## 2025 Open Enrollment Newsletter

Open Enrollment: Monday, Nov. 4 - Monday, Nov. 18

# You must actively enroll if you want these benefits

- Medical: As of Jan. 1, 2025, Blue Cross and Blue Shield of NC (BCBSNC) will take over the administration of the Veradigm medical plans that are currently managed by Cigna. All employees enrolled in a Veradigm medical plan (whether through Cigna or Kaiser) must actively select a new medical plan during Open Enrollment to ensure coverage in 2025. Your current medical election will not roll over.
- HSAs and FSAs: You also must re-enroll each year if you want to participate in:
  - Health Savings Account (HSA) contributions.
  - Flexible Spending Account (FSA) elections (general, limited, and/or dependent care).

## These benefit elections will roll over

Your other benefit elections, such as dental, vision and life insurance, will roll over automatically (at 2025 rates) unless you make changes.



## Take these steps to prepare

- Read this newsletter to find out what's new for 2025.
- **2** Explore **myveradigmbenefits.com** to learn about your Veradigm benefits.
- 3 Watch the 2025 Veradigm Benefits Overview presentation in the Learning Center.
- Decide which benefits meet your and your family's needs.
- (5) Enroll between Nov. 4–18.

# If you are adding dependents to your coverage...

You must provide proof of eligibility to add dependents who are not currently covered under the Veradigm benefit plans. The Veradigm benefits enrollment system will alert you to any documentation needed (such as a marriage certificate or birth certificate, etc.) to verify dependent eligibility. You must return documentation promptly to complete your coverage addition and to receive your Medical ID cards by Jan. 1, 2025.





## Medical

- BlueCross and Blue Shield of North Carolina (BCBSNC) will be the medical plan administrator for our medical plans that are currently administered by Cigna. OptumRx will administer the prescription drug benefits under these plans.
- Because of this significant change, you must actively enroll in a Veradigm medical plan during Open
   Enrollment if you want medical coverage for 2025. This applies to all employees who are currently
   enrolled in a Cigna or Kaiser plan.



# Good news about your BCBS medical rates!

By transitioning to BCBS and negotiating to retain our current plans and features while managing costs, we're pleased to announce that associate medical premiums are staying the same for 2025. This is particularly noteworthy given that health benefit rates nationwide continue to rise.

## BCBS of NC (BCBSNC) medical options—currently Cigna

- BCBSNC plan features will remain the same as under our current Cigna plans, but the names will change to: BCBS HRA, BCBS HSA and BCBS PPO.
- Optum Rx will administer the prescription drug benefits for the BCBS plans.
- If you enroll in a BCBS plan, you will receive a new BCBS medical ID card and an Optum Rx ID card for 2025.
- See the BCBS medical plan chart on page 5 for more details.

#### Kaiser Permanente

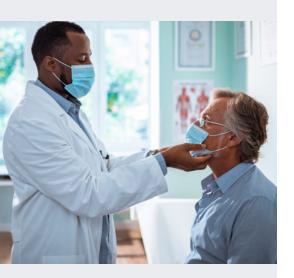
- Associate medical premiums for all three Kaiser plans are staying the same for 2025.
- The Kaiser HRA and Kaiser Co-pay plan features will not change for 2025.
- Kaiser HSA plan features will also stay the same except for some minor changes in plan deductibles and out-of-pocket maximums, as follows, to comply with updated IRS mandates for 2025:
  - If you enroll in family coverage, the deductible for any one member in the family will be \$3,300 (currently \$3,200). The deductibles for associate only and entire family will stay the same.
  - The out-of-pocket maximums will be \$4,600 per person and \$9,200 per family (currently \$4,500/person and \$9,000/family).
- See the Kaiser medical plan chart on page 8 for more details.

#### Dental

- Associate premiums will increase slightly for 2025.
- Dental plans will continue to be administered by Cigna and the plan features for both options will stay the same.

#### Vision

- Associate premiums will have a modest increase for 2025.
- Vision plan features will stay the same.



# Health reimbursement accounts (HRAs)

- If you enroll in the BCBS HRA or Kaiser Permanente HRA plans, an HRA account is set up for you.
- If you are currently enrolled in the Cigna HRA plan, any funds in your account will transfer to the BCBS HRA account if you enroll in this plan for 2025.
- Veradigm contributes to your HRA account each year. See page 9 for details.

## Health savings accounts (HSAs)

You must re-elect your HSA contributions each year to participate. Your current elections will not roll over.

You may participate in an HSA if you enroll in the BCBS HSA plan or the Kaiser Permanente HSA plan.

