

2025 Business*EDGE*® Plan Changes

Effective at the group's renewal and beginning with the group's plan 2025 effective date

Habilitative physical, occupational, and speech therapy services will Medical benefit changes be a separate benefit for all plans. Outpatient services: physical therapy and occupational therapy will now cover 30 combined visits for rehabilitative services visits and 30 combined visits for habilitative services. Speech therapy will now cover 30 visits for rehabilitative services visits and 30 visits for habilitative services. For PPO/POS visit limits are combined in- and out-of-network. Private duty nursing will be a core benefit for all plans. Benefits will be limited to a maximum of 16 hours. Employee assistance visits are increasing and will now cover up to five visits per topic, per household member, for the core benefit. Previously, core plans provided three visits. Pre-authorization for the chiropractic care (spinal manipulation) benefit is no longer required. Pre-authorization for the maternity care benefit is no longer required. Health Savings Account (HSA) limits have been updated for 2025. Minimum deductible: \$1,650 for self-only coverage (\$50 increase from 2024) • \$3,300 for family coverage (\$100 increase from 2024) **Out-of-pocket maximum:** \$8,300 for self-only coverage (\$250 increase from 2024) \$16,600 for family coverage (\$400 increase from 2024) **HSA** contribution limits: \$4,300 for self-only coverage \$8,550 for family coverage Plus PPO Out-of-Area plans have been sunset. Plus PPO plans will be Sunset benefits and plans utilized in place of OOA plans. **New plans** Sentara Vantage 1500/25/20% Sentara Plus 0/25/20% Sentara POS 0/25/20% Sentara Plus 1000/20/0% Sentara Vantage 3000/35/25% Sentara POS 1000/25/30% Sentara Vantage 6600/30% Sentara Plus 1000/25/30% Sentara POS 1500/25/20% Sentara Plus 3000/35/25% Sentara Vantage HSA 3300/20% Sentara POS 3000/35/25% Sentara Vantage HSA 4000/0% Sentara Plus HSA 3300/20% Sentara POS 6600/30% Sentara Vantage HSA 6500/0% Sentara Plus HSA 4000/0% Sentara POS HSA 3300/20% Sentara Plus HSA 6500/0% Sentara POS HSA 4000/0%

Sentara POS HSA 6500/0%



Discontinued plans			
Sentara Vantage 20/40 Sentara Vantage 25/30% Sentara Vantage HSA 3200/0% Sentara Vantage Design 3000/20%	Sentara Plus 1500/25/20% Sentara Plus 3000/30/0% Sentara Plus 5000/40/0% Sentara Plus HSA 3200/0% Sentara Plus HSA 3200/10%	Sentara POS HSA 3200/0% Sentara POS HSA 6000/30%	
	Sentara Plus HSA 4000/20% Sentara Plus HSA 6000/30%		

Document key

Ded = deductible

AD = after deductible

IN = in network

OON = out-of-network

MH = mental health

MOOP = maximum out-of-pocket

Dollar amounts = copayments

Percentages = coinsurances

DME = durable medical equipment

IP = inpatient
OP = outpatient
PT/ST/OT = physical/speech/occupational therapy
ER = emergency room
UCC = urgent care centers
IOP = intensive outpatient program
PCP = primary care physician
Spec = specialist

