

2025 Benefits Guide



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Discover something new.

2025 annual enrollment is here!

Oct. 14–25, 2024

Say hello to our enhanced 2025 benefits! Explore your options and make your selections by Oct. 25 for coverage starting Jan. 1, 2025.

Benefits designed with you in mind.

Our new, streamlined benefits offer enhanced flexibility, new vendors and cost savings—most colleagues will pay less for coverage!

Check out the improvements and discover how these changes can benefit you.

View top 2025 benefits changes

1. Medical

- Updated plan designs and new administrators for some colleagues who live in certain locations. Most current providers will remain in-network.
- Lower costs for most colleagues: Fewer wage tiers, reduced plan rates and lower out-of-pocket costs when using the plan and staying in network (your deductibles and out of pocket maximums will be higher when going out-of-network).
- No more surcharge for working spouses and dependents.

2. Savings account updates

- For those enrolled in the PPO + HSA plan, there will be company funding and HealthEquity will be the HSA bank. Colleagues with an HSA account at Optum Bank or Inspira Financial will be given an opportunity to transfer funds following enrollment.
- If you currently have a health reimbursement account (HRA) and elect the Basic PPO plan, you can continue to use your credits. However, no new HRA credits will be provided in 2025 or beyond.

3. Prescription drugs

- New administrator: Rightway will replace OptumRx.
- Network expansion: Walgreens will be in the network, in addition to other pharmacies already in the network.
- Convenience: Refill 90-day prescriptions at a pharmacy, in addition to the mail-order refill option.

4. Flexibility and expanded coverage: Choose your medical, dental and vision plans separately and select different coverage options that best suit your needs, including coverage for domestic partners.

5. Health advocacy partners: Enhanced personalized support with Accolade (replaces Health Coach) and Centivo Member Care (in select locations).

It's time for 2025 enrollment.

Step 1: Review the benefits information in this guide.

- Start with [benefits-at-a-glance](#). Get an overview of your 2025 GE HealthCare benefits and contribution rates.
- Review [enrollment actions](#) for 2025 coverage. Understand what happens if you **don't** enroll. Take action during annual enrollment.
- Check out the [medical overview](#). Our new medical plans give you greater control over your healthcare and help you save money. Find out how the plans work and see if your current providers are included in-network.

Step 2: View your 2025 contribution rates on the MyHR Portal (MyHR).

Step 3: Attend an information session at your site or virtually to ask questions and boost your benefits knowledge. You can watch the recorded version on MyHR.

Step 4: Use the Medical Expense Estimator on MyHR. Answer a few simple questions about your expected healthcare use. The tool will help you estimate the potential costs of the medical plan options before you enroll.

Step 5: Take action! Enroll on MyHR by Oct. 25.

Have questions?

Call MyHR: 1-844-HR4-GEHC (1-844-474-4342)

Monday–Friday: 7 a.m.–7 p.m. CT

Benefits-at-a-glance

We're excited to introduce our new and enhanced 2025 benefits.

Our refreshed 2025 benefits program features streamlined plan designs, new vendor partners, increased flexibility and enhanced offerings to support you through life's moments, big and small. Here's an overview of your 2025 GE HealthCare benefits.

Tip! Look for *Action* under each benefit to learn more.

Medical

Two new medical plans empower you to take charge of your healthcare and save money: the Basic PPO and PPO + HSA. Both plans cover in-network preventive care at 100% with no deductible, and provide virtual care, making high-quality healthcare accessible and convenient.

Action: Learn more about the new medical plans. Review the [2025 healthcare rates](#), [medical overview](#) and [medical comparison](#).

Health savings account (HSA)

When you enroll in the PPO + HSA, you can open a health savings account (HSA). The HSA is a tax-free account to help you save and pay for your healthcare. Plus, GE HealthCare will contribute to your account!

Action: Learn more about the [HSA](#).

Prescription drugs

The GE HealthCare medical plans include prescription drug coverage through Rightway, which has an extensive national pharmacy network comprising the most prominent retail and independent pharmacies.

Action: Read more about [prescription drugs](#), including covered medications.

Dental and vision

You have two dental plan options through MetLife: Premium and Preventive Care. Similarly, Davis Vision offers two vision plan options: Premium and Preventive Care.

Action: Review the [2025 healthcare rates](#) and details about [dental](#) and [vision](#).

Flexible spending accounts

You can make pre-tax contributions to the healthcare FSA or limited purpose healthcare FSA (if you enroll in the PPO + HSA plan). You can also make pre-tax contributions to the dependent day care FSA.

Action: See details about the [healthcare FSA](#), [limited purpose healthcare FSA](#) and [dependent day care FSA](#).

Income protection

Protect your income and financial well-being with life insurance, accidental death and dismemberment (AD&D) coverage and disability insurance for unforeseen events.

Action: See details about [income protection](#).

Voluntary benefits

GE HealthCare offers group legal and pet insurance through MetLife and identity theft protection through LifeLock.

Action: Go to [added benefits program](#) to review your benefits.

More benefits

Student loan repayment

Grow your retirement savings while paying down student loan debt with our student loan matching program. If you are unable to contribute enough to your Retirement Savings Plan (RSP) to receive the full company match, GE HealthCare will match a portion of your

qualified student loan repayments, instead of providing a matching contribution based solely on what you contribute to the RSP.

Action: Be on the lookout for more information and education sessions coming soon, registration opens in November 2024.

