1–December 31, 2025). You can't make changes to your coverage, or who you cover during the year, unless you have a qualifying family or work status change. You must make your election change within 30 days of the change in status, and the coverage change must be consistent with your change in status. Qualifying status changes include, but aren't limited to: marriage, legal separation, divorce, or annulment; you become eligible for or end a domestic partnership; birth or legal adoption of a child, or placement of a child with you for legal adoption; your child becomes eligible or ineligible for coverage.

2. Salary = Benefits Base Rate, which, in general, is your annual base salary plus annual targeted sales bonus (where applicable).



GET TO KNOW YOUR MEDICAL PLAN OPTIONS

It's important to choose the plan that's right for your unique needs. Both plans fully cover in-network preventive care,¹ but there are plenty of differences. So here's a quick comparison of your options.



"My doctors welcome my Blue Cross ID card with confidence, trusting in the reliability of the insurance—it's a trust you can see in their smiles."

Sim Kahlon, your colleague on the innovation team

1. Diagnostic tests and lab work aren't covered under preventive care during the plan year.

BLUE CARE ELECT SAVER — CHOICE WITH HSA (PPO)



No primary care provider (PCP) or referrals required



Auto-enrolled into an HSA



Lower cost per paycheck (compared with HMO plan)



Billed 100% of charges until your deductible is met



Access to our national network of providers



PCP and referrals to see specialists required



Auto-enrolled into an HRA



Higher cost per paycheck (compared with PPO plan)



Copay needed for most medical services and purchasing prescriptions



Access to our New England Network



PPO PLAN

BLUE CARE ELECT SAVER — CHOICE WITH HSA

HERE'S WHAT YOU SHOULD KNOW:



About getting care:

- You **aren't required** to choose a PCP or get referrals.
- In-network preventive care is **100% covered**.¹
- You get **more flexibility** in choosing your providers.



About your costs:

- It's **lower cost per paycheck but higher deductible**, compared to the HMO plan.
- You'll be auto-enrolled into an HSA, with Blue Cross contributions and optional personal contributions.
- You can choose to enroll in a limited purpose FSA.



We suggest you consider this plan if you live outside of New England.

That's because you'll need access to a national network of providers.



“I've selected the PPO Saver plan every year for my family. We appreciate the balance of cost savings and comprehensive coverage. I highly recommend the PPO Saver Plan to anyone looking for a flexible and affordable health care solution.”

Colleen Williams, your colleague on the enterprise risk management team

¹ Diagnostic tests and lab work aren't covered under preventive care.

THINGS TO CONSIDER

- Under this plan, you're billed 100% of the charges until the deductible is met.
- Funds from your HSA, including the Blue Cross contributions, can be used to pay for costs.
- This plan has a slightly higher deductible and out-of-pocket maximum, but these increases are offset by a lower cost per paycheck and by using your HSA for medical expenses.
- If you elect a limited purpose FSA for 2025, any unused funds up to \$640 from your 2024 balance will roll over and be available to use in 2025.

SAVE SMART WITH AN HSA

If you choose the Blue Care Elect Saver — Choice plan (PPO), it comes automatically paired with an HSA.

An HSA lets you put money away for future health care costs while saving on taxes. How? HSAs are never taxed at a federal income tax level when used for qualified medical expenses. Contributions can come straight out of your paycheck pre-tax, and your HSA can grow tax free, too.

- No “use it or lose it” — keep your HSA forever
- Create a health care emergency safety net
- Invest¹ your HSA funds tax free, like a 401(k)

¹ Investments made available to HSA members are subject to risk, including the possible loss of the principal invested, and aren't FDIC or NCUA insured, or guaranteed by HealthEquity®, Inc.

A PPO PLAN IN ACTION

Here's a hypothetical example using a PPO plan in an everyday situation. These are examples of medical care expenses; actual costs may differ based on the specific care you receive, your health care provider's charges, and other factors.

1. Sam has a sore throat and calls her doctor to make an appointment. After some tests and blood work, the provider diagnoses Sam with strep throat and prescribes an antibiotic.
2. Sam picks up the prescription at the pharmacy and pays \$50. She pays the full price of the prescription because the deductible hasn't yet been met. Sam uses money from her HSA to pay for the medication.
3. Later, Sam receives two bills for services provided by her doctor: \$200 for the visit and \$150 for the blood work. She uses money from her HSA to pay those bills. These expenses are applied toward the deductible.

