



COBRA

Annual Enrollment for PPO Plan areas

Annual Enrollment is **Oct. 14–Nov. 10**



Explore the benefits available to you and your family.

Log in at MyBenefits.WageWorks.com.

What's new?

You won't see any major updates to your plan for next year. If you're thinking of making any changes, head to MyBenefits.WageWorks.com to see your options for 2024. If you're happy with what you have, there's no need to complete an enrollment session.

Medical plan costs

We're holding cost increases to a minimum; dental and vision will not increase while medical plan costs will increase. If you're enrolled in an HMO plan, your monthly cost may increase more significantly.

Take your pick

These plans are offered in most areas. See the next page for details.

PPO Plan

The PPO Plan features simple copays for doctor visits, 90% in-network coverage for other services, low deductibles, and low out-of-pocket maximums. Prescriptions start at \$10 for generic drugs. And the plan also covers chiropractic care, infertility treatment, and certain transgender services. Learn more at One.Walmart.com/PPO.

HMO Plan

The Kaiser of California HMO makes it easier to predict your costs and focus on protecting and improving your overall health. It features an all-in-one network of providers that can deliver care efficiently, including HMO pharmacies. Keep in mind that the plan only covers care outside the network for medical emergencies. Learn more at One.Walmart.com/HMO.

Saver Plan

With the Saver Plan, you can use a personal Health Savings Account (HSA) to help pay for eligible medical expenses. Plus you can use it for IRS-approved dental, vision, and prescription drug expenses. Learn more at One.Walmart.com/Saver.



Medical plans

Check out your options below and choose the coverage that's right for you and your family.

2024 medical plan options		PPO Plan	HMO Plan	Saver Plan
		Simple copays, low deductibles and maximums, plus features like chiropractic care and infertility treatment.	Convenient, predictable health care provided by Kaiser of California.	Put money in a personal health savings account (HSA) for this year's expenses—or for future needs.
Annual deductible <i>Except preventive care. In-network coverage shown.</i>	Individual only	\$300	\$1,000	\$3,000
	Individual + dependents	\$600	\$2,000	\$6,000
Annual out-of-pocket maximum <i>In-network coverage shown.</i>	Per person	\$1,500	\$6,550	\$6,650
	Entire family	\$3,000	\$13,100	\$13,300
Care and services <i>In-network coverage shown.</i>	Including doctor visits, diagnostic tests, hospitalization, mental health	\$15 copay: <i>primary care</i> \$25: <i>specialists</i> 90% covered after deductible: <i>other care</i>	\$35 copay: <i>primary care</i> \$60: <i>specialists</i> 75% covered after deductible: <i>other care</i>	75% covered after deductible
Virtual care <i>In-network coverage shown.</i>	Video doctor visits for medical, mental health needs	Teladoc \$15 copay – medical \$25 copay – mental	No charge	Doctor On Demand by Included Health \$0 copay
Pharmacy <i>Network options vary by plan.</i>	Generic drugs	\$10 copay	\$10 copay	\$4 after deductible***
	Brand-name drugs	\$30 copay	\$50 copay	25% of allowed cost* or \$50, whichever is greater after deductible***
	Specialty drugs	\$30 copay pharmacy benefit	25%, \$250 maximum	20% of allowed cost* or \$50, whichever is greater after deductible**

*The allowed cost of prescription drugs is determined by the plan's pharmacy benefit manager, OptumRx.

**Available only through Walmart Specialty Pharmacy.

***Maintenance medications available from Walmart or Sam's Club pharmacy only.



Vision

Get coverage for eye care, glasses, and contacts.



Dental

Get affordable dental care from checkups to major work—including braces.



Looking for rates for the medical, vision, and dental plans?

Go to [MyBenefits.WageWorks.com](https://www.MyBenefits.WageWorks.com) for complete details. You'll also find more information on your COBRA notice.



Questions, answered.

If you have questions about...	Website	Phone
Benefits, medical claims, or care management	Saver Plan and PPO Plan: Aetna.com HMO Plans: KP.org	Aetna (Saver Plan and PPO Plan): 855-548-2387 Kaiser CA (HMO Plan): 800-464-4000
Finding a network doctor	Saver Plan and PPO Plan: IncludedHealth.com/Walmart HMO Plans: KP.org	Included Health (Saver Plan and PPO Plan): 800-941-1384 Kaiser CA (HMO Plan): 800-464-4000
Pharmacy benefits	Saver Plan: One.Walmart.com/Prescriptions PPO Plan: Aetna.com HMO Plans: KP.org	Saver Plan: OptumRx: 844-705-7493 Aetna (PPO Plan): 855-548-2387 Kaiser CA (HMO Plan): 800-464-4000
Health savings account (Saver Plan)	HealthEquity.com	HealthEquity: 866-296-2860
Vision plan	One.Walmart.com/Vision	VSP: 866-240-8390
Dental plan	One.Walmart.com/Dental	Delta Dental: 800-462-5410
My Mental Health Resources	Walmart.LyraHealth.com	Lyra: 800-825-3555 , 24/7
When you're eligible for benefits or how to enroll	MyBenefits.WageWorks.com	WageWorks, COBRA Administrator: 800-570-1863



Explore it all at [MyBenefits.WageWorks.com](https://www.mybenefits.wageworks.com).