Well-being program

Our well-being strategy is a priority. To support our people, patients and customers, we must care for ourselves and each other. In addition to the programs below, we plan to introduce a contemporary, holistic well-being model that puts our people first and activates healthy high-performance in teams and individuals, in alignment with our Cultural Operating Principles. Look for more about our new and improved approach in the coming months.

- The **employee assistance program (EAP)** is available if you're feeling overwhelmed or need help with the demands of everyday life. You and anyone in your household can access online resources and free counseling (in-person and virtual).
- Other work/life support resources include **Grokker** and **meQuilibrium (meQ)** for personal well-being, **Cariloop** for caregiving support, **Wellhub** (formerly GymPass) for access to fitness and wellness options and **LifeBalance** for discounts on popular products and services.

Action: Learn about these programs and more by visiting Work & Life on [MyHR](#). And look for more about our new and improved well-being program in the coming months!

Adoption assistance

Adopting a child is an exciting time for you and your family. To support you, GE HealthCare provides a \$10,000 reimbursement for adoption-related expenses for each adopted child.

Have questions?

For questions, visit [MyHR](#) or call 1-844-HR4-GEHC (1-844-474-4342).

Available Monday–Friday: 7 a.m.–7 p.m. CT.

Benefits your way

You have the flexibility to select medical, dental and vision plans separately and choose different coverage options: colleague-only, colleague + spouse/domestic partner, colleague + child(ren) or colleague + family.

In addition, your medical contribution rates are based on **four wage tiers**.

View [2025 healthcare rates](#).

[Enroll Oct. 14-25](#)

This Annual Enrollment site includes a summary of material modification (“SMM”) to the following plans. It updates the benefits handbooks, which are the summary plan descriptions and all prior SMMs for the GE HealthCare Life & Disability Plan, GE HealthCare Employee Health Plan, GE HealthCare Retiree Health & Life Plan, GE HealthCare Life, Disability, and Medical Plan, and GE HealthCare Flexible Benefits Plan. You should review all these documents together to fully understand your benefits. You may request a paper copy by contacting MyHR at GE HealthCare [1-844-474-4342](tel:1-844-474-4342).

This site provides highlights of the changes to your available health and welfare plans. If there are any conflicts between this site and the Plan documents, the Plan documents prevail. Please note that some colleagues may be ineligible to participate in benefits.

GE HealthCare reserves the right to terminate, amend, suspend, replace, or modify its benefit plans and programs at any time and for any reason, in its sole discretion. No individual has a vested right to any benefit under a GE HealthCare welfare benefit plan or program. This document does not create a contract of employment between GE HealthCare and any individual.

Enrollment actions

Go to [MyHR](#) to make benefit elections Oct. 14–25, 2024. Coverage is effective Jan. 1, 2025.

Keep in mind that you can only change your coverage during 2025 if you experience a qualifying life or job event.

Annual enrollment actions

Medical and prescription drugs

Action: Review new benefit plans; enroll in coverage for you and any dependents. Use the Medical Expense Estimator on MyHR to help you estimate costs.

If you don't make an election, you will automatically be enrolled in the plan that most closely matches your current plan and coverage level. If you are currently enrolled in a non-HSA plan, you will be defaulted into the Basic PPO. If you are currently enrolled in an HSA Plan, you will be defaulted into the PPO + HSA. If you waived coverage in 2024, you will also waive coverage in 2025.

Dental

Action: Change or drop coverage for 2025.

If you don't make an election, you will automatically be enrolled in the dental plan and coverage level that matches what you have today.

Reminder: You can select medical, dental and vision plans separately and choose different eligible dependents. If you don't act, your currently enrolled dependents will maintain coverage.

Vision

Action: Change or drop coverage for 2025.

If you don't make an election, you will automatically be enrolled in the vision plan and coverage level that matches what you have today.

Annual enrollment actions

Reminder: You can select medical, dental and vision plans separately and choose different eligible dependents. If you don't act, your currently enrolled dependents will maintain coverage.

Health savings account (HSA)

Action: If you already have an HSA, elect your contribution for 2025. If you don't have an HSA, you must enroll in the PPO + HSA and open an account. Colleagues with an HSA account at Optum Bank or Inspira Financial will be given an opportunity to transfer funds following enrollment.

Note: As long as you have an HSA, you will automatically get the company contribution to your account.

Flexible spending accounts (FSAs)

Action: Elect your contribution amount for the healthcare FSA, limited purpose healthcare FSA and/or dependent day care FSA.

Note: If you are enrolled in the PPO + HSA, you may only participate in a limited purpose healthcare FSA.

Life insurance

Action: Confirm/change beneficiaries and elect additional life insurance.

No action is needed to receive the company-paid benefit and keep your current beneficiaries.

Accident insurance

Action: Elect accident insurance.

No action is needed to keep the same option and level of coverage and beneficiaries for 2025.

Long-term disability (LTD)

Action: Purchase LTD coverage.

No action is needed to keep the same option and level of coverage for 2025.

Group legal

Action: Add or drop coverage. Go to [added benefits program](#) or call 1-833-375-1115.

Note: You can only enroll in or cancel group legal coverage during annual enrollment.

Have questions?