After the deductible is met:

- Blue Cross covers 90% of eligible costs, so Sam pays \$20 to visit the doctor, not \$200, and \$15 for the blood work, instead of \$150.
- Sam now pays the generic prescription maximum copay for her medication, which is \$10.

After Sam reaches the out-of-pocket maximum, all eligible medical and prescription costs are covered.

In summary:

Sam spends more up front for services and has a higher deductible, but pays less per paycheck (compared to the HMO plan). Blue Cross contributes more to Sam's HSA (compared to the HMO's HRA) and any money left over at the end of the plan year is rolled over into the next year, with potential growth from interest or reinvestment.

Have family coverage?




With this plan, you and your family meet the \$3,400 family deductible as a **group**. Once your combined expenses as a family meet the deductible amount, Blue Cross will begin sharing the costs for everyone's care.

PPO COSTS

Key  Individual  Individual + 1  Family

Costs

Per-paycheck contributions¹

	Annualized base salary < \$80K	Annualized base salary ≥ \$80K
	\$32.87	\$50.69
	\$65.30	\$100.89
	\$95.00	\$147.94

Deductible²

\$1,700
\$3,400
\$3,400

Out-of-pocket maximum

\$5,000
\$10,000
\$10,000

Pharmacy^{3,4}

Retail (1-month supply)

- Tier 1 (generic): deductible, then \$10 copay
- Tier 2 (brand): deductible, then \$25 copay
- Tier 3 (non-preferred): deductible, then \$45 copay

Mail service (3-month supply)

- Tier 1 (generic): deductible, then \$20 copay
- Tier 2 (brand): deductible, then \$50 copay
- Tier 3 (non-preferred): deductible, then \$135 copay

\$0 copays

Certain medications that treat high blood pressure, heart conditions, high cholesterol, depression, diabetes, and respiratory conditions are covered at no cost. Visit bluecrossma.org/associate for a complete list.

HOW PAYMENTS WORK WITH OUR PPO PLAN

Phase 1 – Start of the year



You pay fully

You pay in full for all services until your deductible is met, except for preventive care, which is 100% covered by Blue Cross.⁵ Your HSA, with contributions from Blue Cross, can help pay for these costs.

Phase 2 – After deductible is met²



10%

90%

You and Blue Cross begin to share costs. Blue Cross pays for most of the costs for covered services, while you pay for co-insurance and copayments. You'll continue to share costs until you meet the out-of-pocket maximum.

Phase 3 – After out-of-pocket maximum is met



Blue Cross pays fully

You owe nothing. Blue Cross pays 100% of the cost for eligible, in-network expenses for the rest of the year.

1. Paycheck contribution amounts are for full-time associates. For part-time rates, visit bluecrossma.org/associate.







2. Under this plan, you're responsible for the full cost of medical services, as well as any medication costs, until you reach your deductible.

3. The copay is waived for birth control (tier 1/generics only), smoking cessation medications, and certain orally administered anti-cancer medications.

