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# US Benefit Updates 2025



## Gold Plan Cost Example

### What's Changing?

In-network coverage is changing from 100% to 90%. Employee pays 10% of charges up to the out-of-pocket maximum for medical expenses (surgery, inpatient/outpatient, hospitalization, etc.) after the deductible is met.

**Copays, Deductibles, and Premiums Stay the Same!** 

### **EXAMPLE of how Coinsurance will work:**

Jane has surgery:

- Total cost of inpatient surgery \$40,000 •
- Inpatient copay= **\$250**
- Deductible= **\$250**
- Jane's coinsurance= **\$1,500** (out of pocket max of \$2,000 reached)
- WWT Plan pays the rest!

Out of Pocket Max of \$2,000 includes copays, deductible & coinsurance.

| Current 2024 Plan     |             |    | Gold PPO Plan            |          |
|-----------------------|-------------|----|--------------------------|----------|
| Monthly Premiums:     |             |    | Monthly<br>Premiu        |          |
| Employee Only         | \$25/month  |    | Employee Only            | \$25/moi |
| Employee + Spouse     | \$90/month  |    | Employee + Spouse        | \$90/mor |
| Employee + Child(ren) | \$70/month  |    | Employee                 | \$70/mor |
| Family                | \$145/month |    | Employee +<br>Child(ren) | φτυ/ποι  |
|                       |             |    | Family                   | \$145/mo |
| Plan Design:          |             |    |                          |          |
| Deductible            | In-Network  |    | Plan Design:             |          |
|                       |             | 50 | Deductible               | In-Netw  |
| Individual            | \$2         | 50 | Individual               |          |
| Family                | \$5         | 00 | Family                   |          |
| Сорау                 |             |    | Сорау                    |          |
| PCP/Specialist        | \$15/\$2    | 25 | PCP/Specialist           |          |
| ER                    | \$12        | 25 | ER                       |          |
| Out of Pocket Maximum |             |    | Out of Pocket<br>Maximum |          |
| Individual            | \$2,0       | 00 | Individual               |          |
| Family                | \$4,0       | 00 | Family                   |          |
| Coinsurance 100%      |             | )% | Coinsurance              |          |
|                       |             |    |                          |          |
|                       |             |    |                          |          |



## Platinum Plan Cost Example

## What's Changing?

Only the monthly premiums. Your In-Network Coinsurance remains at 100% (as it is with the current plan), however, your monthly premiums increase.

This plan will cover **100%** of in-network medical expenses (surgery, inpatient/outpatient, hospitalization, etc.) after the deductible is met.

### **Example:**

Jane has surgery:

- Total cost of inpatient surgery \$40,000
- Inpatient copay= **\$250**
- Deductible= **\$250**
- Jane's coinsurance= **\$0**
- WWT Plan pays 100% beyond the copay and deductible!  ${\color{black}\bullet}$

Out of Pocket Max \$2,000 includes copays, deductible & coinsurance.

#### Current 2024 Plan **Monthly Premiums:** \$25/month **Employee Only Employee + Spouse** \$90/month **Employee + Child(ren)** \$70/month Family \$145/month

#### **Plan Design:**

| Deductible               | In-Network |
|--------------------------|------------|
| Individual               | \$250      |
| Family                   | \$500      |
| Сорау                    |            |
| PCP/Specialist           | \$15/\$25  |
| ER                       | \$125      |
| Out of Pocket<br>Maximum |            |
| Individual               | \$2,000    |
| Family                   | \$4,000    |
| Coinsurance              | 100%       |

Monthly Premium Increases:

### • EE Only= + \$15/month

- +Spouse= + \$50/month
- •+Child(ren)= + \$40/month
- Family= + \$95/month

### **Platinum PPO Plan**

|                          | Mo<br>Pre |
|--------------------------|-----------|
| Employee Only            | \$40      |
| Employee + Spouse        | \$14      |
| Employee +<br>Child(ren) | \$11      |
| Family                   | \$24      |

| Plan Design:             |      |
|--------------------------|------|
| Deductible               | In-I |
| Individual               |      |
| Family                   |      |
| Сорау                    |      |
| PCP/Specialist           |      |
| ER                       |      |
| Out of Pocket<br>Maximum |      |
| Individual               |      |
| Family                   |      |
| Coinsurance              |      |



# Spousal Surcharge

If you enroll a spouse/domestic partner who is offered other employer health coverage but choose to enroll in the WWT plan, a \$100/month surcharge will be added on top of Health Plan premiums. NOTE: Only applies to employees whose annual earnings are \$100,000 or higher.