Call MyHR: 1-844-HR4-GEHC (1-844-474-4342)

Monday–Friday: 7 a.m.–7 p.m. CT

Benefits your way

You have the flexibility to select medical, dental, and vision plans separately and choose different coverage options: colleague-only, colleague + spouse/domestic partner, colleague + child(ren) or colleague + family. Tailor your benefits to fit your unique needs.

How to enroll

Starting Oct. 14, go to MyHR to choose your benefits.

Enroll between Oct. 14-25, 2024

Login to [MyHR](#) and follow the prompts from the home page.

If you're unable to enroll online, call MyHR at 1-844-HR4-GEHC (1-844-474-4342) to enroll in benefits, verify dependent eligibility, review beneficiaries and/or confirm colleague contributions. Help is available weekdays from 7 a.m.–7 p.m. CT. You can also login to [MyHR](#) to chat live or schedule an appointment.

After you enroll

You will receive a confirmation of benefits that details your elections and rates. Review it carefully and immediately report any errors to MyHR: 1-844-HR4-GEHC (1-844-474-4342).

If you don't enroll by Oct. 25, 2024

Your current elections will carry forward with these exceptions:

- **Medical option:** If you are currently enrolled in a non-HSA plan, you will default to the Basic PPO. If you are currently enrolled in an HSA plan, you will default to the PPO + HSA.
- **HSA:** If eligible, you must make an election if you want to contribute to the HSA and receive the company contribution.
- **Flexible spending accounts:** You must make an election if you want to contribute to the healthcare FSA, limited purpose healthcare fSA or dependent day care FSA.

You will receive a confirmation of your 2025 elections from Alight, even if you don't take action during annual enrollment.

Voluntary benefits

To enroll in pet insurance or identity theft, go to the [added benefits program website](#) or call 1-833-375-1115.

Medical overview

For 2025, you have new plan options.

You can choose from the following options:

- **Basic PPO** administered by Centivo
- **PPO + HSA** administered by Centivo
- **PPO + HSA** administered by Credence Blue Cross Blue Shield (BCBS)

Each option includes [prescription drug coverage](#) administered by Rightway.

How the plans work

Spend less, benefit more with Centivo

Centivo health plans provide high-quality care at lower costs by prioritizing your relationship with your primary care doctor. The [Centivo network](#) includes local health systems, virtual doctors and national providers, ensuring you have quick and easy access to the specialists and services you need. Your current doctor is likely part of Centivo's extensive network. But it's worth checking to make healthcare work for you!

In Wisconsin, the Centivo network includes all major health systems including Aurora, Froedtert, Ascension and ProHealth.

Centivo Basic PPO

After enrolling in the Centivo Basic PPO, you'll need to choose a primary care doctor from the Centivo network. The Centivo network also includes virtual primary care doctors as an alternative to your in-person primary care doctor.

- From routine medical appointments to specialist visits, your primary care doctor guides your care and provides referrals to specialists, so you always know you're getting appropriate care in the right place at the right time. **Note:** Some specialists do not require a primary care doctor referral (e.g., OB/GYN, chiropractor, physical therapy).
- All primary care visits, including pediatrician visits for sick and routine care, are **free and not subject to the deductible**, so there's no reason not to see them when you don't feel well or have a health concern.

- For other services guided by your primary care doctor, you pay 10% after the deductible.
- When you go to an out-of-network provider, or your care isn't guided by your primary care doctor, you'll pay more. Your coinsurance, deductible and out-of-pocket maximum will be higher.
- You pay the full cost of most services, including prescription drugs, until you meet the annual deductible. Then you pay coinsurance, and the plan pays the balance.
- Once you meet the annual out-of-pocket maximum, the plan pays 100% of covered expenses for the rest of the year.

Centivo PPO + HSA

The Centivo PPO + HSA is a high-deductible health plan. The plan works like the Centivo Basic PPO with these differences:

- Higher annual deductible than the Centivo Basic PPO, but lower contributions.
- Preventive care received from a network provider is covered 100%, with no deductible. Primary care outside of preventive care is subject to the deductible.
- Non-preventive, primary care visits with your designated primary care doctor are *free after you meet the deductible*.
- Includes a tax-advantaged [health savings account](#). Plus, GE HealthCare will automatically contribute to your HSA for most colleagues! **Note:** Find more information on [health savings account](#) requirements.

For questions about the Centivo Basic PPO and PPO + HSA plans, call Centivo Member Care at 1-800-615-5975.

Virtual Primary Care

Centivo Virtual Primary Care is a convenient alternative to in-person primary care, which you can access from home, work or when traveling. You get:

- Virtual appointments via a secure app with no waiting rooms or commute.
- Help with new concerns, prescriptions and ongoing issues.
- Coordination with in-person doctors when needed.

Learn more by visiting [Centivo Virtual Primary Care](#).

Credence BCBS PPO + HSA

The Credence BCBS PPO + HSA is a high-deductible health plan. It has a higher deductible than the Centivo Basic PPO, but lower monthly contributions.

- You can use any provider you want, but you'll pay less when you use in-network providers—20% for in-network providers and 40% for out-of-network providers. In addition, when you go out-of-network your deductible and out-of-pocket maximum will be higher.
- You pay the full cost of most services, including prescription drugs, until you meet the annual deductible. Then you pay coinsurance, and the plan pays the balance.
- Once you meet the annual out-of-pocket maximum, the plan pays 100% of covered expenses for the rest of the year.
- Preventive care received from a network provider is covered 100%, with no deductible. Primary care outside of preventive care is subject to the deductible.