#### How much you can contribute for 2025

If you enroll in the BCBS HSA or Kaiser HSA, you can contribute up to the IRS maximums for 2025:

- Individual: \$4,300 (currently \$4,150).
- Family: \$8,550 (currently \$8,300).
- If you are age 55 and older, you can contribute an additional \$1,000 as a catch-up contribution.

## To receive Veradigm's contributions

Veradigm will contribute to your Health Savings Account (HSA) only if you enroll in either the BCBS or Kaiser HSA medical plan during Open Enrollment. Follow these steps to ensure you receive the contribution:

- 1 Elect the BCBS HSA or Kaiser HSA medical plan through the Veradigm benefits enrollment system.
- (2) Confirm your HSA participation:
  - If you want to participate, select "I Want Coverage."
    - You'll be prompted to choose your contribution amount for 2025.
    - If you don't want to contribute but still want Veradigm's contributions, enter \$0 as your contribution amount.
  - If you don't want to participate, select "Waive Coverage."
    - Note: If you waive coverage, you will not receive Veradigm's contributions to your HSA.

For 2025 contribution details, see page 9.

## Advantages of an HSA

- Tax-free contributions, earnings, and withdrawals for eligible expenses.
- Your HSA is yours to keep, even if you change jobs or retire.
- Unused funds roll over yearly and are yours to keep.
- Save now or invest for future healthcare costs.



# Important information for current Cigna HSA Plan participants who choose the BCBS HSA Plan for 2025

If you're currently enrolled in the Cigna HSA medical plan and want to choose the BCBS HSA medical plan for 2025, you must actively enroll in the BCBS HSA plan during Open Enrollment to make contributions to your Health Savings Account (HSA) for 2025.

#### Please note:

- Your current HSA under the Cigna plan will transfer to HSA Bank.
- HSA Bank will directly administer your account, so the way you access your HSA will change.

## What stays the same

- You'll keep the same HSA account number.
- Your account balance and history will transfer with your account.
- Any designations (such as beneficiaries, linked bank accounts, authorized signers, and investment choices) will remain unchanged.

## What changes

- You'll receive a new debit card.
- Your new HSA Bank customer service number will be 1-866-357-6246.
- To access your HSA Bank account, you'll need to go directly to myaccounts.hsabank.com and register as a new user by clicking the New User? Create login link to create your new HSA Bank username and password. The single sign-on (SSO) option through Cigna will no longer be available.

#### Action required: Update your email address

If you're currently enrolled in the Cigna HSA plan and plan to switch to the BCBS HSA plan for 2025, please log in to your **MyCigna.com** account and confirm your preferred email address. This ensures your correct email will be on file with BCBS and HSA Bank for a smooth transition.

Find out more about **HSAs**.

## Flexible spending accounts (FSAs)

You must re-elect your FSA contributions each year to participate. Your current elections will not roll over.

IRS maximum contributions limits for 2025 for are:

- General purpose health care FSA and limited purpose health care FSA: \$3,300
- Dependent care FSA: No changes; the maximum remains at \$5,000 per household or \$2,500 if married, filing separately.

Note that any funds remaining in your health care and/or dependent care FSAs at the end of the year cannot be rolled over to the next year. You must use your 2024 account funds by Dec. 31, 2024, and submit claims by March 31, 2025. For 2025 contributions, you must use funds by Dec. 31, 2025, and submit claims by March 31, 2026.

Find out more about FSA accounts.

## **COVID** surcharge

The COVID surcharge will end on Dec. 31, 2024.



## Medical

## **BCBS** medical options

Here's an overview of our BCBS medical options for 2025. The plan features will remain unchanged from 2024.

Plan features	BCBS HRA		BCBS HSA		BCBS PPO	
	In-network	Out-of- network	In-network	Out-of- network	In-network	Out-of- network
Deductible	\$1,500 person	\$4,500 person	\$2,500 person	\$5,000 person	\$3,000 person	\$6,000 person
	\$3,000 family	\$9,000 family	\$5,000* family	\$10,000* family	\$6,000 family	\$12,000 family
Coinsurance	20% after deductible	50% after deductible	25% after deductible	50% after deductible	30% after deductible	50% after deductible
Out-of-pocket maximum	\$5,000 person	\$10,000 person	\$6,000 person	\$12,000 person	\$7,300 person	\$14,600 person
	\$10,000 family	\$20,000 family	\$12,000 family	\$24,000 family	\$14,600 family	\$29,200 family
Preventive care visit	Fully covered	50% after deductible	Fully covered	50% after deductible	Fully covered	50% after deductible
Primary care physician office visit	20% after deductible	50% after deductible	25% after deductible	50% after deductible	\$20 copay	50% after deductible
Specialist office visit	20% after deductible	50% after deductible	25% after deductible	50% after deductible	\$50 copay	50% after deductible
Urgent care	20% after deductible	20% after deductible	25% after deductible	25% after deductible	\$75 copay	\$75 copay
Emergency room	20% after deductible	20% after deductible	25% after deductible	25% after deductible	\$200	\$200

