

# US Benefits Changes 2025

As announced in the Corporate Update on Thursday, 7/11, after years of not passing along Health Plan cost increases, WWT will be modestly increasing the cost of our current plan for 2025. This document provides a summary of the changes, details of the plan options and additional information.

Overall, there will be 3 distinct changes to our health plan:

## Gold PPO Plan

Employees will be given the choice to keep the **same Monthly Premiums** they have today, but there will be a shift in the amount that WWT covers, from 100% to **90%**. This will be known as the **Gold Plan**.

## Platinum PPO Plan

Employees will be given the choice to keep the exact **same Health Plan** they have today, providing **100%** coverage after deductible, for an increased premium. This will be known as the **Platinum Plan**.

## Spousal Surcharge

There will be a \$100/month spousal surcharge applied to individuals earning \$100K or more annually. This is only applied if your spouse/domestic partner works and is offered coverage through their employer but is enrolled in WWT's plan.

- Employees earning less than 100K per year will not be subject to the spousal surcharge.
- Employee annual earnings will be based on annual W2 earnings for the prior year.  
New hire annual earnings will be based on their current annualized earnings.
- A question will be presented in the enrollment system to attest to your spouse/domestic partner's health offering through their employer.

We take great pride in offering extremely competitive and affordable coverage for our employees and their family members, protecting them from otherwise catastrophic healthcare costs, and intend to continue this focus even with cost changes.

## So, what are the plan options?

Both plans continue to provide the most comprehensive and inexpensive benefits packages in the marketplace.

Details of these plans are illustrated below with changes highlighted in red:

	Current PPO Plan – 2024	Gold PPO Plan	Platinum PPO Plan
Deductible (single / family)	\$250 / \$500	\$250 / \$500	\$250 / \$500
Out-of-pocket max (single / family)	\$2,000 / \$4,000	\$2,000 / \$4,000	\$2,000 / \$4,000
Coinsurance	100%	<b>90%</b>	100%
Office Visit (primary / specialty)	\$15 / \$25	\$15 / \$25	\$15 / \$25
Inpatient Hospital Copay	\$250	\$250	\$250
ER Copay	\$125	\$125	\$125
RX Deductible per covered person	\$50	\$50	\$50
Generic RX Copay	\$5	\$5	\$5
Preferred Brand RX Copay	\$20	\$20	\$20
Non-Preferred Brand RX Copay	\$35	\$35	\$35
EE Only Premium	\$25	\$25	<b>\$40</b>
EE + Spouse Premium*	\$90	\$90	<b>\$140</b>
EE + Child(ren) Premium	\$70	\$70	<b>\$110</b>
Family Premium*	\$145	\$145	<b>\$240</b>

\* \$100/month spousal surcharge applied to individuals earning \$100K or more annually if spouse/domestic partner works and is offered coverage through their employer but is enrolled in WWT's plan.

For additional information, please review the presentation with examples, Health Plan Summaries and FAQs. Watch for more communication to come out later this year as we develop the Webinar events to review the changes.

## Frequently Asked Questions

### When are these Health Plan changes effective?

The changes will be effective the first paycheck in 2025 for coverage beginning 1/1/2025. Elections will be available during Open Enrollment.

### When is Open Enrollment?

Open Enrollment generally occurs each Fall in early November. This year it will be from November 4th – 15th. Additional communication will be sent later with enrollment details and informational webinars to attend.

### Will I need to make an active Health Plan election during Open Enrollment?

Short answer- Maybe. Our 2025 enrollment will default all employee's current election to the **Platinum Plan with increased premiums**. Based on feedback from employees, most prefer not to have changes made to their coverage and are willing to pay the increase.

### IMPORTANT NOTES:

- For those who would like their premiums to remain the same as today to actively select the Gold Plan, you must make this selection in ADP Vantage during Open Enrollment. This is also when elections can be changed to add or remove dependents, change voluntary benefits such as ID Theft, or FSA contributions can be selected.
- For those whose annual earnings are \$100k or more, and have a spouse/domestic partner enrolled, you will be required to go through the enrollment system and attest to the Spousal Surcharge question. If you take no action during Open Enrollment to answer this attestation, you will be defaulted into the Spousal Surcharge of \$100/month assuming your spouse/domestic partner is offered other employer coverage.

### Why are these changes being made?

The brutal truth is that the cost of health care continues to rise at volatile rates and the time has come to evaluate a change. While our population has only grown 50% over the last 5 years, our Health Plan costs have more than doubled. WWT is expected to invest over \$165 million in 2024 in the Health Plan and we know it is a valuable part of your total rewards package. These modest changes are necessary to share in the increased costs.

## Do these changes impact both US Mainland (Allegiance) & Hawaii (UHA) Health Plans?

The Spousal Surcharge applies to ALL US employees, including Hawaii. Hawaii will maintain their current single Health Plan option with current rates since the coinsurance is already 90% today.

## Which plan is right for you?

Both plans offer the same medical services, copays, deductibles and free preventive care. The only difference between the two plans are the premiums you pay from each paycheck for coverage and the amount you pay after the deductible is met (coinsurance).

Consider your typical health care experience when deciding which plan to choose:

- The **Platinum Plan** will have higher premiums from each paycheck but is the same coverage you have in place today. This plan will cover 100% of in-network medical expenses after the deductible is met. This plan may be right for you if you tend to have high health care costs (surgery, inpatient/outpatient treatment, hospitalization, etc.) or if you prefer to have no change in your coverage from today.
- The **Gold Plan** will have current premium amounts from each paycheck but will include a 10% coinsurance. This plan will cover 90% of in-network medical expenses after the deductible is met, up to the out-of-pocket max. This plan may be right for you if you tend to have low health care costs (surgery, inpatient/outpatient treatment, hospitalization, etc.) or if you prefer to have no change in your premiums from today.