This plan includes a tax-advantaged [health savings account](#). Plus, GE HealthCare will automatically contribute to your HSA!

Transition of care

Contact a Health Coach to help you transition care to the new plans and administrators.

- If your medical plan administrator changes in 2025, visit their website to check if your current providers are in the network. If a provider is not in the new network, Health Coach can help with information on the transition of care process. You can reach Health Coach at 1-800-541-1153, available from 8 a.m. to 6 p.m. CT through 2024. In 2025, you can also discuss the transition of care with your new administrator by calling the number on the back of your medical ID card.
- You may continue to contact Health Coach through 2024 for support and guidance about your current medical plans and coverage, including 24/7 access to speak to a nurse.

Medical plan support

Beginning Jan. 1, 2025, Accolade and Centivo Member Care will replace Health Coach to provide enhanced personalized support for your healthcare needs. Accolade's Care Advocates and nurses or Centivo Member Care can help you find a network doctor, understand coverage and costs, learn more about symptoms or a disease and more. Call the phone number on the back of your medical plan ID card.

Prepare for enrollment

See if your provider is in the network:

- [Centivo](#)
- [Credence CBBS](#)
- Review the [2025 healthcare rates](#).

GE HealthCare
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Active Full-Time

2025 Contributions and Annual Limits

The chart below shows your costs to participate in each medical plan option. Note that the "Company HSA Contribution" depicted alongside the "PPO with HSA" plan is not a cost to you, but rather funds that the company will contribute to a health savings account that you open with the company's partner HSA bank.

Out-of-Pocket Maximum = Deductible + Co-Insurance Maximum

After the plan out-of-pocket maximum is met, the company pays the full cost of covered services.

Both plan options in 2025 have the same out-of-pocket maximum.

Dental and Vision Premium Plans - Annual Cost

	You Only	You + Spouse (e)	You + Child(ren)	You + Family (e)
Dental Premium	\$189	\$378	\$378	\$561
Vision Premium	\$110	\$223	\$223	\$339

Annual Payroll Contribution (b)			Basic PPO Annual Limits				PPO with HSA Annual Limits					
Annual Pay Range (a)			In-Network (c)		Out-of-Network (c)		Company HSA Contribution	In-Network (c)		Out-of-Network (c)		
		Basic PPO	PPO with HSA	Deductible	Co-Insurance (d)	Deductible		Co-Insurance (d)	Deductible	Co-Insurance (d)		
You Only												
Up to \$49,999		\$1,393	\$1,152	\$750	\$2,750	\$1,500	\$5,500	\$400	\$2,000	\$1,500	\$4,000	\$3,000
\$50,000-\$74,999		\$1,856	\$1,613									
\$75,000-\$99,999		\$2,321	\$2,074									
\$100,000 or more		\$2,785	\$2,533									
You + Spouse/Domestic Partner (e)												
Up to \$49,999		\$3,063	\$2,533	\$1,250	\$4,350	\$2,500	\$8,700	\$1,100	\$3,300	\$2,300	\$6,000	\$5,200
\$50,000-\$74,999		\$4,085	\$3,548									
\$75,000-\$99,999		\$5,105	\$4,561									
\$100,000 or more		\$6,126	\$5,575									
You + Child(ren) (e)												
Up to \$49,999		\$2,645	\$2,188	\$1,250	\$4,350	\$2,500	\$8,700	\$1,100	\$3,300	\$2,300	\$6,000	\$5,200
\$50,000-\$74,999		\$3,527	\$3,064									
\$75,000-\$99,999		\$4,409	\$3,940									
\$100,000 or more		\$5,291	\$4,815									
You + Family												
Up to \$49,999		\$4,177	\$3,455	\$1,750	\$5,250	\$3,500	\$10,500	\$1,200	\$4,000	\$3,000	\$8,000	\$6,000
\$50,000-\$74,999		\$5,569	\$4,839									
\$75,000-\$99,999		\$6,962	\$6,221									
\$100,000 or more		\$8,354	\$7,601									

(a) Annual Pay is defined as your Normal Straight-Time Annual Earnings and does not include overtime or night-shift bonus.

(b) Contribution amounts are for non-tobacco users. Tobacco users pay an additional \$623 annually in payroll contributions.

(c) All deductibles, copays and coinsurance for in-network services and out-of-network mental health and substance abuse emergency services apply to both the in-network and out-of-network out-of-pocket maximum. All deductibles, copays and coinsurance for out-of-network services (other than those previously mentioned) apply to the out-of-network out-of-pocket maximum only. Additionally, where a plan is administered by Centivo, "in-network" means care that's guided by your primary care provider, where required, or in-network where not required; "out-of-network" means required care that was unguided by your primary care provider, or out-of-network care.

(d) In accordance with requirements under the Affordable Care Act (ACA), no individual family member can pay more out-of-pocket for eligible expenses in 2025 than \$8,200 (Basic PPO) or \$8,300 (PPO with HSA), or the combined family out-of-pocket maximum for the plan option in which they are enrolled, whichever is less. Once the combined out-of-pocket maximum is met, the plan will pay 100% of eligible expenses for the remainder of the year (including for a family member who has not met the individual out-of-pocket maximum).

(e) Coverage for domestic partners is paid on an after-tax basis. This will appear on your paycheck as an imputed income.