<sup>\*</sup> Under the HSA Plan, if more than one individual is enrolled, the family deductible must be met. Once the family deductible has been met, the plan will pay each enrolled family member's covered expenses based on the co-insurance level. One individual may satisfy the per person out-of-pocket maximum.

## Optum Rx prescription drug benefits

If you enroll in one of the BCBS medical plans, the prescription drug benefits will be administered by Optum Rx.

	BCBS HRA		BCBS HSA		BCBS PPO	
Plan features	In-network	Out-of- network	In-network	Out-of- network	In-network	Out-of- network
30-day supply	through retail	or mail order				
Preventive*	No copay	50% after deductible	0%, no deductible	50% after deductible	No copay	50%
Generic	\$15 copay	50% after deductible	25% after deductible	50% after deductible	\$15 copay	50%
Preferred brand	30% up to \$125 max	50% after deductible	30% after deductible (up to \$125 max)	50% after deductible	\$30 copay	50%
Non- preferred brand	40% up to \$225 max	50% after deductible	40% after deductible (up to \$225 max)	50% after deductible	\$60 copay	50%
Specialty (limited to a 30-day supply)	40% up to \$225 max	50% after deductible	40% after deductible (up to \$225 max)	50% after deductible	\$80 copay	50%
90-day supply through retail or mail order (Note: Mail order is not covered out-of-network.)**					.)**	
Preventive	No copay	50% after deductible	0%, no deductible	50% after deductible	No copay	50%
Generic	\$37 copay	50% after deductible	25% after deductible	50% after deductible	\$37 copay	50%
Preferred brand	30% up to \$312 max	50% after deductible	30% after deductible (up to \$312 max)	50% after deductible	\$75 copay	50%
Non- preferred brand	40% up to \$562 max	50% after deductible	40% after deductible (up to \$562 max)	50% after deductible	\$150 copay	50%



## **BCBSNC** provider network

Until the BCBS medical plans go into effect on Jan. 1, 2025, you can visit **www.bcbsnc.com** to view the BCBS network providers and to find general information. Once you are on the website:

- Select "Members" in the top bar.
- Click on "Members Home".
- Select "Find Care".
- Select "Look up a Doctor or a Drug".
- Choose "Browse as a guest of an employer Plan".
- Our medical plan network will be "Blue Options" put in city, state of zip.
- Begin your search by following the prompts.

## Kaiser Permanente medical options (for California residents)

Here's an overview of our Kaiser medical options for 2025.

Plan features	Kaiser HRA	Kaiser HSA	Kaiser HMO
Deductible	\$1,500 person \$3,000 family	\$2,500/person for employee only coverage	\$3,000 person \$6,000 family
		\$3,300/person for employee plus spouse/ DP or employee plus child(ren) coverage* \$5,000* family	
Coinsurance	20% after deductible	0% after deductible	30% after deductible
Out-of-pocket maximum	\$3,000 person \$6,000 family	\$4,600 person \$9,200 family	\$6,000 person \$12,000 family
Primary care physician office visit	\$20 per visit after deductible	\$30 per visit after deductible	\$40 per visit
Specialist office visit	\$20 per visit after deductible	\$50 per visit after deductible	\$50 per visit
Urgent care	\$20 per visit after deductible	\$30 per visit after deductible	\$40 per visit
Emergency room	20% after deductible	\$200 per visit after deductible	30% after deductible

<sup>\*</sup>Under the Kaiser HSA Plan, if more than one individual is enrolled, the per person deductible of \$3,300 applies. Once the family deductible has been met, the plan will pay each enrolled family member's covered expenses based on the co-insurance level. However, one individual may satisfy the per person out-of-pocket maximum.