4. These categories apply for most cases, but some medication tiers may vary.

5. Diagnostic tests and lab work aren't covered under preventive care.

FINANCIAL ACCOUNTS FOR PPO

	HSA ¹	Limited purpose FSA	Dependent care FSA
How is this funded?	Blue Cross automatically enrolls you into an HSA and contributes a set amount. You have the option to contribute your own money, too.	You have the option to enroll, and can contribute your own money up to the annual maximum.	You have the option to enroll, and can contribute your own money up to the annual maximum.
Contributions²	Blue Cross		
2025 contribution limits: • Individual: \$4,300 • Individual + 1/Family: \$8,550 • Catch-up: \$1,000	Annualized base salary < \$80K	Annualized base salary ≥ \$80K	None
	 \$1,225	\$850	None
	 \$2,450	\$1,700	None
	 \$2,450	\$1,700	None
	Non-tax dependents, like domestic partners, aren't eligible.		
Maximum personal contribution	Annualized base salary < \$80K	Annualized base salary ≥ \$80K	Projected to be \$3,300, but is subject to change pending IRS confirmation.
	 \$3,075	\$3,450	\$5,000 per household or \$2,500 if married but filing separately
	 \$6,100	\$6,850	
	 \$6,100	\$6,850	
Who can I use this money for?	You, your spouse, and your tax dependents (including children up to age 19, or age 24 if a full-time student) whether they're enrolled in the plan or not. ³	You, your spouse, and your tax dependents (including children up to age 26), whether they're enrolled in the plan or not. ³	Your child under age 13, a disabled spouse, or adult dependent — whether they're enrolled in the plan or not. ³
What can I use this money for?	All eligible ^{4,5} medical, dental, vision, and prescription medication expenses that occur now ⁶ or in the future	All eligible ⁴ dental and vision expenses in the plan year ⁷	Childcare and adult day care expenses while you and your spouse work or attend school ⁷
What happens to my account balance at the end of the year?	Your unused balance rolls over year to year and can grow tax free with interest or be invested.	If you elect a limited purpose FSA for 2025, up to \$640 of your unused balance from 2024 will roll over. ⁸	Your unused balance won't roll over.
What happens to my account if I leave Blue Cross?	The money is yours to keep and save for future expenses, even into retirement.	Your account is closed. You can file claims up to 90 days after your termination date for services received while you were working at Blue Cross.	Your account is closed. You can file claims up to 90 days after your termination date for services received while you were working at Blue Cross.

1. You ARE NOT ELIGIBLE to open a HSA if you meet any of the following criteria: You're covered by another health plan, including Medicare; you can be claimed as a dependent on another individual's tax return; you have access to dollars in a Flexible Spending Account (FSA) that can pay for any medical expenses before the required deductible is met, including a spouse's FSA.

2. Contribution rates reflect the current IRS contribution limits.

3. Can't be used for domestic partner expenses.

4. Eligible expenses include deductibles, co-insurance, and copayments where applicable.

5. Withdrawals for non-eligible expenses are subject to a tax penalty.

6. "Now" refers to expenses incurred anytime this year.

7. All expenses must be incurred in the plan year: January 1, 2025 to December 31, 2025. You can file claims for reimbursement through March 31, 2026.

8. Your unused balance will carry over into the next plan year, subject to IRS limits.

HMO PLAN

NETWORK BLUE NEW ENGLAND DEDUCTIBLE WITH HRA

HERE'S WHAT YOU SHOULD KNOW:



About getting care:

- You're **required** to choose a PCP.
- Referrals **are needed** to see specialists.
- In-network preventive care is **100% covered**.¹
- Only care received from providers in **our New England network** is covered.



About your costs:

- It's **higher cost per paycheck but lower deductible**, compared to the PPO plan.
- **Copay** only needed for most medical services and purchasing prescriptions.
- You'll be auto-enrolled into an **HRA**, funded by Blue Cross contributions.
- You can choose to enroll in a **health care FSA**.



Only care received from doctors, hospitals, and other providers in our New England network is covered.

The plan's service area includes Massachusetts, Rhode Island, Vermont, Connecticut, New Hampshire, and Maine.

THINGS TO CONSIDER

- Your PCP is your main source for health care services. If you see another doctor or specialist, you'll need to get a referral from your PCP for the service to be covered by your plan. Please make sure to update your PCP ID number with Employee Services by phone or via email to avoid delay in payment of claims. See the Employee Services contact details on **page 31**.
- This plan has a higher cost per paycheck but is offset by having a lower deductible and out-of-pocket maximum. It pairs with an HRA that can be used to pay for eligible medical and prescription drug expenses.
- You have the option of electing a health care FSA that can be used for eligible medical, prescription drug, dental, and vision expenses.
- If you elect a health care FSA for 2025, up to \$640 of unused funds will roll over from your 2024 balance and be available to use in 2025.

AN HMO PLAN IN ACTION

Here's a hypothetical example using an HMO plan in an everyday situation. These are examples of medical care expenses; actual costs may differ based on the specific care you receive, your provider's charges, and other factors.

1. Sam has a sore throat and makes an appointment with her PCP. After some tests and blood work, the provider diagnoses Sam with strep throat and prescribes an antibiotic. Sam pays a \$25 copay, using funds from her HRA.
2. Sam picks up the prescription at the pharmacy, and uses money from her HRA for the \$15 copay.
3. Later, Sam gets a \$150 bill for the lab work. Since Sam hasn't met the deductible, she uses money from her HRA to pay the bill, which is applied to her deductible.

