Medical

Comparing the HSA and Copay Plans

Mohawk employees have the choice of two medical plans administered through Cigna, **the HSA plan and the Copay plan.**

As you consider which plan is right for you and your family, it's important to understand how the HSA and Copay plans compare. Use the information below to learn more about what's the same and how they differ.

What's the Same



What's covered

Both medical plans cover the same services. So whether you need preventive care, a hospital visit, or prescription drugs, we've got you covered.

Healthy Life Centers

Both medical plans allow you to visit a nearby or virtual Healthy Life Center, offering a variety of services including primary and acute visits at \$25.

No-cost preventive care

With both plans, when you use an in-network provider, you receive preventive care services such as an annual physical, certain screenings or preventive prescriptions at no cost to you.

A cap on out-of-pocket costs

Both medical plans have an out-of-pocket maximum, which is the most you will pay in a plan year for all covered services. Once you reach the out-of-pocket maximum, the plan pays 100% of covered services for the rest of the year. The embedded out-of-pocket maximum applies to both plans.

What's Different



How the deductible works

Both medical plans have a deductible that you are responsible for meeting before the plan begins to pay for some covered services.

- With the HSA plan, all non-preventive care services, including prescription drugs, are subject to the deductible. So with this plan, you pay for 100% of the cost of services (other than preventive care) until you meet the deductible.
- With the Copay plan, only those services for which you pay coinsurance, such as in-patient and out-patient hospital care, advanced imaging, and maternity care, are subject to the deductible.
- The HSA plan has a higher deductible to meet before the plan begins to pay, including prescription drug costs.
- If you are covering dependents, the HSA plan has a "full family deductible," meaning you must meet the entire family deductible before the plan begins to pay for any individual covered under the plan.

Prescription drug coverage

In the HSA plan, prescription drug expenses are subject to the plan's deductible, and you may pay 100% of the out-of-pocket costs until the deductible is met. In the Copay plan, there is no deductible for prescription drug expenses, but you will be responsible for a copay.

Tax-advantaged accounts

With the HSA account, you are eligible to open a taxadvantaged Health Savings Account (HSA). Both you and Mohawk contribute funds to an HSA, and you can use those funds to pay for eligible health care expenses, or keep them to build up long-term health care savings. If you enroll in the Copay plan, you can contribute to a Health Care Flexible Spending Account (FSA), but not the HSA.

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Both the HSA and Copay plans cover the same services and medications, and provide access to the same great network of providers.

The chart below provides a side-by-side comparison of the plans, including updated rates, deductibles and HSA contributions for 2025. For more information, view the Summary of Benefits and Coverage (SBC) for each plan on **mymohawkbenefits.com or visit mycigna.com.**

	HSA Plan		Copay Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Mohawk HSA Contribution*	\$500 Employee Only \$800 if you cover dependents*		Not Eligible for HSA	
Annual Deductible (individual/family)	\$2,100/\$4,400	\$3,300/\$6,600	\$1,300/\$2,900	\$3,300/\$6,600
Annual Out-of- Pocket Maximum (individual/family)	\$6,000/\$13,000	None	\$6,000/\$13,000	None
Coinsurance	20%	50%	20%	50%
Preventative Care (Covered at 100%)	No Charge		No Charge	
Office Visits • Primary Care • OBGYN • Specialist	\$35 after deductible (office visit) \$50 after deductible (specialist)	50% coinsurance after deductible	\$35 copay (office visit) \$50 copay (specialist) deductible does not apply	50% coinsurance after deductible