## Kaiser Permanente Prescription drug benefits (for California residents)

Plan features	Kaiser HRA	Kaiser HSA	Kaiser HMO
Retail generic (up to a 30-day supply)			\$10 copay
Retail brand formulary (up to a 30-day supply)	\$30 copay	\$30 copay after deductible	\$30 copay
Mail generic (up to a 100-day supply)	\$20 copay	\$20 copay after deductible	\$20 copay
Mail brand formulary (up to a 100-day supply)	\$60 copay	\$60 copay after deductible	\$60 copay
<b>Specialty</b> (up to a 30-day supply)	20% coinsurance (not to exceed \$150)	20% coinsurance after deductible (not to exceed \$250)	20% coinsurance (not to exceed \$250)

# How Veradigm makes contributions to your BCBS or Kaiser HRA or HSA account during the year

If you enroll in the BCBS HRA or HSA plan or the Kaiser Permanente HRA or HSA plan, Veradigm will contribute to your HRA or HSA account each year.

#### **Veradigm HRA contributions**

If you enroll in the BCBS HRA or Kaiser HRA medical plan, you will receive 100% of Veradigm annual contributions on Jan. 1, 2025.

Coverage level	Veradigm annual contributions (on Jan. 1, 2025)
Associate only	\$500
Associate + spouse/DP	\$750
Associate + child(ren)	\$750
Associate + family	\$1000

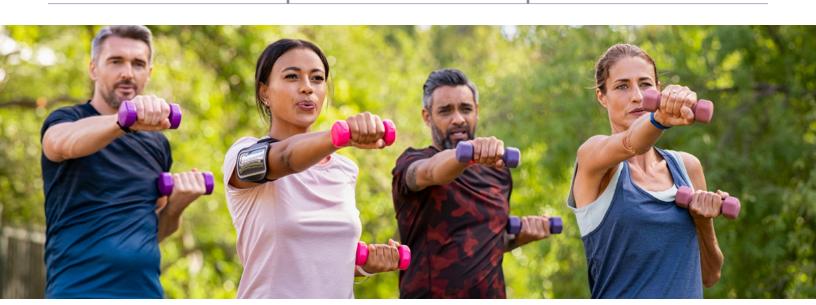
#### **Veradigm HSA contributions**

If you enroll in the BCBS HSA or Kaiser HSA medical plans, Veradigm will contribute to your HSA each quarter.

Coverage level	Veradigm Quarterly Health Account Contributions			Maximum Veradigm Contributions	
	Q1	Q2	Q3	Q4	Annual
Associate only	\$160	\$80	\$80	\$80	\$400
Associate + spouse/DP	\$240	\$120	\$120	\$120	\$600
Associate + child(ren)	\$240	\$120	\$120	\$120	\$600
Associate + family	\$320	\$160	\$160	\$160	\$800

## 2025 medical per paycheck rates for BCBS and Kaiser options

Coverage level	BCBS medical rates	Kaiser medical rates	
	Associate per-pay-period contribution	Associate per-pay period contribution	
	BCBS HRA	Kaiser HRA	
Associate only	\$95.00	\$101.50	
Associate + spouse/DP	\$239.50	\$256.00	
Associate + child(ren)	\$136.00	\$145.50	
Associate + family	\$239.50	\$256.00	
	BCBS HSA	Kaiser HRA	
Associate only	\$85.00	\$71.50	
Associate + spouse/DP	\$202.00	\$170.00	
Associate + child(ren)	\$119.00	\$100.00	
Associate + family	\$214.50	\$180.50	
	BCBS PPO	Kaiser HMO	
Associate only	\$48.00	\$41.00	
Associate + spouse/DP	\$152.50	\$130.50	
Associate + child(ren)	\$83.00	\$71.00	
Associate + family	\$159.00	\$136.00	



# The tobacco surcharge—and how to avoid it

If you enroll in a Veradigm medical plan (BCBS or Kaiser Permanente), you must certify whether you use tobacco. If you certify that you are a tobacco user, you will pay a **\$25 per paycheck** surcharge (\$50 per month). This is in addition to your regular medical premium.

A "tobacco user" refers to the use of tobacco products within the **past six months**. Tobacco products include:

- Cigarettes, cigars, pipes, snuff, chewing tobacco.
- All forms of smokeless tobacco.
- Clove cigarettes.
- Any other smoking devices that use tobacco, such as hookahs, or simulate the use of tobacco, such as electronic cigarettes.



## How to avoid or stop the surcharge

If you successfully complete one of our medical providers' free Tobacco Cessation programs or are tobacco free for at least six months, you can apply to no longer pay the surcharge and you may be eligible for credit of any surcharge that you have paid. You must log into <a href="https://www.VeradigmBenefitsUS.com">www.VeradigmBenefitsUS.com</a> and change your Tobacco Use status to a non-user. Please note, it may take up to two pay periods before the surcharge is removed from your paycheck.