After the deductible is met:

- Sam still pays the \$25 copay to see the doctor but no longer pays for lab work.
- Prescription costs remain the same.

After Sam reaches the **out-of-pocket maximum**, the copayments are covered at 100%.

In summary:

Sam spends less up front for certain services and has a lower deductible, but pays more per paycheck (compared to the PPO plan). She receives a smaller contribution from Blue Cross (compared to the PPO's HSA) and can't contribute to the HRA. She also must see her PCP for visits and referrals.

Have family coverage?

With this plan, you and each member of your family work toward the deductible amount as **individuals**. Copayments begin for all family members when any combination of individual family member expenses meets the family deductible amount.


¹ Diagnostic tests and lab work aren't covered under preventive care.

HMO COSTS

Key  Individual  Individual + 1  Family

Costs

Per-paycheck contributions¹

	Annualized base salary < \$80K	Annualized base salary ≥ \$80K
	\$53.47	\$75.44
	\$106.42	\$150.30
	\$155.25	\$220.40

Deductible

\$1,350
\$2,700
\$2,700

Out-of-pocket maximum

\$3,000
\$6,000
\$6,000

Pharmacy^{2,3}

Retail (1-month supply)

- Tier 1 (generic): \$15 copay, no deductible
- Tier 2 (brand): \$30 copay, no deductible
- Tier 3 (non-preferred): \$50 copay, no deductible

Mail service (3-month supply)

- Tier 1 (generic): \$30 copay, no deductible
- Tier 2 (brand): \$60 copay, no deductible
- Tier 3 (non-preferred): \$150 copay, no deductible

\$0 copays

Certain medications that treat high blood pressure, heart conditions, high cholesterol, depression, diabetes, and respiratory conditions are covered at no cost once you meet your deductible. Visit bluecrossma.org/associate for a complete list of medications.

HOW PAYMENTS WORK WITH OUR HMO PLAN

Phase 1 – Start of the year



You share costs with Blue Cross for most services right away through copayments. For others, you pay 100% of the cost until you reach your deductible.

Phase 2 – After deductible is met






You pay a copay for most services, and some services are now covered fully by Blue Cross. This continues until you meet your out-of-pocket maximum.

Phase 3 – After out-of-pocket maximum is met



You owe nothing. Blue Cross pays 100% of the cost for eligible, in-network expenses for the rest of the year.

FINANCIAL ACCOUNTS FOR HMO

	HRA	Health care FSA	Dependent care FSA
How is this funded?	Blue Cross automatically enrolls you into an HRA and contributes a set amount.	You have the option to enroll, and can contribute personal funds up to the annual maximum.	You have the option to enroll, and can contribute personal funds up to the annual maximum.
Contributions¹	Blue Cross  \$400  \$800  \$1,000 Non-tax dependents, like domestic partners, aren't eligible.	None	None
Maximum personal contribution	Personal contributions aren't allowed.	Projected to be \$3,300, but is subject to change pending IRS confirmation.	\$5,000 per household or \$2,500 if married but filing separately
Who can I use this money for?	You, your spouse, and any covered tax dependents enrolled in the plan ²	You, your spouse, and your tax dependents (including children up to age 26), whether they're enrolled in the plan or not ²	Your child under age 13, a disabled spouse, or adult dependent – whether they're enrolled in the plan or not ²
What can I use this money for?	All eligible ^{3,4} medical and prescription medication expenses in the plan year ⁵	All eligible ^{3,4} medical, dental, vision, and prescription medication expenses in the plan year ⁵	Childcare and adult day care expenses while you and your spouse work or attend school ⁵
What happens to my account balance at the end of the year?	Your unused balance is forfeited and doesn't roll over to the next year.	If you elect a health care FSA for 2025, up to \$640 of your unused balance from 2024 will roll over.	Your unused balance won't roll over.
What happens to my account if I leave Blue Cross?	Your account is closed. You can file claims up to 90 days after your termination date for services received while you were working at Blue Cross.		



“The Blue Cross-funded HRA was a big help when I needed an MRI of my hand. Having it enabled me to focus on what I needed to do to heal rather than the cost of the service.”

