

# HOUSTON AREA – MEDICAL PLAN OPTION MEMORIAL HERMANN NETWORK



The Memorial Hermann plans mirror our traditional plan offerings, with one major difference: For coverage to be considered "in-network", you must obtain care from MH doctors and facilities. When you go out-of-network, you have two options: 1) you can use any other participating Aetna provider, or 2) you can use any provider. These differences are noted in the example at right.

**The payroll contributions for the Memorial Hermann options are also lower than the other plans.**

Memorial Hermann (MH) Network Example			
Benefit Descriptions	MH Basic PPO Plan		
	In-Network (Memorial Hermann System Only)	Any Aetna Participating Provider	Out-of-Network
<b>Annual Deductible</b> Individual / Family	\$3,500 / \$10,500	\$10,500 / \$31,500	
<b>Out-of-Pocket Max.</b> Individual / Family	\$8,150 / \$16,300	\$16,300 / \$48,900	
<b>Coinsurance</b>	30%	50%	

**Above is an example of how in-network and out-of-network benefits work with the Memorial Hermann option.**

- In-network benefits provide the highest level of coverage. All in-network benefits must be obtained within the MH network.
- By utilizing the broader Aetna network, you can still receive discounts on allowable charges, but will be covered at the out-of-network benefit levels.
- Out-of-network coverage allows you to visit any provider, but at reduced benefit levels. You may also be subject to balance-billing.
- Emergency care can be received anywhere and is considered in-network.
- Go to [www.memorialhermann.com](http://www.memorialhermann.com) to learn more!

**Memorial Hermann is healthcare focused on you!**

Imagine your doctors all working together, all on the same page. Not having to repeat a test you took last week. Or how about a nurse calling to check on your health when you're not even sick?

**With The Memorial Hermann plans, you're at the center.** You get a special network of doctors, specialists and nurses - putting their heads together to work for you. So your care makes sense to you.





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## Weekly Memorial Hermann Contributions\*

Plan Options:	Employee Only		Employee + Spouse			Employee + Children		Family		
	Without Wellness Discount	With Wellness Discount	Without Wellness Discount	With 1 Wellness Discount	With 2 Wellness Discounts	Without Wellness Discount	With Wellness Discount	Without Wellness Discount	With 1 Wellness Discount	With 2 Wellness Discounts
MH Enhanced PPO	\$42.79	\$34.13	\$100.20	\$91.55	\$82.90	\$86.36	\$77.70	\$158.56	\$149.91	\$141.25
MH Basic PPO Plan	\$26.87	\$18.22	\$67.64	\$58.98	\$50.33	\$55.70	\$47.05	\$103.12	\$94.46	\$85.81
MH Value Care PPO Plan	\$20.98	\$12.33	\$55.10	\$46.44	\$37.79	\$44.81	\$36.16	\$77.50	\$68.84	\$60.19
MH HDHP w/HSA	\$19.89	\$11.23	\$49.06	\$40.40	\$31.75	\$41.98	\$33.33	\$73.46	\$64.81	\$56.15

## Bi-Weekly Memorial Hermann Contributions\*

MH Enhanced PPO	\$85.57	\$68.27	\$200.41	\$183.10	\$165.79	\$172.71	\$155.41	\$317.12	\$299.82	\$282.51
MH Basic PPO Plan	\$53.75	\$36.44	\$135.28	\$117.97	\$100.66	\$111.41	\$94.10	\$206.23	\$188.93	\$171.62
MH Value Care PPO Plan	\$41.96	\$24.65	\$110.20	\$92.89	\$75.58	\$89.62	\$72.31	\$154.99	\$137.69	\$120.38
MH HDHP w/HSA	\$39.77	\$22.47	\$98.11	\$80.80	\$63.50	\$83.97	\$66.66	\$146.92	\$129.61	\$112.31

\*If you completed the 2023 wellness program  you can earn discounts on your contributions, and pay less out of each paycheck in 2024. If you previously claimed your 2023 wellness reward in cash/gift cards, then you will pay the non-discounted rate in 2024.

\*1 Discount = Employee OR Spouse completes wellness activities. 2 Discounts = Employee AND Spouse complete wellness activities.

• If your spouse has access to group medical insurance through their employer and you choose to cover them under the Inframark plan, you will pay a Spousal Surcharge of \$34.62 per pay weekly or \$69.23 bi-weekly.

• If you or a covered spouse/domestic partner use tobacco regularly, you will pay an additional \$28.85 per pay weekly or \$57.69 bi-weekly for Inframark medical coverage. You can have this surcharge waived by participating in the Health Advocate Tobacco Cessation Program. If it is unreasonably difficult or medically inadvisable for you to attempt to achieve these standards because of a health condition, contact Health Advocate at 855-424-6400. These surcharges are subject to change throughout the year based on any tobacco usage or spousal coverage changes you report.

• If you cover a domestic partner and their child(ren), Inframark is required to calculate the imputed income (also called fair market value) of their health benefits. This means that the imputed income will be added to your W2 and subject to income tax withholding and employment taxes.



### Your primary doctor leads the team

Your primary doctor can:

- Make sense of various visits and test.
- Help you find programs tailored to you.
- Guide you on important health decisions
- See you for yearly exams and screenings, not just when you are sick.



### You get an entire healthcare team

Your team can:

- Keep tabs on your prescription and lab results.
- Spot issues, even before you make an appointment.
- Build care plans personalized for you.
- Help you cut down on unnecessary care and costs.

## Here's how it works:

