

A blue-tinted photograph of a university campus. In the foreground, a wide, curved brick walkway leads from the bottom center towards the middle ground. Several students are walking along this path. To the left of the path, there are trees and a small building. To the right, there's a grassy area with a young tree supported by stakes. In the background, more trees and campus buildings are visible under a clear sky. The overall scene is peaceful and academic.

Emory
+ You
YOUR BENEFITS

Annual Enrollment

OCTOBER 19–NOVEMBER 2, 2026



Emory's annual benefits enrollment period provides you with an opportunity to review your current benefits, make changes for the upcoming year, and update your beneficiaries.

Annual enrollment will take place from October 19–November 2, 2026. Changes are effective January 1, 2027.

- **For 2027, Emory will continue to offer three medical plans:**
 - o An HSA or POS plan with access to a new provider network, the Anthem Blue Cross Blue Shield network, and with AmeriBen serving as the medical plan administrator.
 - o A Kaiser Permanente plan with no plan design changes.
- **Medical Premiums:** Increase by an average of 6.8% for employees in salary bands 2 and 3; no change for salary band 1.
- **Dental and vision plans:** No increase to rates or changes to coverage. Dental coverage remains with Aetna and vision coverage with EyeMed.
- **HSA plan:** Deductible increases by \$50 for employee-only coverage and \$100 for all other coverage levels. HSA contribution limits will increase to \$4,500 for individuals and \$9,000 for families.
- **Supplemental life insurance:** Employees may increase coverage by \$20,000 and \$10,000 for spouses without evidence of insurability.
- **MetLife Legal Plan:** The new MetLife Legal Plus Parents extends legal coverage to parents, parents-in-law, and grandparents for an additional \$5.50 per month.
- **New Wellness Platform:** The platform transitions from Sharecare to AmeriBen Engage in 2027, including opportunities to earn medical plan wellness incentives and new redemption options for wellness dollars.

Key Updates to the HSA and POS Plans

- The HSA and POS plans will have a new provider network—the Anthem Blue Cross Blue Shield network, with AmeriBen serving as the medical plan administrator.
- The majority of Tier 1 and Tier 2 providers (more than 98%) are expected to remain in current tiers with Anthem Blue Cross Blue Shield network.
- For some services, Tier 1 medical copays for the POS plans will be reduced by \$10. Tier 1 coinsurance will be reduced by 5% for some services with the HSA and POS plans.
- HSA and POS plan members will have access to LiveHealth Online® 24/7 virtual care at a \$5 copay for urgent care, primary care, or behavioral health.

Key Updates to Pharmacy Benefits

- Prime Therapeutics will manage pharmacy benefits for HSA and POS plans, replacing CVS/Caremark.
- Access to major retail pharmacies continues, including CVS, Walgreens, Publix, Kroger, Walmart, and Costco, as well as Emory in-house pharmacies.
- Pharmacy options will expand to include home delivery through Amazon Pharmacy, with expedited delivery available for eligible medications and locations.
- The pharmacy formulary is changing, but most members will see no change in medication coverage or cost. If your medications are affected, you will be notified before your new coverage begins.

For more details, review the 2027 Benefits Guide on the Annual Enrollment website at www.hr.emory.edu/enrollment.

Medical Coverage

You have three medical plan options: the **HSA plan** and the **POS plan** administered by AmeriBen or the Kaiser Permanente plan. Rates for each option are based on your salary band and work status (full time or part time).

