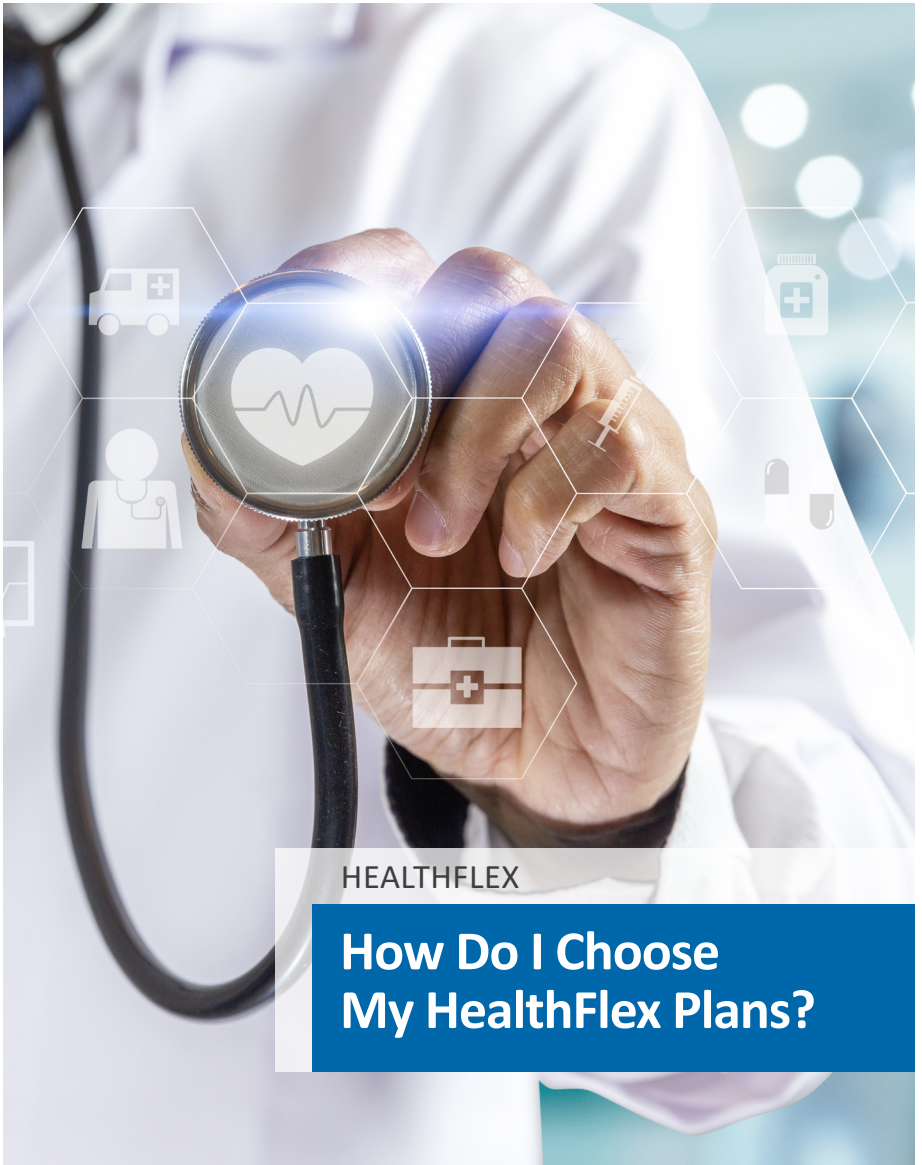




# Wespath

BENEFITS | INVESTMENTS



HEALTHFLEX

## How Do I Choose My HealthFlex Plans?

## What Is Great About HealthFlex?

### Plan Options to Meet Your Unique Needs

Everyone’s health care needs are different. What works for one individual may not be the best for a family or person with different medical or financial circumstances. With HealthFlex, you choose the plans that are best for you.

You can select from:



6 Medical



Up to 3 Dental



3 Vision

With flexibility to select the plans that best fit your budget and health care needs, and more choice over how to allocate your Premium Credit, HealthFlex puts you in control.