Michael Steinhardt, your colleague on the sales team

























1. Paycheck contribution amounts are for full-time associates. For part-time rates, visit bluecrossma.org/associate.
 2. The copay is waived for birth control (tier 1/generics only), smoking cessation drugs, and certain orally administered anti-cancer drugs.
 3. These categories apply for most cases, but some medication tiers may vary.
 4. Diagnostic tests and lab work aren't covered under preventive care.

1. Contribution rates reflect the current IRS contribution limit.
 2. Can't be used for domestic partner expenses.
 3. Eligible expenses include deductibles, co-insurance, and copayments where applicable.
 4. Withdrawals for non-eligible expenses are subject to a tax penalty.
 5. All expenses must be incurred in the plan year: January 1, 2025 to December 31, 2025. You can file claims for reimbursement through March 31, 2026.

COST COMPARISON FOR YOUR PLAN OPTIONS

PAYMENT DETAILS

Key  Individual  Individual + 1  Family

	Blue Care Elect Saver — Choice (PPO)		Network Blue New England Deductible (HMO)	
Annual deductible	 \$1,700		 \$1,350	
	 \$3,400		 \$2,700	
	 \$3,400		 \$2,700	
Contributions from Blue Cross	HSA		HRA	
	Annualized base salary < \$80K		Annualized base salary ≥ \$80K	
	 \$1,225	\$850	 \$400	
	 \$2,450	\$1,700	 \$800	
	 \$2,450	\$1,700	 \$1,000	
Net deductible <small>The remaining balance of your deductible after using Blue Cross contributions</small>	Annualized Base Salary < \$80K		Annualized Base Salary ≥ \$80K	
	 \$475	\$850	 \$950	
	 \$950	\$1,700	 \$1,900	
	 \$950	\$1,700	 \$1,700	
Out-of-pocket maximum	 \$5,000		 \$3,000	
	 \$10,000		 \$6,000	
	 \$10,000		 \$6,000	

How Blue Cross helps pay toward your deductible

With each plan, you get a health financial account that Blue Cross contributes to. You can use these funds from Blue Cross to pay for eligible expenses that would otherwise be out-of-pocket costs before you meet your deductible. The deductible amount left over after you subtract the Blue Cross contributions is your net deductible. Refer to the amounts in the chart above to find your own.

Example:

Pat needs **family coverage** and has an annualized base salary of **less than \$80,000**.

Based on the rates in the chart above, here's how he would find the net deductible for each plan.

	PPO plan	HMO plan
Annual deductible	\$3,400	\$2,700
– Contributions from Blue Cross	– \$2,450	– \$1,000
Net deductible	\$950	\$1,700

MEDICAL SERVICES COSTS

		Blue Care Elect Saver — Choice (PPO)	Network Blue New England Deductible (HMO)
Co-insurance/copayments		You must meet the deductible amount first, then you'll pay 10% co-insurance (when required).	\$25-\$150 copayments (specific services subject to deductible)
Medical	Preventive care	\$0, no deductible	\$0, no deductible
	Emergency room (ER)	Deductible, then \$150 copay ¹	\$150 copay, no deductible ²
	Urgent care	Deductible, then co-insurance	\$35 copay, no deductible
	PCP visit	Deductible, then co-insurance	\$25 copay, no deductible
	Specialist visit	Deductible, then co-insurance	\$35 copay, no deductible ³
Hospital care	Inpatient/outpatient	Deductible, then co-insurance ^{4,5}	Deductible, then \$0 ^{4,5}
Tests	Diagnostics (X-rays, lab tests)	Deductible, then co-insurance	Deductible, then \$0
	Imaging (CT/PET scans, MRIs)	Deductible, then co-insurance ^{6,7}	Deductible, then \$75 copay ^{6,7}
Mental/behavioral health or substance use disorder	Inpatient	Deductible, then co-insurance ⁸	Deductible, then \$0 ⁹
	Outpatient	Deductible, then co-insurance	\$25 copay, no deductible
Pregnancy care	Prenatal	\$0, no deductible	\$0, no deductible
	Postnatal	Deductible, then co-insurance	\$0, no deductible
	Inpatient (including delivery)	Deductible, then co-insurance	Deductible, then \$0
Telehealth	Minor medical care	Deductible, then co-insurance	\$25 copay, no deductible
	Therapy	Deductible, then co-insurance	\$25 copay, no deductible
	Psychiatry	Deductible, then co-insurance	\$25 copay, no deductible

Looking for advice on which plan to pick?