This table applies to employees who are regularly scheduled to work 30 or more hours a week and are considered to be full-time Company employees for GE HealthCare welfare benefit purposes.

GE HealthCare reserves the right to terminate, amend, suspend, replace, or modify its benefit plans and programs at any time and for any reason, in its sole discretion. No individual has a vested right to any benefit under a GE HealthCare welfare benefit plan or program. This document does not create a contract of employment between GE HealthCare and any individual.

Union
Version: Oct. 14, 2024

Medical comparison

See how the 2025 medical options compare to help you determine what will work best for you and your family.

Key considerations

Before you choose a medical option, consider the following:

- **Spend less, benefit more:** Centivo health plans provide high-quality care at lower costs by prioritizing your relationship with your primary care doctor. The [Centivo network](#) includes local health systems, virtual doctors and national providers, ensuring you have quick and easy access to the specialists and services you need. Your current doctor is likely part of Centivo's extensive network. But it's worth checking to make healthcare work for you!
- See if your current providers are in the network:
 - [Centivo](#)
 - [Credence BCBS](#)
- If you currently have a **health reimbursement account** (HRA) and elect the Basic PPO plan, you can continue to use your credits. However, no new HRA credits will be provided in 2025 or beyond.
- If you enroll in the PPO + HSA, you can open a tax-advantaged HSA and receive a contribution from the company.

See how the plans compare

Review a high-level overview of the [2025 GE HealthCare medical plans](#).

2025 Medical Comparison

Here's a high-level comparison of the GE HealthCare medical options.

	Basic PPO Centivo		PPO + HSA Centivo		PPO + HSA Credence BCBS	
HRA						
	• No new credits in 2025 • Balance can be used for claims incurred through 6/30/27, paid through 12/31/27		N/A		N/A	
Health Savings Account						
Company contribution						
Colleague	N/A		\$400		\$400	
Colleague + spouse/DP	N/A		\$1,100		\$1,100	
Colleague + child(ren)	N/A		\$1,100		\$1,100	
Colleague + family	N/A		\$1,200		\$1,200	
	Guided care*	Non-guided care	Guided care*	Non-guided care	In-network	Out-of-network
	What you pay					
Annual deductible**						
Colleague	\$750	\$1,500	\$2,000	\$4,000	\$2,000	\$4,000
Colleague + spouse/DP	\$1,250	\$2,500	\$3,300	\$6,000	\$3,300	\$6,000
Colleague + child(ren)	\$1,250	\$2,500	\$3,300	\$6,000	\$3,300	\$6,000
Colleague + family	\$1,750	\$3,500	\$4,000	\$8,000	\$4,000	\$8,000
Out-of-pocket maximum**						
Colleague	\$3,500	\$7,000	\$3,500	\$7,000	\$3,500	\$7,000
Colleague + spouse/DP	\$5,600	\$11,200	\$5,600	\$11,200	\$5,600	\$11,200
Colleague + child(ren)	\$5,600	\$11,200	\$5,600	\$11,200	\$5,600	\$11,200
Colleague + family	\$7,000	\$14,000	\$7,000	\$14,000	\$7,000	\$14,000
Coinsurance						
	10%	40%	10%	40%	20%	40%

* When you go to your primary care doctor for referral to a specialist (where required), your cost-share is lower. Certain providers, such as urgent care or OBGYN don't require a referral to be covered at the lower cost-share.

** If an individual meets an in-network and/or out-of-network deductible and/or out-of-pocket maximum, that deductible and/or out-of-pocket maximum, it is met for the entire family.

Covered services

Services are paid *after you meet the deductible* and pay the coinsurance unless otherwise noted below.

	Basic PPO Centivo		PPO + HSA Centivo		PPO + HSA Credence BCBS	
	Guided care*	Non-guided care	Guided care*	Non-guided care	In-network	Out-of-network
	What you pay, after deductible, unless otherwise stated					
Primary care (non-preventive care visit)	\$0; no deductible	40%	\$0	40%	20%	40%
Preventive care	\$0, no deductible	Not covered	\$0, no deductible	Not covered	\$0, no deductible	Not covered
Office visit (e.g., specialist)	10% Note: Does not require referral for some specialists*	40%	10% Note: Does not require referral for some specialists*	40%	20%	40%
Medical (Inpatient surgery)	10%	40%	10%	40%	20%	40%
Emergency room	10% Note: Does not require referral	10%	10% Note: Does not require referral	10%	20%	20%
Behavioral health (Inpatient)	10%	40%	10%	40%	20%	40%
Behavioral health (Office visit)	\$0, no deductible	\$0, no deductible	\$0	\$0	20%	20%

* When you go to your primary care doctor for referral to a specialist (where required), your cost-share is lower. Certain providers, such as urgent care or OB/GYN don't require a referral to be covered at the lower cost-share.

Have questions?

Plan details or networks:

- Visit [Centivo](#) or call 1-800-615-5975
- Visit [Credence BCBS](#) or call 1-888-879-4179

Eligibility: Visit [MyHR](#) or call 1-844-HR4-GEHC (1-844-474-4342).

Benefits your way

You have the flexibility to select medical, dental, and vision plans separately and choose different coverage options: colleague-only, colleague + spouse/domestic partner, colleague + child(ren) or colleague + family.

In addition, your medical contribution rates are based on **four wage tiers**.

View [2025 healthcare rates](#).