Medical Plan—Full Subsidy Contributions (for employees working at least 30 hours per week)							
		HSA Plan		POS Plan		Kaiser Permanente Plan	
		Monthly	Biweekly	Monthly	Biweekly	Monthly	Biweekly
SALARY-BASED RATE BAND 1 Less than \$60,000 annually*	Employee only	\$43.00	\$21.50	\$72.00	\$36.00	\$60.00	\$30.00
	Employee + child(ren)	\$147.00	\$73.50	\$236.00	\$118.00	\$200.00	\$100.00
	Employee + spouse	\$243.00	\$121.50	\$361.00	\$180.50	\$303.00	\$151.50
	Family	\$334.00	\$167.00	\$508.00	\$254.00	\$426.00	\$213.00
SALARY-BASED RATE BAND 2 Between \$60,000 to \$100,000 annually*	Employee only	\$50.00	\$25.00	\$85.00	\$42.50	\$71.00	\$35.50*
	Employee + child(ren)	\$175.00	\$87.50	\$281.00	\$140.50	\$238.00	\$119.00
	Employee + spouse	\$288.00	\$144.00	\$429.00	\$214.50	\$360.00	\$180.00
	Family	\$397.00	\$198.50	\$604.00	\$302.00	\$507.00	\$253.50
SALARY-BASED RATE BAND 3 More than \$100,000 annually*	Employee only	\$59.00	\$29.50	\$99.00	\$49.50	\$83.00	\$41.50
	Employee + child(ren)	\$205.00	\$102.50	\$330.00	\$165.00	\$278.00	\$139.00
	Employee + spouse	\$338.00	\$169.00	\$503.00	\$251.50	\$421.00	\$210.50
	Family	\$466.00	\$233.00	\$707.00	\$353.50	\$593.00	\$296.50

Medical Plan—Partial Subsidy Contributions (for employees working at least 20–29.9 hours per week)							
		HSA Plan		POS Plan		Kaiser Permanente Plan	
		Monthly	Biweekly	Monthly	Biweekly	Monthly	Biweekly
SALARY-BASED RATE BAND 1 < \$28.84 hourly/ \$60,000 annually*	Employee only	\$54.00	\$27.00	\$90.00	\$45.00	\$75.00	\$37.50
	Employee + child(ren)	\$184.00	\$92.00	\$295.00	\$147.50	\$250.00	\$125.00
	Employee + spouse	\$304.00	\$152.00	\$451.00	\$225.50	\$379.00	\$189.50
	Family	\$418.00	\$209.00	\$635.00	\$317.50	\$533.00	\$266.50
SALARY-BASED RATE BAND 2 \$28.84 to \$48.07 hourly/\$60,000 to \$100,000 annually*	Employee only	\$63.00	\$31.50	\$106.00	\$53.00	\$89.00	\$44.50
	Employee + child(ren)	\$219.00	\$109.50	\$351.00	\$175.50	\$298.00	\$149.00
	Employee + spouse	\$360.00	\$180.00	\$536.00	\$268.00	\$450.00	\$225.00
	Family	\$496.00	\$248.00	\$755.00	\$377.50	\$634.00	\$317.00
SALARY-BASED RATE BAND 3 > \$48.07 hourly/ \$100,000 annually*	Employee only	\$74.00	\$37.00	\$124.00	\$62.00	\$104.00	\$52.00
	Employee + child(ren)	\$256.00	\$128.00	\$413.00	\$206.50	\$348.00	\$174.00
	Employee + spouse	\$423.00	\$211.50	\$629.00	\$314.50	\$526.00	\$263.00
	Family	\$583.00	\$291.50	\$884.00	\$442.00	\$741.00	\$370.50

* Annual salary based on someone who works 40 hours per week. These medical plan rates do not reflect the monthly \$50 per person tobacco-use surcharge. Learn more about the tobacco surcharge and available reasonable alternatives for avoiding the surcharge, such as completing a tobacco cessation program, at the Emory Benefits website (hr.emory.edu/eu/benefits) or by contacting the Benefits and WorkLife Department at 404-727-7613.
* The rate for this plan was incorrectly stated on the rates chart included in the newsletter mailed to employee's homes. The correct rate for this plan is \$35.50.