## **Gold PPO Plan + Spousal Surcharge**

**Employee Only** = \$25/month

Employee + Spouse: \$90 + \$100 = \$190/month

Employee + Child(ren) = \$70/month

**Family:** \$145 + \$100 = **\$245/month** 

Spouses account for **only 21% of the enrolled population yet they experience 33% of the total spend** on the WWT Health Plan. We encourage employees to have their spouses/domestic partners evaluate the coverage offered by their employer to determine which plan is financially more suitable.

## Platinum PPO Plan + Spousal Surcharge

**Employee Only** = \$40/month

Employee + Spouse: \$140 + \$100 = \$240/month

Employee + Child(ren) = \$110/month

Family: \$240 + \$100 = \$340/month



## How do these plans compare?

When evaluating other employer plans, WWT Plan options are still the most competitive and rich plans available compared to the Technology Industry Benchmark.

Premiums, deductibles, copays, and out of pocket maximums are all lower!

### Platinum PPO Plan **Monthly P Employee Only** \$40/month Employee + Spouse \$140/mont Employee + Child(ren) \$110/montl Family \$240/mont Plan Design: Deductible In-Network Individual Family Copay PCP/Specialist ER **Out of Pocket** Maximum Individual Family

Coinsurance

|           | Gold PPO Plan            |                   | Benchmark<br>(Tech Industry) |
|-----------|--------------------------|-------------------|------------------------------|
| Premiums: |                          | Monthly Premiums: | Monthly Premiums:            |
| h         | Employee Only            | \$25/month        | \$151/month                  |
| th        | Employee + Spouse        | \$90/month        | \$417/month                  |
| th        | Employee + Child(ren)    | \$70/month        | \$343/month                  |
| ith       | Family                   | \$145/month       | \$591/month                  |
|           |                          |                   |                              |
|           | Plan Design:             |                   |                              |
| 'k        | Deductible               | In-Network        | In-Network                   |
| \$250     | Individual               | \$250             | \$500                        |
| \$500     | Family                   | \$500             | \$1,400                      |
|           | Сорау                    |                   |                              |
| \$15/\$25 | PCP/Specialist           | \$15/\$25         | \$20/\$35                    |
| \$125     | ER                       | \$125             | \$150                        |
|           | Out of Pocket<br>Maximum |                   |                              |
| \$2,000   | Individual               | \$2,000           | \$2,750                      |
| \$4,000   | Family                   | \$4,000           | \$5,900                      |
| 100%      | Coinsurance              | 90%               | 90%                          |
|           |                          |                   |                              |



## Spousal Surcharge Comparison

- For those eligible for the Spousal Surcharge, the \$100/month additional premium is aligned with industry benchmark on other employer plans.
- Considering the additional premium that may be added under the surcharge, our premiums are still well below industry benchmark in total.

## Gold PPO Plan

| Monthly Premiums: |             | Plus \$100<br>Surcharge: | Benchmark:  |
|-------------------|-------------|--------------------------|-------------|
| Employee + Spouse | \$90/month  | \$190/month              | \$417/month |
| Family            | \$145/month | \$245/month              | \$591/month |

| Platinum PPO Plan |             |                          |             |  |
|-------------------|-------------|--------------------------|-------------|--|
| Monthly Premiums: |             | Plus \$100<br>Surcharge: | Benchmark:  |  |
| Employee + Spouse | \$140/month | \$240/month              | \$417/month |  |
| Family            | \$240/month | \$340/month              | \$591/month |  |