## What is coinsurance?

Coinsurance is the amount you may have to pay for covered health care after you meet your deductible. This does not include copays for PCP visits, Specialist visits, ER or Urgent Care visits. For services such as surgery, inpatient/outpatient treatment, hospitalizations, lab or x-ray, etc, your deductible must be satisfied before coinsurance will be applied. Please see the 2025 Health Plan Cost Examples PDF for additional information.

## What is a copay?

A copay (or copayment) is a fixed amount applied to certain services such as office visits for primary care and specialists or prescriptions (RX) to be paid at time of visit. They do not apply towards the deductible but do apply towards the out of pocket maximum.

## What is a deductible?

A deductible is a dollar amount of eligible expenses that must be incurred during the benefit period (calendar year), unless specifically waived, applied to each covered person before the Plan will pay any amount.

## What is out of pocket maximum?

The out of pocket maximum is the maximum amount any individual or family will pay for covered services in a benefit period (calendar year) which includes the network deductible, medical & RX copayments.

## Are there any changes to prescription coverage?

No, there are no changes to prescription coverage, deductibles or copays.

## Are there any changes to Dental & Vision?

No, there are no changes to dental or vision copays, coinsurance or deductible.

## Are there any changes to the Family Health Center?

No, there are no changes to the Family Health Center. Services and care at these facilities remain FREE to employees and their enrolled family members, as well as prescriptions dispensed onsite.

## Will costs increase again in the future?

The Health Plan expenses are reviewed regularly and, like other WWT budgets and expenses, may need to be adjusted as necessary. If we need to make future changes, these are generally communicated each year during Open Enrollment. This year we decided to communicate earlier since we have not made a change in 20+ years.

# Spousal Surcharge

## What is the Spousal Surcharge?

The Spousal Surcharge is an additional premium amount for those spouses/domestic partners who are offered other employer sponsored health coverage but choose to enroll in the WWT plan instead. This is only applied to those individuals earning \$100k or more annually.

The surcharge is not added to those whose spouse/domestic partner are not offered other employer sponsored health coverage or spouse/domestic partners who also work at WWT. Employees will be asked to attest to their spouse/domestic partner's employer health care offering during open enrollment.

## How much is the surcharge?

The surcharge is \$100/month (\$50/semi-monthly) and is in addition to your Health Plan premiums.

## Why is WWT adding a Spousal Surcharge?

The surcharge encourages participants eligible for other employer sponsored health coverage to consider taking advantage of that coverage which keeps our plan more affordable. Spouses account for only 21% of the enrolled population yet they experience 33% of the total spend on the WWT Health Plan. The surcharge allows us to apply cost share for this increased cost of spouses/domestic partners on the plan without extending a cost increase to those without spouse/domestic partners.

We encourage employees to have their spouse/domestic partners evaluate the coverage offered by their employer to determine which plan is financially more suitable.

## Who will be required to pay the Spousal Surcharge?

It applies to employees earning \$100k or more annually who enroll a spouse/domestic partner unless one of the following conditions apply:

- Your spouse/domestic partner is not currently employed and does not have access to other employer sponsored health coverage.
- Your spouse is self-employed or employed part-time without access/offer to employer sponsored health coverage.
- Your spouse is covered by Medicare, Medicaid, Tricare/VA or other government sponsored health coverage.
- Your spouse also works for WWT.

## **How are annual earnings calculated for the surcharge eligibility?**

Employee earnings are based on annual W2 earnings for the prior year, as of Open Enrollment, for employees who worked a full 12 months in the prior year. Example: November 2024 enrollment will reflect annual earnings as of 2023. For employees who worked a partial year in the year prior to Open Enrollment, earnings are annualized. New hire annual earnings will be based on their current annualized earnings.

## **How will WWT know if my spouse/domestic partner has access to other employer sponsored health coverage?**

During open enrollment, when an employee enrolls/has enrolled a spouse/domestic partner, they will be required to attest to a survey question about their spouse/domestic partner's offer of other coverage. If the spouse has access to other employer sponsored health coverage and the employee's annual earnings are \$100k or more, the enrollment system will add the \$100/month surcharge.

## **What if I take no action during open enrollment but my annual earnings are over \$100k and I have a spouse/domestic partner enrolled?**

If you take no action to respond to the survey question during open enrollment, it will be assumed that your spouse is offered access to other employer sponsored health coverage and the surcharge will be added automatically.

## **Is the surcharge pre or post tax?**

Due to regulatory requirements, the surcharge will be pre-tax for spouses but will be post-tax for domestic partners.

## **What if my spouse/domestic partner's employment or health care offering changes mid year?**

If your spouse/domestic partner's coverage changes mid year, ADP Vantage will have a process to report the change and stop/start the surcharge. This may occur if a spouse/domestic partner loses eligibility to other coverage, gains access to other coverage or changes employment.

## **If my spouse/domestic partner is offered access to Cobra after employment ends at their employer, is that considered access to other employer sponsored health coverage?**

No, Cobra is not considered employer sponsored health coverage since the participant pays 100%+ of the cost.

## **If my spouse was offered coverage through their employer but their open enrollment period is different than WWT and they opted out at the time, does the Spousal Surcharge apply?**

Yes, the surcharge applies if a spouse/domestic partner is offered other employer sponsored coverage and chooses to enroll in the WWT plan. We encourage spouse/domestic partners to inquire with their employer to determine if the increased cost of health coverage on the WWT plan through the surcharge will allow for a mid-year change. This may allow them to consider enrolling in their employer's plan.