Business EDGE Vantage plan changes Sentara Vantage 0/25/20% • IN MOOP: \$2.500/\$5.000 (previously 25/20) Habilitative services (PT/OT): \$25 Rehabilitative services (ST): \$50 Habilitative services (ST): \$50 • OP rehab: \$50 • Private duty nursing: 20% • OP therapies facility: 20% • OP diagnostic procedures, diagnostic tests, OP lab work: 20% • Emergency services/ambulance: 30% • IP hospital, transplants, skilled nursing, MH IP hospital, residential treatment: \$300/day/\$1,200 max • Prosthetic devices and DME: 20% • Chiropractic care: 20% Sentara Vantage 500/25/20% • Habilitative services (PT/OT/ST): 20% AD • Private duty nursing: 20% AD • OP diagnostic procedures: \$50 (Ded does not apply) • Diagnostic tests: \$50 (Ded does not apply) • OP lab work: \$50 (Ded does not apply) Non-emergency ambulance (ground/water): 20% AD • Non-emergency ambulance (air): 20% AD (IN or OON) • MH partial hospitalization/IOP and MH other OP services: 20% AD Prosthetic devices and DME: 20% AD Hospice: 20% AD Sentara Vantage 1000/25/20% • IN MOOP: \$5,000/\$10,000 Habilitative services (PT/OT/ST): \$50 (Ded does not apply) Private duty nursing: 20% AD • OP therapies IV infusion/respiration/inhalation PCP: \$25 (Ded does not apply)



Sentara Vantage 1000/25/20% (cont.)	OP therapies IV infusion/respiration/inhalation Spec: \$50 (Ded
	does not apply)
	OP therapies chemo/chemo drugs/radiation PCP: \$25 (Ded does)
	not apply)
	OP therapies chemo/chemo drugs/radiation spec: \$50 (Ded does not apply)
Sentara Vantage 1000/25/30%	Habilitative services (PT/OT/ST): 30% AD
3	Private duty nursing: 30% AD
	Pre-auth injectables/infused medications: 30% AD
	Non-emergency ambulance (ground/water): 30% AD
	Non-emergency ambulance (air): 30% AD (IN or OON)
	MH partial hospitalization/IOP/MH other OP services: 30% AD
Sentara Vantage 2000/25/30%	Habilitative services (PT/OT/ST): 30% AD
_	Private duty nursing: 30% AD
	Pre-auth injectables/infused medications: 30% AD
	Non-emergency ambulance (ground/water): 30% AD
	Non-emergency ambulance (air): 30% AD (IN or OON)
	MH partial hospitalization/IOP/MH other OP services: 30% AD
	Pump infusion sets and supplies: 30% AD
Sentara Vantage 3000/30/0%	Habilitative services (PT/OT/ST): No charge AD
	Private duty nursing: No charge AD
	Pre-auth injectables/infused medications: No charge AD
Sentara Vantage 4000/30/0%	Habilitative services (PT/OT/ST): No charge AD
	Private duty nursing: No charge AD
	Pre-auth injectables/infused medications: No charge AD
Sentara Vantage 4000/40/20%	• IN MOOP: \$8,650/\$17,300
	Habilitative services (PT/OT/ST): 20% AD
	Private duty nursing: 20% AD
	OP diagnostic procedures: \$80 AD
	Diagnostic tests: \$80 AD
	OP lab work: \$80 AD HOO: \$20 (Part deep rack area to) HOO: \$20 (Part deep rack area to) HOO: \$20 (Part deep rack area to)
	UCC: \$80 (Ded does not apply) Propries 1 Pad: \$150 per person
Contara Vantaga E000/2E/09/	Rx option 1 Ded: \$150 per person N MOOR: \$60,000 (\$140,000)
Sentara Vantage 5000/25/0% (previously 5000/40/0%)	• IN MOOP: \$9,000/\$18,000
(previously 3000/40/0/8)	PCP: \$25 (Ded does not apply) Specific (Pad does not apply)
	• Spec: \$50 (Ded does not apply)
	 Habilitative services (PT/OT/ST): No charge AD Private duty nursing: No charge AD
	OP therapies IV infusion/respiration/inhalation PCP: \$25 (Ded
	does not apply)
	OP therapies IV infusion/respiration/inhalation Spec: \$50 (Ded
	does not apply)
	OP therapies chemo/chemo drugs/radiation PCP: \$25 (Ded
	does not apply)
	OP therapies chemo/chemo drugs/radiation Spec: \$50 (Ded
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	does not apply)
	does not apply)Pre-auth injectables/infused medications: No charge AD
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Sentara Vantage HSA 3300/10% (previously 3200/10%) Sentara Vantage HSA 4000/20%	 IN Ded: \$3,300/\$6,600 IN MOOP: \$5,000/\$10,000 Habilitative services (PT/OT/ST): 10% AD Private duty nursing: 10% AD IN MOOP: \$6,750/\$13,500 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD
Sentara Vantage HSA 5000/0%	 IN MOOP: \$7,000/\$14,000 PCP: No charge AD Specialist: No charge AD Habilitative services (PT/OT/ST): No charge AD Private duty nursing: No charge AD Pre-auth injectables/infused medications: No charge AD UCC: No charge AD MH OP office visits PCP/spec/virtual consult: No charge AD
Sentara Vantage HSA 5000/30%	Habilitative services (PT/OT/ST): 30% ADPrivate duty nursing: 30% AD
Sentara Vantage HSA 6000/30%	 Habilitative services (PT/OT/ST): 30% AD Private duty nursing: 30% AD
Bus	siness <i>EDGE</i> Plus plans changes
Sentara Plus 500/25/20%	 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD OP diagnostic procedures: \$50 (Ded does not apply) Diagnostic tests: \$50 (Ded does not apply) OP lab work: \$50 (Ded does not apply) Non-emergency ambulance (ground/water): 20% AD Non-emergency ambulance (air): 20% AD (IN or OON) MH partial hospitalization/IOP/OP: 20% AD Prosthetic devices and DME: 20% AD Hospice care: 20% AD
Sentara Plus 2000/25/30%	 Habilitative services (PT/OT/ST): 30% AD Private duty nursing: 30% AD Pre-auth injectables/infused medications: 30% AD Dialysis: 30% AD Non-emergency ambulance (ground/water): 30% AD Non-emergency ambulance (air): 30% AD (IN or OON) MH partial hospitalization/IOP/MH other OP services: 30% AD Pump infusion sets and supplies: 30% AD
Sentara Plus 4000/40/20%	 OON MOOP: \$17,300/\$34,600 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD OP diagnostic procedures: \$80 AD Diagnostic tests: \$80 AD OP lab work: \$80 AD UCC: \$80 (Ded does not apply) Rx option 1 Ded: \$150 per person