## Shop for Coverage With Your Premium Credit

A Premium Credit is tax-free money given to you by your annual conference or employer to help toward the premium (or cost) of your HealthFlex coverage. This money is specifically for purchasing the HealthFlex coverage you select. Your credit is applied to your premium—offsetting *what you owe each month*.

### Premium Credit Example

|             | Monthly Premium Credit Amount | Monthly Premium | Difference |
|-------------|-------------------------------|-----------------|------------|
| Pastor John | \$900                         | \$1,000         | -\$100     |

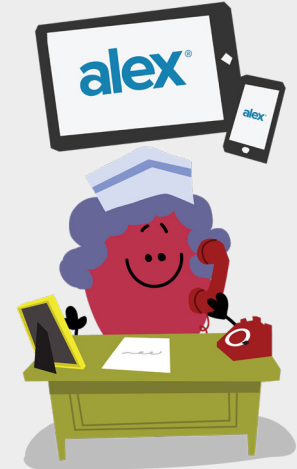
Pastor John’s church or employer **withholds** \$100/month from his paycheck for additional premium costs.

### ALEX Benefits Counselor

**ALEX is a tool to help you select the right plans.** The “benefits counselor” will ask a series of questions to help determine which plans may be the best fit for you.

Use ALEX to:


- Estimate out-of-pocket costs, such as deductibles, co-payments or co-insurance
- Compare HealthFlex plans, see which plan might cost the least overall and learn which plan might be most cost efficient if unexpected costs arise
- Estimate health account contributions





To access ALEX, log into [BenefitsAccess.org](https://BenefitsAccess.org), select the **Health Details** button and then choose **Plan Details** at the top of the page. From mid-September through the end of annual election on November 13, you also can look for a banner in Benefits Access that will direct you to ALEX.

## Medical Plan Comparisons

There are important differences in how each type of HealthFlex plan covers some services:

|   |   |  <b>HSA Plans</b>            |   |   |
|---|---|---|---|---|
| Plan Feature  |   | H2000   | H2500   | H5000   |
| Health Account Employer Contribution                              |   | \$1,000 for 1 person<br>\$2,000 for > 1 person  | \$250 for 1 person<br>\$500 for > 1 person                      | None  |
| In-network  | <b>Deductible</b><br>Participant pays all                               | \$2,000 per person<br>\$4,000 per family<br><br>If > 1 person is covered the family deductible always applies | \$2,500 per person<br>\$5,000 per family                        | \$5,000 per person<br>\$10,000 per family     |
|   | <b>Co-insurance</b><br>Participant pays part (Plan   Participants pays) | 80%   20%   | 70%   30%   | 100%   0%                                     |
|   | <b>Out-of-Pocket Max (OOP)</b><br>After this, plan pays all             | \$5,000 per person<br>\$10,000 per family   | \$5,000 per person<br>\$10,000 per family                       | \$5,000 per person<br>\$10,000 per family     |
| <b>Office Visits—All Preventive Visits are Covered at 100%</b>    |   |   |   |   |
| Doctor visit <b>before</b> deductible is met                      |   | Participant pays full discounted cost   |   |   |
| Doctor visit <b>after</b> deductible is met                       |   | Plan pays 80%   | Plan pays 70%   | Plan pays 100%                                |
| <b>Medical Services</b>   |   |   |   |   |
| Hospital stay, lab or x-ray <b>before</b> deductible              |   | Participant pays full discounted cost   |   |   |
| Hospital stay, lab or x-ray <b>after</b> deductible               |   | Plan pays 80%   | Plan pays 70%   | Plan pays 100%                                |
| Pharmacy  |   | <b>After</b> deductible, participant pays copay or co-insurance   | <b>After</b> deductible, participant pays copay or co-insurance | <b>After</b> deductible, participant pays \$0 |
|   |   | Do not need to meet deductible if Rx is on the preventive drug list   |   |   |
| MDLIVE (Behavioral Health and Urgent/ Acute Care)                 |   | No cost for plan participants   |   |   |
| Behavioral Health Office and Telehealth Visits (not using MDLIVE) |   | Participant pays full discounted cost until deductible is met   |   |   |
|   |   | then plan pays 80%  | then plan pays 70%  | then plan pays 100%                           |