Not sure which financial account is right for you? Call Financial Finesse to speak with a financial coach at no cost to you, at 1-833-224-5233, or visit ffhub.com/thrive.

1, 2, 5. Copay waived if admitted or for observation stay.

3. Under this plan, you're required to select a PCP and will need a referral from your PCP to see a specialist.

4, 6, 8, 9. Prior authorization may be required.

7. Coverage and cost-sharing limitations and/or exceptions may apply. Visit bluecrossma.org/associate to see the Summary of Benefits and Coverage for more information.

DENTAL AND VISION



DENTALBLUE®

Dental Blue gives you access to over 93% of practicing dentists in Massachusetts, as well as more than 520,000 provider locations nationwide.

Dental Blue now provides complete coverage for kids under the age of 13, with no cost and no deductible for covered dental services up to the calendar-year benefit maximum. This excludes orthodontic services.

Coverage

Preventive and diagnostic care: 100% coverage

- Example: regular dental checkups

Basic restorative: 80% coverage

- Examples: fillings, root canals, extractions

Major restorative: 50% coverage

- Examples: caps, crowns

Orthodontics (adults and kids): 100% (\$1,500 lifetime maximum)

- Examples: braces, retainers

Deductible for basic and major restorative: \$50 per member or \$150 per family

Calendar-year benefit maximum: \$1,500 per member

Paycheck contributions¹

👤 \$5.70

👤👤 \$11.57

👤👤👤 \$16.71

Reminder about routine dental cleanings

Instead of coverage for a routine dental cleaning every six months, you get two checkups per year, which include cleanings — and you don't have to wait six months between visits.

BLUE20/20 PLUS

Get great coverage with eye-opening savings, plus new enhanced benefits for kids under 19 at no additional cost.

Coverage

Members enjoy a \$0 copay for exams, plus additional perks, including:

- Savings on a second pair of glasses, non-prescription sunglasses, laser vision correction, eye care supplies, and more
- An additional \$50 frame allowance when you visit a PLUS provider, with no brand restrictions
- More flexibility and choice when selecting vision care, with easy access to thousands of PLUS providers

Paycheck contributions¹

👤 \$3.05

👤👤 \$5.49

👤👤👤 \$8.55

NEW! Coverage enhanced for kids under 19

To make sure kids get the vision care they need, we've added the following coverage for kids under 19 at no additional cost:

- Two fully covered eye exams at \$0 copay per benefit frequency (every 24 months)
- One pair of replacement lenses (subject to a prescription change) per benefit frequency
- Fully covered blue-light prescription lenses treatment
- Fully covered standard polycarbonate lenses
- Discounts on non-prescription blue-light glasses

¹ Paycheck contribution amounts are for full-time associates. For part-time rates, visit bluecrossma.org/associate.

LIFE AND LONG-TERM DISABILITY



LIFE AND ACCIDENT INSURANCE

	Basic coverage	Buy-up coverage Evidence of Insurability required ¹
Who's eligible?	Associates working 15+ hours per week	Full-time associates working 30+ hours per week
Coverage	1x your annual salary ² Maximum benefit: \$750,000	2x your annual salary ² Maximum benefit: \$750,000
Who pays for coverage?	Blue Cross	Blue Cross pays for coverage up to 1x your annual salary. You pay the remaining amount.

LONG-TERM DISABILITY (LTD)

	Basic coverage	Buy-up coverage
Who's eligible?	Associates regularly scheduled to work at least 30 hours per week and have completed 90 days of employment	
Coverage	Replaces 60% of your monthly salary ² Monthly maximum: \$12,500	Replaces 66-2/3% of your monthly salary ² Monthly maximum: \$12,500
Who pays for coverage?	Blue Cross	You pay for additional coverage to replace 66-2/3% of your monthly salary ² (i.e., you pay for the additional 6-2/3% coverage cost).
Maximum benefit period	Begins after you've been absent from work due to disability for 180 days (including the 1-week elimination period and the 25-week short-term disability period) Benefits continue for the duration of your disability or until age 65, whichever is sooner (possibly later if you become disabled after age 63)	

1. The buy-up life insurance option requires completion of Evidence of Insurability (EOI) and approval from the life insurance carrier, USABLE.