Sentara Plus HSA 5000/0%	• IN MOOP: \$7,000/\$14,000
	• OON MOOP: \$14,000/\$28,000
	PCP: No charge AD
	Specialist: No charge AD
	Habilitative services (PT/OT/ST): No charge AD
	Private duty nursing: No charge AD
	Pre-auth injectables/infused medications: No charge AD
	UCC: No charge AD
	MH OP office visits PCP/spec/virtual consult: No charge AD
Bus	iness <i>EDGE</i> POS plan changes
Sentara POS 500/25/20%	
Sentara i OS 300/23/2076	 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD
	OP diagnostic procedures: \$50 (Ded does not apply)
	 Diagnostic tests: \$50 (Ded does not apply) OP lab work: \$50 (Ded does not apply)
	11.77
	Non-emergency ambulance (ground/water): 20% AD Non-emergency ambulance (ground/water): 20% AD
	Non-emergency ambulance (air): 20% AD (IN or OON) Multiportial hoppitalization (IOR/Multiportion OR population 20% AD)
	MH partial hospitalization/IOP/MH other OP services: 20% AD Droothetic devices and DMF: 20% AD
	Prosthetic devices and DME: 20% AD Noncient 20% AB
Sentara POS 1000/20/0%	Hospice: 20% AD Hospitative continue (PT/OT/CT): \$20 (Pad does not apply)
Sentara POS 1000/20/0%	Habilitative services (PT/OT/ST): \$20 (Ded does not apply) Private duty purples of \$50 (Pad does not apply)
Comtons DOC 4000/05/000/	Private duty nursing: \$50 (Ded does not apply)
Sentara POS 1000/25/20%	Specialist: \$50 (Ded does not apply) Ded does not apply)
	Rehabilitative services (PT/OT/ST): \$50 (Ded does not apply)
	Habilitative services (PT/OT/ST): \$50 (Ded does not apply)
	OP rehab \$50 (Ded does not apply)
	Private duty nursing: 20% AD
	OP therapies IV infusion/respiration/inhalation spec: \$50 (Ded
	does not apply)
	OP therapies chemo/chemo drugs/radiation spec: \$50 (Ded
Sentara POS 1000/25/20% (cont.)	does not apply)
, ,	Non-emergency ambulance (ground/water): 20% AD Non-emergency ambulance (ground/water): 20% AD
	Non-emergency ambulance (air): 20% AD (IN or OON) NOC: \$50 (Pad does not apply)
	UCC: \$50 (Ded does not apply) Multiportial hospitalization (IOD/MH, other OD continuous 20% AD)
	 MH partial hospitalization/IOP/MH other OP services: 20% AD Prosthetic devices and DME: 20% AD
Sentara POS 2000/25/30%	
36111.a1 a FO3 2000/23/30%	Habilitative services (PT/OT/ST): 30% AD Private duty purping: 20% AD
	Private duty nursing: 30% AD Pro auth injectables/infused medications: 30% AD
	 Pre-auth injectables/infused medications: 30% AD Non-emergency ambulance (ground/water): 30% AD
	,
	Non-emergency ambulance (air): 30% AD (IN or OON) MH partial hospitalization/IOP/MH other OP convices: 30% AD
	MH partial hospitalization/IOP/MH other OP services: 30% AD Dump influsion sets and supplies: 20% AD
	Pump infusion sets and supplies: 30% AD