## Commit to quit!

Veradigm understands the health benefits of a smoking-free lifestyle. To help all associates, both BCBSNC and Kaiser offer no-cost programs to help with quitting smoking.

#### **BCBSNC**

- The BCBSNC tobacco cessation program is available to all associates and family members enrolled in the BCBSNC medical plans through PIVOT.
  - Pivot App provides personalized activities and challenges built for all schedules.
  - Nicotine Replacement Therapy to help reduce cravings.
  - The Pivot Breath Sensor to track progress.
  - Active user community for collective wisdom and text with experts for personalized support.
- To learn about the BCBSNC tobacco cessation programs, call the number on the back of your ID Card or visit www.pivot.co/BlueCrossNC5.

#### Kaiser

- Kaiser offers the "quit smoking" program which offers a variety of options to help
  - Visit www.kp.org/quitsmoking for details and more information.
  - Talk with a health coach or a tobacco cessation quitline.
  - They will help create a customized quit plan, identify triggers and develop strategies to manage cravings.

# Enrolling for 2025

Don't miss your chance to choose benefits that are right for you and your family for the upcoming year.

#### TAKE ACTION BETWEEN NOV. 4-18.

Remember, this year YOU MUST ACTIVELY ENROLL IN A MEDICAL PLAN to have medical coverage for 2025. Your current medical plan election will not roll over.

The benefits you elect during Open Enrollment will start Jan. 1, 2025, and will remain in effect until December 31, unless you have a qualified life event (like a marriage, birth, or divorce) or become ineligible for benefits. Your next opportunity to make changes to your benefits will be during our benefits Open Enrollment, which is held each fall.



### How to enroll

To enroll, log into the Veradigm benefits enrollment system, then follow the steps below.

## If you are already registered

- 1) Enter your user name and password. If you can't remember one or both, click on *Trouble Logging In?* or call **1-844-705-4101**.
- 2 Once you are in the benefits enrollment system, click on the Start Here button and follow the instructions to enroll in your benefits or waive coverage.

## If you are not registered

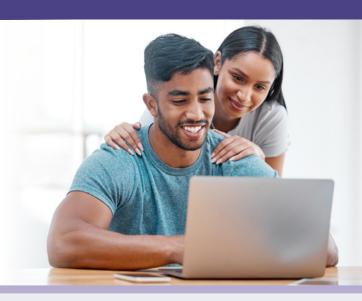
- 1 Enter your Social Security number or Employee ID, Company Key and Date of Birth. Company Key is: MDRX in all uppercase letters.
- 2 Create your user name and password. (Make a note of your user name and password for future use.) Select your security phrase and answer. Click Continue.
- 3 Log in with the new user name and password you just created in step 2. Read the Electronic Signature notification and click Accept to move forward.
- 4 Once you are in the benefits enrollment system, click on the Start Here button and follow the instructions to enroll in your benefits or waive coverage.

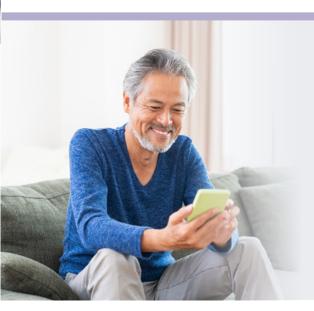
## Confirmation reminder!

Until you have received a confirmation number from the Veradigm benefits enrollment system, your benefit enrollment or change request has not been processed. Please make sure to print your confirmation number for future reference.

## Are you enrolling as a new hire?

As a new hire, if you're enrolling in benefits for the first time during Open Enrollment (or later), you will need to make elections for both the remainder of 2024 and for 2025. When you access the benefits enrollment system to select your 2024 benefits, the system will also prompt you to enroll in your 2025 benefits. Be sure to complete both steps to ensure your coverage is set for the rest of this year and for 2025.





## Need assistance?

Health Advocate can help you find a medical plan that fits your needs, find providers and provide assistance with health care matters throughout the year.

Go to www.healthadvocate.com/members or call 1-866-799-2728. Download the Health Advocate<sup>SM</sup> app through the Apple App Store or Google Play. For new users: Download the app, then enter *Veradigm > New? Register Now*.

## Are your beneficiaries up to date?

Benefits Open Enrollment is a good time to review your beneficiaries for specific benefit plans, such as the **life** and AD&D insurance plans and the **Retirement Savings** Plan. You can update your beneficiaries any time by logging in to www.VeradigmBenefitsUS.com (for your life insurance and AD&D) and www.workplace.schwab.com (for your retirement plan).