See *HealthFlex Plan Comparisons* for more benefit details by plan.

|   |  |  <b>HRA Plans</b> |  |  <b>B1000</b> |
|---|--|--|--|--|
|   |  | C2000  | C3000                                      | B1000  |
| Health Account Employer Contribution                                    |  | \$1,000 for 1 person<br>\$2,000 for > 1 person   | \$250 for 1 person<br>\$500 for > 1 person | None   |
| <b>Deductible</b><br>Participant pays all                               |  | \$2,000 per person<br>\$4,000 per family   | \$3,000 per person<br>\$6,000 per family   | \$1,000 per person<br>\$2,000 per family   |
| <b>Co-insurance</b><br>Participant pays part (Plan   Participants pays) |  | 80%   20%  | 50%   50%                                  | 80%   20%  |
| <b>Out-of-Pocket Max (OOP)</b><br>After this, plan pays all             |  | \$5,000 per person<br>\$10,000 per family  | \$5,000 per person<br>\$10,000 per family  | \$5,000 per person<br>\$10,000 per family  |
| <b>Office Visits—All Preventive Visits are Covered at 100%</b>          |  |  |  |  |
| Doctor visit <b>before</b> deductible is met                            |  | Participant pays full discounted cost  |  | \$30 PCP*/<br>\$50 specialist  |
| Doctor visit <b>after</b> deductible is met                             |  | Plan pays 80%  | Plan pays 50%                              | \$30 PCP*/<br>\$50 specialist  |
| <b>Medical Services</b>   |  |  |  |  |
| Hospital stay, lab or x-ray <b>before</b> deductible                    |  | Participant pays full discounted cost  |  | Participant pays full discounted cost  |
| Hospital stay, lab or x-ray <b>after</b> deductible                     |  | Plan pays 80%  | Plan pays 50%                              | Plan pays 80%  |
| Pharmacy  |  | Participant pays copay or co-insurance   | Participant pays copay or co-insurance     | Participant pays copay or co-insurance   |
| MDLIVE (Behavioral Health and Urgent/ Acute Care)                       |  | No cost for plan participants  |  |  |
| Behavioral Health Office and Telehealth Visits (not using MDLIVE)       |  | No deductible  |  | \$15   |
|   |  | Plan pays 80%  | Plan pays 50%                              |  |

\* PCP: Primary Care Provider

## Dental and Vision Plan Comparisons



| Dental   | Passive PPO 2000     | PPO  | Dental HMO                          |
|--|----------------------|--|-------------------------------------|
| Preventive/Diagnostic Services Covered at 100%                               | ✓                    | ✓  | ✓                                   |
| Coverage for basic and major restorative care, plus orthodontia up to age 19 | ✓                    | ✓  | ✓<br>(Plus adult orthodontia)       |
| Same benefits whether your dentist is in-network or not                      | ✓                    |  |                                     |
| More generous benefits if you see an in-network dentist <sup>1</sup>         |                      | ✓  |                                     |
| In-network benefits only, with narrower provider network                     |                      |  | ✓                                   |
| Annual maximum benefit   | \$2,000 <sup>2</sup> | \$2,000 <sup>2</sup><br>(in network)<br>\$1,000 <sup>2</sup><br>(out of network) | No benefit max; see charge schedule |

| Vision                                   | Exam Core | Full Service       | Premier                           |
|--|-----------|--------------------|-----------------------------------|
| Basic eye exam for \$20                  | ✓         | ✓                  | ✓                                 |
| Discount-only for glasses and contacts   | ✓         |                    |                                   |
| Allowance toward glasses and/or contacts |           | \$160 <sup>3</sup> | \$200/year <sup>4</sup><br>(each) |

<sup>1</sup> HealthFlex uses the Cigna PPO Advantage network for the PPO and Passive PPO. The Dental HMO uses the Cigna Dental Care Access Plus Network.  
<sup>2</sup> Increases \$150/year for 3 subsequent years if you get regular preventive checkups.  
<sup>3</sup> Glasses—frames and lenses—or contacts every 12 months.  
<sup>4</sup> The Premier plan allows for two pairs of glasses every 12 months, or one pair of glasses and contact lenses.