Sentara POS 4000/40/20%	 OON MOOP: \$17,300/\$34,600 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD OP diagnostic procedures: \$80 AD Diagnostic tests: \$80 AD OP lab work: \$80 AD UCC: \$80 (Ded does not apply) Rx option 1 Ded: \$150 per person
Sentara POS 5000/25/0% (previously 5000/40/0%)	 IN MOOP: \$9,000/\$18,000 OON MOOP: \$18,000/\$36,000 OON benefits/coinsurance: 30% AD PCP: \$25 (Ded does not apply) Specialist: \$50 (Ded does not apply) Habilitative services (PT/OT/ST): No charge AD Private duty nursing: No charge AD OP therapies IV infusion/respiration/inhalation PCP: \$25 (Ded does not apply) OP therapies IV infusion/respiration/inhalation spec: \$50 (Ded does not apply) OP therapies chemo/chemo drugs/radiation PCP: \$25 (Ded does not apply) OP therapies chemo/chemo drugs/radiation spec: \$50 (Ded does not apply) Pre-auth injectables/infused medications: No charge AD UCC: No charge AD MH OP office visits (PCP/spec/virtual consult): No charge AD
Sentara POS HSA 3300/10% (previously 3200/10%)	 IN Ded: \$3,300/\$6,600 IN MOOP: \$5,000/\$10,000 OON MOOP: \$10,000/\$20,000 Habilitative services (PT/OT/ST): 10% AD Private duty nursing: 10% AD
Sentara POS HSA 4000/20%	 OON Ded: \$5,500/\$10,500 IN MOOP: \$6,750/\$13,500 Habilitative services (PT/OT/ST): 20% AD Private duty nursing: 20% AD
Sentara POS HSA 5000/0%	 IN MOOP: \$7,000/\$14,000 OON MOOP: \$14,000/\$28,000 PCP: No charge AD Specialist: No charge AD Habilitative services (PT/OT/ST): No charge AD Private duty nursing: No charge AD Pre-auth injectables/infused medications: No charge AD UCC: No charge AD MH OP office visits (PCP/spec/virtual consult): No charge AD