Health savings account

When you enroll in the PPO + HSA, you can open a health savings account (HSA) with HealthEquity. Colleagues with an HSA account at Optum Bank or Inspira Financial will be given an opportunity to transfer funds following enrollment.

The HSA is a great way to pay for healthcare expenses now and in the future because of the triple tax savings—your dollars go into the account tax-free, grow tax-free and can be used to pay medical expenses tax-free. The money in your HSA is always yours, even if you change jobs or retire.

If you have an HSA, you are also eligible to contribute to the [limited purpose healthcare FSA](#) for eligible dental and vision expenses.

Contributions to the HSA

There are two ways to fund your HSA.

- **GE HealthCare contributions:** The company will contribute to your HSA based on coverage level. You *must* elect an HSA during the enrollment process to receive the company contribution. The company contribution is funded quarterly.
- **Colleague contributions:** You can make pre-tax contributions to your HSA up to the IRS limits minus the contribution from GE HealthCare. **Note:** You do not need to contribute to the HSA to receive the company contribution.

In 2025, the annual HSA contribution limits will be \$4,300 for colleague-only coverage and \$8,550 for other coverage levels, as shown below.

	2025 IRS contribution limit	GE HealthCare contribution	Maximum colleague contribution*
Colleague only	\$4,300	\$400	\$3,900
Colleague + spouse/DP or colleague + child(ren)	\$8,550	\$1,100	\$7,450
Colleague + family	\$8,550	\$1,200	\$7,350

*If you are 55 or older at any point during 2025, you can contribute an additional \$1,000.

More about the HSA

- You may change your HSA contribution anytime during the plan year in MyHR.
- You are not eligible to contribute to an HSA if you:
 - Have other health insurance coverage that is not a high deductible health plan, including coverage under your spouse's plan.
 - Are enrolled in Medicare coverage. You are eligible to contribute for the months before you start Medicare Parts A, B, C or D.

To have an HSA, you must pass Patriot Act screening and accept the terms and conditions.

Prescription drugs

Rightway offers a personalized pharmacy benefits experience.

When you enroll in a GE HealthCare medical plan option, [Rightway](#) provides prescription drug coverage.

About prescription drug coverage

Rightway helps you manage your pharmacy benefits while focusing on keeping costs low and providing high-quality care. You'll have a wide range of nationwide pharmacies to fill your prescriptions, including major retail chains like Walgreens and cost-saving options. For retail and mail, mail order is no longer required for maintenance medications.

Support from Rightway

Here's how Rightway provides support to GE HealthCare colleagues:

- Mobile app and portal site to access your information and manage prescriptions.
- Call centers staffed with experts to provide guidance.
 - **Health Guides:** Certified Pharmacy Technicians are available via the Rightway app or phone to answer your questions about how your prescription drug benefits work. They help you maximize the value of your pharmacy benefits, assist with accessing care, and handle necessary actions on your behalf. They will connect you with a Rightway pharmacist for further assistance if needed.
 - **Pharmacy Navigation Team:** Clinical pharmacists offer 24/7 support and can guide you to high-value medications.

Coverage includes:

- Retail network pharmacies: Up to a 90-day prescription or less
- Mail order home delivery: For medications you need on a longer-term basis

Go to [Rightway](#) to search for medications that are covered and not covered.

Note: Your costs for prescription drugs apply to the medical plan deductible and out-of-pocket maximum. There is not a separate deductible for prescription benefits. Out-of-network prescriptions are not covered. Certain prescriptions require prior authorization.

	Basic PPO Centivo	PPO + HSA Centivo	PPO + HSA Credence BCBS
What you pay			
Certain preventive drugs	\$0; no deductible	\$0; no deductible	\$0; no deductible
Certain antibiotics, generic high-blood pressure drugs and opioid treatment drugs	\$0; no deductible	\$0; subject to deductible	\$0; subject to deductible
Certain diabetic supplies, insulin pump, insulin pump supplies	\$0; no deductible	\$0; subject to deductible	\$0; subject to deductible
30 day retail			
Generic	\$12 copay, subject to deductible	\$12 copay, subject to deductible	\$12 copay, subject to deductible
Brand	30%, subject to deductible	30%, subject to deductible	30%, subject to deductible
Specialty drugs	\$120 copay, no deductible	\$120 copay, subject to deductible	\$120 copay, subject to deductible
Targeted drugs (e.g., diabetes, high cholesterol, asthma)	\$12 copay, no deductible	\$12 copay, subject to deductible	\$12 copay, subject to deductible

90 day supply

Generic	\$24 copay, subject to deductible	\$24 copay, subject to deductible	\$24 copay, subject to deductible
Brand	20% co-insurance, subject to deductible	20% co-insurance, subject to deductible	20% co-insurance, subject to deductible
Specialty drugs	\$360 copay, no deductible	\$360 copay, subject to deductible	\$360 copay, subject to deductible
Targeted drugs (e.g., diabetes, high cholesterol, asthma)	\$24 copay, no deductible	\$24 copay, subject to deductible	\$24 copay, subject to deductible

Transferring your prescription

Beginning Jan. 1, 2025, present your Rightway ID card at an in-network pharmacy for prescription refills—no new prescription is needed.

If you use OptumRx Mail Order or Specialty Pharmacy, most prescriptions will be transferred to Walgreens Home Delivery or Specialty Pharmacy. Look for details from Rightway before Jan. 1.

Dental

For 2025, your dental election is separate from medical and vision.