## How Do Health Accounts Work?

Choosing a plan with a health account option may save you money on taxes and help you better manage your health care expenses. HSAs, HRAs and FSAs are all offered by HealthFlex. They share some similar traits, but have important differences.

|  | HealthFlex HSA   | HealthFlex HRA   | HealthFlex Health Care FSA  |
|--|--|--|---|
| <b>Which Plans?</b>                                    | H2000, H2500, H5000*   | C2000, C3000   | All   |
| <b>How Funded?</b>                                     | Plan sponsor and individual  | Plan sponsor   | Individual  |
| <b>Earnings/Interest</b>                               | May earn tax-deferred investment earnings  | None   | None  |
| <b>Tax Implications**</b>                              | Triple tax advantage:<br>1. Contributions are excluded from federal income tax<br>2. HSA earnings accrue tax-free<br>3. HSA withdrawals, including investment earnings, are tax-free for eligible expenses | 1. Plan sponsor contributions are excluded from your gross income and are not subject to federal income tax<br>2. HRA withdrawals are tax-free for eligible expenses | 1. Your contributions are excluded from gross income and are not subject to federal income tax<br>2. FSA withdrawals are tax-free for eligible expenses |
| <b>Annual Funding Limit</b>                            | \$4,400 individual<br>\$8,750 family<br><br>Individuals 55+ may contribute extra \$1,000 annually  | Determined by plan sponsor   | \$3,300 (2025 contribution amount)<br><br>For 2026 Health Care FSA annual funding limits, visit <a href="https://irs.gov">irs.gov</a> .                 |
| <b>Carry-Over at Year-End</b>                          | Unlimited carry-over   | Unlimited carry-over as long as you remain in HealthFlex (and through retirement)  | Up to \$660 (2025 amount)   |
| <b>If You Retire</b>                                   | Unused balance remains with you indefinitely regardless of employment/appointment  | Unused balance remains until exhausted   | Eligible expenses through your last date of HealthFlex coverage<br><br><b>Deadline to file claims:</b> 90 days after leaving HealthFlex                 |
| <b>If You Terminate Employment or Waive HealthFlex</b> | Unused balance remains with you indefinitely regardless of employment/appointment  | Unused balance can be used for eligible expenses for up to 90 days after termination or waiver   | Eligible expenses through your last date of HealthFlex coverage<br><br><b>Deadline to file claims:</b> 90 days after leaving HealthFlex                 |

\* H5000 has no plan sponsor contribution for HSA unless there is excess premium credit.  
 \*\* Please consult your tax adviser if you will soon be Medicare-eligible. There may be additional tax implications.

## Make Your 2026 HealthFlex Elections— October 29 through November 13, 2025

This is your only opportunity to select 2026 HealthFlex benefits, change who you'll cover and elect health account contributions. To make your elections for 2026, log into **BenefitsAccess.org** and click the link for **Annual Election** at the top of the page beginning October 29.

- Use ALEX Benefits Counselor to estimate costs under each plan and explore your health account options
- Select your HealthFlex plans—medical, dental and vision
- Choose which eligible dependents to cover in 2026
- Contribute to health accounts for pre-tax savings in 2026 and to save for future health needs

If you don't make any elections, you will either remain in your current elections or default into the plan chosen by your plan sponsor. If you are making health account contributions in 2025, they will not continue into 2026. HSA contributions can be changed mid-year, but FSA contributions cannot.

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After Annual Election, you can only change benefits, add or drop dependents, or make new FSA elections if you experience a qualifying "change of status" event, such as marriage, divorce, death of a spouse, birth/adoption of a child, or loss of spouse's health coverage.

If you have an HSA, you can change your HSA elections/contributions through November of that year, without a change of status event. However, you cannot reduce your contributions mid-year to an amount less than you have already contributed year-to-date.

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**1-888-844-0260**

Annual Election  
Support Team

For questions about your  
HealthFlex elections