A few more things...

Here are some important legal documents that let you know about your rights as a Plan participant.

You should also share these notices with any family members who are covered under your Plan. If they live in a different household, you can ask for these notices to be sent to a different address. You and your family members can also ask for a free paper copy of these notices by calling People Services at **800-421-1362**.

Valued Plan Participant

THE ASSOCIATES' HEALTH AND WELFARE PLAN (AHWP) RESPECTS THE DIGNITY OF EACH INDIVIDUAL WHO PARTICIPATES IN THE PLAN.

The AHWP does not discriminate on the basis of race, color, national origin, sex, age, or disability and strictly prohibits retaliation against any person making a complaint of discrimination. Additionally, we gladly provide our participants with language assistance, auxiliary aids and services at no cost. We value you as our participant and your satisfaction is important to us.

If you need such assistance or have concerns with your Plan services, please call the number on the back of your plan ID card. If you have any questions or concerns, please use one of the methods below so that we can better serve you.

عربي
خدمات الترجمة الفورية متاحة دون تكلفة. 1-800-421-1362.

မြန်မာ
စကားပြန်ဝန်ဆောင်မှုများကို အခမဲ့ ရရှိနိုင်ပါသည်။ 1-800-421-1362

汉语普通话
翻译服务免费提供。1-800-421-1362.

فارسی
خدمات مترجم بدون هیچ هزینه ای در دسترس می باشد. 1-800-421-1362.

Français
Des services d'interprètes sont disponibles sans frais.
1-800-421-1362.

kreyòl ayisyen
Gen Sèvis entèprèt ki disponib gratis. 1-800-421-1362.

日本人
通訳サービスは無料でご利用いただけます。1-800-421-1362.

한국어
통역 서비스를 무료로 이용하실 수 있습니다. 1-800-421-1362.

Polski
Usługi tłumacza dostępne są bez żadnych kosztów.
1-800-421-1362.

Availability of Summary of Health Information

As an associate, the health benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your family in the case of illness or injury.

Your plan offers a series of health coverage options. Choosing a health coverage option is an important decision. To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about any health coverage option in a standard format, to help you compare options. The SBC is available on One.Walmart.com/Health. A paper copy is also available, free of charge, by calling [800-421-1362](tel:800-421-1362).

For assistance, call the number on the back of your plan ID card.

To learn about or use our grievance process, contact People Services at [1-800-421-1362](tel:1-800-421-1362)

To file a complaint of discrimination, contact the U.S. Department of Health and Human Services, Office of Civil Rights:

- **Phone:** [1-800-368-1019](tel:1-800-368-1019) or [1-800-537-7697](tel:1-800-537-7697) (TDD)
- **Website:** https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf
- **Email:** OCRComplaint@hhs.gov

Interpreter Services are available at no cost. [1-800-421-1362](tel:1-800-421-1362)

Português (Brasil)
Serviços de intérprete estão disponíveis grátis. 1-800-421-1362.

ਪੰਜਾਬੀ
ਦੇਵਾਸ਼ੀਆ ਸੇਵਾਵਾਂ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ। 1-800-421-1362.

Română
Serviciile de interpretariat sunt disponibile gratuit. 1-800-421-1362.

Русский
Переводческие Услуги оказываются бесплатно. 1-800-421-1362.

Af-Soomaali
Adeegyada Turjumaanka waxaa lagu heli karaa kharash la'aan.
1-800-421-1362.

Español
Los servicios de interpretación están disponibles de manera gratuita. 1-800-421-1362.

Kiswahili
Huduma za tafsiri zipo bila malipo. 1-800-421-1362.

Tiếng Việt
Dịch Vụ Thông Dịch có sẵn miễn phí. 1-800-421-1362.

Women's Health and Cancer Rights Act

As required by the Women's Health and Cancer Rights Act (WHCRA) of 1998, Walmart-provided medical plans provide coverage for:

1. All stages of reconstruction of the breast on which the mastectomy has been performed;
2. Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
3. Prosthesis and physical complications of mastectomy, including lymphedemas, in a manner determined in consultation with the attending physician and the patient.

Such coverage may be subject to annual deductibles and coinsurance provisions as may be deemed appropriate and are consistent with those established for other benefits under the plan or coverage. Written notice of the availability of such coverage shall be delivered to the participant upon enrollment and annually thereafter.