GE HealthCare offers dental coverage administered by MetLife. You can choose between the Premium option and Preventive Care option.

How the plans work

With both MetLife dental plans, you can see any dentist you want. However, you'll save money and receive the highest level of coverage (which means you pay less out of your pocket) when you visit a dentist in the MetLife network. Go to [MetLife Dental](#) and select *Find a participating dentist*.

Here's a high-level overview of the dental plans.

	Premium option	Preventive Care option
Plan highlights		
Annual benefit maximum	\$2,500 per person per calendar year for some services	<ul style="list-style-type: none">• Colleague only: \$175• Colleague + Sp/DP or Colleague + Child: \$350• Colleague + Children or Family: \$525
What you pay		
Annual deductible	\$50 per person; up to \$150 per family Applies to all services except preventive, diagnostic and orthodontia	NA

	Premium option	Preventive Care option
Preventive services	\$0; covers routine exam, cleaning, fluoride, sealants, bitewing X-rays	No cost (up to the annual benefit maximums) for preventive cleanings, clinical oral exams, x-rays
Other services	20% after deductible	Not covered
<ul style="list-style-type: none"> • Root canals • Periodontics • Inlays/onlays/crowns • Routine extractions • Oral surgery • Anesthesia for dental care 		
Orthodontia	50%, up to \$2,500 lifetime maximum per child	Not covered

Vision

For 2025, your vision election is separate from medical and dental.

GE HealthCare offers vision coverage administered by Davis Vision. You can choose between the Premium option and Preventive Care Option.

How the plans work

Maximize your benefits when you see eyewear providers in the Davis Vision network. Go to [Davis Vision](#) and select *Find an eye care professional*.

Here's a high-level overview of the vision plans.

	Premium option	Preventive Care option
Plan highlights (in-network)		
Annual eye exam (includes dilation and 15% discount for contact lens exam and fitting)	You pay \$0	You pay \$0
Eyewear (includes lenses)	Up to a \$200 annual allowance (in-network and out-of-network combined)	No coverage
Single vision lenses	Plan pays up to \$41*	No coverage
Davis Vision Collection frame benefits	Plan pays up to \$57*	No coverage
Davis Non-Collection frame benefits	Get 50% off first \$150, then 20% off over \$150* 10% off retail cost at Walmart and Sam's Club*	No coverage
Discount on contact lenses	Get 15% off retail cost (not applicable at Walmart or Sam's Club)*	No coverage

*Applied towards \$200 maximum annual eyewear allowance.

Davis Vision Value

Take advantage of the Davis Vision Value program and get discounts below retail pricing for eyewear. Contact [Davis Vision](#) for more information.

Benefits your way

You have the flexibility to select medical, dental, and vision plans separately and choose different coverage options: colleague-only, colleague + spouse/domestic partner, colleague + child(ren) or colleague + family.

View [2025 healthcare rates](#).

Income protection

Safeguard your income and financial well-being.

You have the following income protection benefits. Go to [MyHR](#) for details, including costs and who you can cover.

Highlights

Life insurance

Life insurance pays a benefit in the event of death. You automatically receive basic life insurance from GE HealthCare: 2X annual pay (normal straight-time earnings).

You have the option to purchase additional protection for yourself and eligible dependents. MetLife administers the plan.

If you are currently enrolled in the optional “A Plus Life Insurance” plan, you can increase your coverage by 1X pay (not to exceed the 10X plan amount) in 2025 without providing evidence of good health.

Accidental death & dismemberment (AD&D)

AD&D insurance pays a benefit if you experience an accident resulting in death, dismemberment or loss of limb/sight/speech/hearing. AD&D is available for you and your eligible dependents. MetLife administers the plan.

Disability

Disability pays a benefit if you can’t work because of a covered illness or injury.

- **Short-term disability:** You automatically receive a benefit from GE HealthCare for the first 26 weeks, replacing 60% of your pre-disability pay. Sedgwick administers the plan.
- **Long-term disability:** You can purchase LTD coverage. MetLife administers the plan.

Have questions?

Call MyHR: 1-844-HR4-GEHC (1-844-474-4343)

Call Sedgwick: 1-866-849-0564, Option 1

Monday-Friday: 7 a.m.-7 p.m. CT

[Enroll Oct. 14-25](#)

Healthcare FSA

Set aside pre-tax dollars to pay for qualified healthcare expenses.

Save money with the healthcare flexible spending account (HCFSAs). [HealthEquity](#) administers the HCFSAs.

Note: If you enroll in the PPO Plan + HSA, you are not eligible for a HCFSAs. Instead, you may contribute to the [limited purpose healthcare flexible spending account \(FSA\)](#).

Here's a high-level overview of the HCFSAs.

Features

Contributions to your account

- Contribute up to \$3,200.
- Contributions are deducted pre-tax from your paycheck, which reduces your taxable income.

Eligible expenses

Use your HCFSAs on a pre-tax basis to pay for:

- Medical and dental deductibles
- Medical, dental and vision copays
- Other medical, dental and vision expenses not reimbursed by a plan, such as contact lens solution and coinsurance amounts
- Over-the counter medications and menstrual products

[IRS Publication 502](#) has a complete list of eligible expenses.

Note: If your domestic partner and/or domestic partner's children qualify as your tax dependents, their expenses are eligible to be claimed under your HCFSAs.