The USABLE EOI form can be found on Workday.

2. Salary = Benefits Base Rate, which, in general, is your annual base salary plus annual targeted sales bonus (where applicable).

GLOSSARY

Annualized base salary

For full-time associates, it's your annual base salary. For part-time associates, annualized base salary is calculated by multiplying hourly rate of pay by 1,950 (based on a full-time work week of 37.5 hours per week).

Co-insurance

The percentage of the cost you're responsible for paying, usually after the deductible has been met.

Copay/copayment

The amount you pay for a covered health care service, usually paid at the time you receive the service. For some services, you must satisfy a deductible first.

Deductible

This is the amount you pay before your plan helps cover eligible expenses.

Dependent care flexible spending account (FSA)

You can contribute to this account on a pre-tax basis. Use these funds to pay for eligible dependent care services, such as preschool, summer day camp, before- or after-school programs, and child or adult day care in the plan year.

Health care flexible spending account (FSA)

You can contribute to this account on a pre-tax basis and can use the funds to pay for eligible medical, dental, vision, and prescription medication expenses in the plan year.

Health reimbursement arrangement (HRA)

Blue Cross contributes to this account at the beginning of the plan year. You can use these funds to pay for eligible medical or prescription medical expenses in the plan year. You can't contribute to it, and at the end of the year, any unused money will be forfeited.

Health savings account (HSA)

A tax-free account that can be funded by both you and Blue Cross. Use this account for eligible medical, dental, vision, and prescription medication expenses, now or in the future. Any unused funds roll over year to year and can grow tax free with interest or be invested.

Limited purpose flexible spending account (FSA)

You can contribute to this account on a pre-tax basis and can use the funds to pay for eligible dental and vision expenses in the plan year.

Out-of-pocket maximum

The most you'll pay for covered services. Once you reach this maximum, your plan pays 100% of your remaining costs for the year.

Provider

A doctor, registered nurse, nurse practitioner, physician's assistant, specialist, or any other credentialed professional who provides care.



GET ASSISTANCE AND ANSWERS

ONLINE INFO

Health plan details

bluecrossma.org/associate or [MyBlue](#)

Financial accounts

[MyBlue](#) or healthequity.com

Enrolling in your benefits

[Workday](#) — sign in through Blueweb or bluecrossma.org/associate

QUESTIONS

AskHR

For open enrollment, Workday, or other general questions:
AskHR@bcbsma.com
1-617-246-4747 (Ext.6-HRHR)

Employee Services

For plan and coverage details:
EmployeeServices@bcbsma.com
1-800-238-6616

Financial Finesse

For no-cost financial coaching:
ffhub.com/thrive to live chat
1-833-224-5233

NEXT STEPS:

1. Think about your year ahead (planned surgeries, births, etc.).
2. Go to bluecrossma.org/associate to review the plan options for 2025.
3. Make your elections in Workday.
4. Review and submit your elections. (Don't forget to review your beneficiaries.)
5. Save your confirmation page — this is important!

OPEN ENROLLMENT:

October 28 – November 8, 2024

bluecrossma.org/associate

This brochure was designed to provide you with a summary of the health benefit options currently available to associates of Blue Cross Blue Shield of Massachusetts, Inc. Complete details of each of these benefits are outlined in the official plan documents, including insurance policies, contracts, trust agreements, subscription agreements, subscriber certificates, and benefit descriptions. Copies of these items are available from AskHR. If there's any difference between the information in this guide and the official plan documents, the plan documents will govern. The benefit programs described in this guide don't constitute an employment contract, nor do they provide a guarantee of future employment. Blue Cross Blue Shield of Massachusetts reserves the right to amend, modify, or terminate any of the plans in any manner, in whole or in part, at any time, to the extent permitted by law. Nothing in this guide is intended as tax advice, and you're encouraged to consult a tax advisor if you have any questions regarding the tax consequences of your elections.

OPEN ENROLLMENT



**Make your benefit decisions:
October 28 – November 8, 2024.**

bluecrossma.org/associate



MASSACHUSETTS