Prescription Drugs

HSA and POS Plans			
Tier	Co-Insurance (HSA and POS)	30-Day Minimum (POS)	30-Day Maximum (HSA and POS)
ZERO—PREVENTIVE	0%	\$0	\$0
1—GENERIC	10%	\$10	\$25
2—PREFERRED BRAND	20%	\$30	\$75
3—NON-PREFERRED BRAND	30%	\$60	\$120
4—LIFESTYLE	40%	\$90	\$150
5—SELECT	40%	40% co-insurancce (no minimum or maximum)	

90-day supply is 2½ times the retail amount. GLP-1s available only in a 30-day supply.

HSA and POS Plan Resource

FlyteHealth: A virtual medical program that supports adult members with weight-related and cardiometabolic conditions. Select weight loss medications are covered only when prescribed by FlyteHealth or an approved Emory Healthcare specialist and are subject to plan requirements. Learn more at joinflyte.com/emory.

Kaiser Permanente Plan (filled at a KP pharmacy)				
Tier	30-Day Supply	31–60 Day Supply	61–90 Day Supply	Community Pharmacy* (first fill only)
1—PREVENTIVE GENERIC	\$0	\$0	\$0	\$0
2—PREFERRED GENERIC	\$10	\$20	\$30	\$10
3—PREFERRED BRAND	\$30	\$60	\$90	\$30
4—NON-PREFERRED BRAND	\$60	\$120	\$180	\$60
5—SPECIALTY	\$90	\$180	\$270	N/A

*Community pharmacy partners are Walgreens and RiteAid.

Dental Coverage

You have the option of two dental plans: the **Aetna Traditional Dental (PPO)** or **Aetna Dental Maintenance Organization (DMO)**. Rates are the same as last year.

Dental Plan—Full Subsidy Contributions (for employees working at least 30 hours per week)				
	PPO Plan		DMO Plan	
	Monthly	Biweekly	Monthly	Biweekly
EMPLOYEE ONLY	\$31.00	\$15.50	\$20.00	\$10.00
2-PERSON	\$69.00	\$34.50	\$40.00	\$20.00
FAMILY	\$113.00	\$56.50	\$66.00	\$33.00

Dental Plan—Partial Subsidy Contributions (for employees working between 20–29.9 hours per week)				
	PPO Plan		DMO Plan	
	Monthly	Biweekly	Monthly	Biweekly
EMPLOYEE ONLY	\$38.75	\$19.38	\$22.22	\$11.11
2-PERSON	\$83.00	\$41.50	\$45.96	\$22.98
FAMILY	\$139.00	\$69.50	\$72.58	\$36.29

Vision Coverage

Vision coverage is available through EyeMed Vision Care and rates are the same as last year.

Vision Plan—Full and Partial Subsidy Contributions (rates apply to both full- and part-time employees)		
	EyeMed Vision Care	
	Monthly	Biweekly
EMPLOYEE ONLY	\$12.28	\$6.14
EMPLOYEE + CHILD(REN)	\$24.50	\$12.25
EMPLOYEE + SPOUSE	\$23.28	\$11.64
FAMILY	\$36.08	\$18.04

This document summarizes benefits available to eligible employees and their eligible dependents. More detailed information is provided in the official Plan documents. Emory reserves the right to modify, suspend, change, or terminate the Plan(s) at any time for all or any group of participants, whether actively employed or retired. Emory does not guarantee, and does not have any responsibility for, tax, legal, or other implications of an employee's participation in any employee benefit plan.

Take Action

Learn More

Visit **www.hr.emory.edu/enrollment** to:

- Access the 2027 Benefits Guide and learn more about the benefits available to you.
- Use the ALEX® tool to help you better understand your benefit options so you can make smart, cost-effective choices.
- Register for a webinar to learn more about your 2027 benefits. Webinars will be offered on October 16, 21, and 29. A recording also will be available.

Enroll Online

During the annual enrollment period, October 19–November 2, 2026, log in to Self-Service at **leo.cc.emory.edu** to complete your enrollment. You will need your network ID and password. If you need assistance with this, call 404-727-7777.



Visit the annual enrollment website at **www.hr.emory.edu/enrollment** or scan the QR code.



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