Employee Contributions

		2019-2020			Maximum 2021-2022					
	News Corp POS II									
Tier	% of	Minimum	Maximum	% of	Minimum	Maximum (\$190k)				
	Salary	IVIITIITTUTT	Maximum	Salary	(\$30k)					
EE Only	2.25%	\$65	\$360	2.40%	\$58	\$364				
EE + Spouse	4.35%	\$145	\$780	4.85%	\$128	\$808				
EE + Child(ren)	3.75%	\$125	\$635	4.05%	\$103	\$649				
EE+ Family	5.70%	\$185	\$1,040	6.45%	\$168	\$1,160				
	News Corp CDHP									
Tier	% of Salary	Minimum	Maximum	% of Salary	Minimum (\$30k)	Maximum (\$190k)				
E Only	1.50%	\$40	\$225	1.70%	\$43	\$269				
EE + Spouse	3.00%	\$85	\$506	3.80%	\$95	\$602				
EE + Child(ren)	2.35%	\$70	\$380	2.95%	\$74	\$467				
EE+ Family	4.45%	\$120	\$690	5.25%	\$131	\$840				
	News Corp Basic Choice									
Tier	% of Salary	Minimum	Maximum	% of Salary	Minimum (\$30k)	Maximum (\$190k)				
EE Only	0.50%	\$15	\$75	0.60%	\$15	\$95				
EE + Spouse	1.00%	\$30	\$170	1.30%	\$33	\$206				
EE + Child(ren)	0.80%	\$25	\$125	1.00%	\$25	\$158				
EE+ Family	1.50%	\$40	\$230	1.75%	\$44	\$277				

Healthcare Plan Design

								-0				
	POS				CDHP				Basic Choice			
	2019-2020		Maximum 2021-2022		2019-2020		Maximum 2021-2022		2019-2020		Maximum 2021-2022	
	In-network	Out-of- network	In-network	Out-of- network	In-network	Out-of- Network	In-network	Out-of-network	In-network	Out-of-Network	In-network	Out-of- network
Employer Funding Amount	N/A	N/A	N/A	N/A	\$500 / \$1,000	\$500 / \$1,000	\$500/ \$1000	\$500 / \$1000	N/A	N/A	N/A	N/A
Deductible	\$600 / \$1,200	\$1,200 / \$2,400	\$700 / \$1,400	\$1,400 / \$2,800	\$1,500 / \$3,000	\$3,000 / \$6,000	\$2,000 / \$4,000	\$4,000 / \$8,000	\$3,000/\$6,000	N/A	\$3,000/\$6,000	N/A
PCP Visit	\$35 copay	40% after	\$40 copay	50% after								
Specialist Visit	\$50 copay	deductible	\$50 copay	deductible	20% after deductible	50% after deductible	20% after deductible	50% after deductible	30% after deductible	N/A	30% after deductible	N/A
Emergency Room	20% after \$300 copay	20% after \$300 copay	20% after \$300 copay	20% after \$300 copay				deddclible		deddclible		
Coinsurance	20%	40%	20%	50%	20%	50%	20%	50%	30%	N/A	30%	N/A
OOP Maximum	\$4,000 / \$8,000	\$8,000 / \$16,000	\$4,500 / \$9,000	\$9,000 / \$18,000	\$4,000 / \$8,000 (OOPM for individuals on a family contract will be embedded at \$7,900)	\$6,000 / \$12,000	\$5,000 / \$10,000 (OOPM for individuals on a family contract will be embedded at \$8,150)	φ0,2307 φ10,300	\$6,000 / \$12,000 (OOPM for individuals on a family contract will be embedded at \$8,150)	N/A	\$6,000 / \$12,000 (OOPM for individuals on a family contract will be embedded at \$8,150)	N/A
Retail Rx: Generic	\$10 c	copay	\$10 c	\$10 copay Preventive Rx at no co		Rx at no cost	Preventive Rx at no cost		Preventive Rx at no cost		Preventive Rx at no cost	
Retail Rx: Brand	30% coinsurance (\$30 min, 30% coinsurance (\$35 min, \$75 max) \$80max)		20% after deductible (\$75 max for generic and brand, \$100 max for non- formulary)		20% after deductible (\$80 max for generic and brand, \$105 max for non-formulary)		30% after deductible		30% after deductible			
Retail Rx: Non- formulary	50% coinsura \$100		50% coinsura \$105									
Mail Rx	2 times retail 2 times retail		2 times retail 2 times retail		2 times retail		2 times retail					
Rx OOP Maximum	\$3,000 / \$6,000 \$3,000 / \$6,000		′ \$6,000	Combined v	Combined with medical Combined with medical		Combined with medical		Combined with medical			

Canada Healthcare 2020

Plan design will remain essentially the same with some enhancement.

- Fertility: Increase fertility drug and treatment maximum to \$5,000 lifetime max
- Paramedical Practitioner: Removal of the \$50 per visit maximum; maintain \$1,000 per year for all practitioners combined
- Psychologists: Removal of the \$100 per visit maximum; maintain \$1,000 per year maximum. This also includes licensed registered counsellors; social workers, psychiatrists, psychotherapists, psychoanalysis, and clinical counsellors.
- Speech Therapy: Implement \$500 separate maximum per year (no per visit maximum)
- Add Transgender Core coverage \$10,000 annual maximum

Contributions will increase by 4%.

	Employee Contributions Effective January 1, 2020				
Coverage Status	Comprehensive Medical	Comprehensive Dental			
Family	\$45.25	\$26.52			
Member +1	\$27.42	\$11.63			
Single	\$13.72	\$5.81			