Debit card

HealthEquity will send you a debit card for eligible expenses with access to your full balance.

Features

Reimbursement

- **Submit claims:** When you have eligible expenses, send your receipts and claim forms to HealthEquity.
- **Get reimbursed:** You'll be reimbursed up to the total amount you elected for the year and any carry over amount (if applicable), even if you haven't contributed the total amount at the time of your request.

Carry over of funds

Carry over up to \$640 from one year to the next. Amounts over the \$640 limit are forfeited.

Limited purpose healthcare FSA

If you enroll in the PPO + HSA medical plan, you may only participate in a limited purpose healthcare flexible spending account (LPFSA).

The LPFSA reimburses you for eligible dental and vision expenses. [HealthEquity](#) administers the LPFSA.

Here's a high-level overview of the LPFSA.

Features

Contributions to your account

- Contribute up to \$3,200.
- Contributions are deducted pre-tax from your paycheck, which reduces your taxable income.

Eligible expenses

Use your LPFSA on a pre-tax basis to pay for eligible dental and vision expenses at **any time**, including:

- Dental deductibles
- Dental and vision copays
- Other dental and vision expenses not reimbursed by a plan, such as contact lens solution, vision correction surgery, orthodontia and coinsurance amounts.

[IRS Publication 502](#) has a complete list of eligible expenses.

Note: If your domestic partner and/or domestic partner's children qualify as your tax dependents, their expenses are eligible to be claimed under your LPFSA.

Debit card

HealthEquity will send you a debit card for eligible expenses with access to your full balance.

Features

Reimbursement

- **Submit claims:** When you have eligible expenses, send your receipts and claim forms to HealthEquity.
- **Get reimbursed:** You'll be reimbursed up to the total amount you elected for the year and any carry over amount (if applicable), even if you haven't contributed the total amount at the time of your request.

Carry over of funds

You may carry over up to \$640 from one year to the next. Amounts over the \$640 limit are forfeited.

Dependent day care FSA

Save money with the dependent day care flexible spending account (DCFSA) by setting aside pre-tax dollars to pay for eligible non-medical day care expenses. [HealthEquity](#) administers the FSA.

Here's a high-level overview of the DCFSA.

Features

Contributions to your account

- Contribute up to \$5,000 (if you and your spouse/domestic partner file taxes together) or \$2,500 (if filing separately).
- Contributions are deducted pre-tax from your paycheck, which reduces your taxable income.

Eligible expenses

Put aside money on a pre-tax basis to pay for eligible dependent day care expenses for:

- Your children under age 13
- Your spouse or other dependent (of any age) who is physically or mentally incapable of self-care and you claim as an exemption on your federal income tax

[IRS Publication 503](#) has a complete list of eligible and ineligible expenses.

Note: If your domestic partner and/or domestic partner's children qualify as your tax dependents, their expenses are eligible to be claimed under your DCFSA.

Reimbursement

- Submit claims: When you have eligible expenses, send your receipts and claim forms to HealthEquity.
- Get reimbursed: You'll be reimbursed up to the total amount in your account at the time of submission.

Forfeit of funds

- Money left over after all eligible expenses have been reimbursed cannot be returned to you. You will forfeit any unused balance.

Added benefits program

Customize and enhance your GE HealthCare benefits with the added benefits program. Participation is optional, and you cover the costs through after-tax payroll deductions.

Group legal insurance

Access experts who can help you with various personal legal matters in person or over the phone. MetLife administers the plan. You may enroll for group legal only during annual enrollment on MyHR.

Pet insurance

Protect yourself from costly vet visits with pet insurance administered by MetLife. Enroll anytime during the year by calling 1-833-375-1115 or going to [GE HealthCare added benefits](#).

Identity theft protection

Get protection for credit theft, identity restoration, privacy, device security, child safety, social media monitoring, bank alerts, data breach notifications, and more. Norton LifeLock administers the plan. Enroll anytime during the year by calling 1-833-375-1115 or going to [GE HealthCare added benefits](#).

Take action by Oct. 25!

Enroll in group legal insurance during annual enrollment to have coverage in 2025 or to cancel existing coverage.

Contacts

Benefit

MyHR Portal

Contact information

[Alight](#)

1-844-HR4-GEHC (1-844-474-4342)

Monday-Friday, 7 a.m.-7 p.m. CT

Medical

[Centivo](#)

1-800-615-5975

Monday-Friday, 7 a.m.-7 p.m. CT

[Credence BCBS](#)

1-888-879-4179

Health savings account/Limited purpose FSA [HealthEquity](#)

1-866-346-5800

Prescription drugs

[Rightway](#)

1-866-450-2746

Dental

[MetLife](#)

1-800-942-0854

Vision

[Davis Vision](#)

1-888-657-6550

Income protection

[Metlife](#)

- Life insurance (MetLife)

1-888-657-6550

- AD&D (MetLife)

[Sedgwick](#)

- Short-term disability (Sedgwick)

1-866-849-0564, Option 1

- Long-term disability (MetLife)

Benefit**Contact information****Spending accounts**[HealthEquity](#)

- Healthcare FSA
- Dependent day care FSA
- Health reimbursement account

1-877-924-3967

24 hours/7 days a week

Voluntary benefits[GE HealthCare added benefits](#)

- Group legal (MetLife)
- Pet insurance (MetLife)
- ID theft protection (Norton LifeLock)

1-833-375-1115