## **Leidos Benefits Summary Plan Description**

## Comparing the Healthy Focus Medical Plans

The chart below provides some basic plan information about the Leidos self-insured plans.

	Healthy Focus Basic Plan		Healthy Focus Essential Plan		Healthy Focus Advantage Plan		Healthy Focus Premier Plan	
	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>
Annual Deductible <sup>3</sup>								
• Employee Only	\$4,000	\$8,000	\$2,000	\$4,000	\$1,500	\$3,000	\$1,500	\$3,000
• Family	\$8,000	\$16,000	\$4,000	\$8,000	\$3,000	\$6,000	\$3,000	\$6,000
Annual Out- of-Pocket (OOP) Maximum³ (includes deductible)								
Employee     Only	\$6,750	\$13,000	\$5,000	\$10,000	\$3,200	\$6,400	\$1,500	\$3,000
• Family	\$13,500	\$27,000	\$10,000	\$20,000	\$6,400	\$12,800	\$3,000	\$6,000
Embedded OOP	\$8,550 individual within family	N/A	\$8,550 individual within family	N/A	N/A	N/A	N/A	N/A
Office Visits – Preventive Care	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	Covered at 100% after deductible
Office Visits – Non- Preventive Care	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Office Visits – Well-Child Preventive Care	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	You pay 50% after deductible	Covered at 100% (deductible does not apply)	Covered at 100% after deductible
Emergency Room	You pay 50% after deductible	You pay 50% after deductible	You pay4 35% after deductible	You pay4 35% after deductible	You pay4 20% after deductible	You pay4 20% after deductible	You pay 0% after deductible	You pay 0% after deductible
Hospital Admission	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible

The information in this document is proprietary to Leidos.

	Healthy Focus Basic Plan		Healthy Focus Essential Plan		Healthy Focus Advantage Plan		Healthy Focus Premier Plan	
	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>	In- Network <sup>1</sup>	Out-of- Network <sup>2</sup>
Lab and X-ray	You pay 50% after deductible for non-routine lab & x- ray services provided outside the office visit	You pay 50% after deductible	You pay 35% after deductible for non- routine lab & x-ray services provided outside the office visit	You pay 50% after deductible	You pay 20% after deductible for non-routine lab & x-ray services provided outside the office visit	You pay 50% after deductible	You pay 0% after deductible for non-routine lab & x-ray services provided outside the office visit	You pay 0% after deductible
Outpatient Surgery	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Routine Mammograms (Over age 40)	Covered at 100%; maximum one per calendar year	You pay 50% after deductible	Covered at 100%: maximum one per calendar year	You pay 50% after deductible	Covered at 100%; maximum one per calendar year	You pay 50% after deductible	Covered at 100%; maximum one per calendar year	Covered at 100% after deductible
Prostate Screening (Over age 40)	Covered at 100%; maximum one per calendar year	You pay 50% after deductible	Covered at 100%: maximum one per calendar year	You pay 50% after deductible	Covered at 100%; maximum one per calendar year	You pay 50% after deductible	Covered at 100%; maximum one per calendar year	Covered at 100% after deductible
Skilled Nursing Facility	You pay 50% after deductible for up to 60 days per confinement	You pay 50% after deductible for up to 60 days per confinement	You pay 35% after deductible for up to 60 days per confinement	You pay 50% after deductible for up to 60 days per confinement	You pay 20% after deductible for up to 60 days per confinement	You pay 50% after deductible for up to 60 days per confinement	You pay 0% after deductible for up to 60 days per confinement	You pay 0% after deductible for up to 60 days per confinement
Home Health Care (maximum visits combined with Private Duty Nursing)	You pay 50% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 50% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 35% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 50% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 20% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 50% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 0% after deductible for up to 100 visits per year, up to 4 hours = 1 visit	You pay 0% after deductible for up to 100 visits per year, up to 4 hours = 1 visit
Hospice Care	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Outpatient Rehabilitation Physical and Speech Therapy (as medically necessary)	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible



	Healthy Focus		Healthy Focus		Healthy Focus		Healthy Focus	
	Basic Plan		Essential Plan		Advantage Plan		Premier Plan	
	In-	Out-of-	In-	Out-of-	In-	Out-of-	In-	Out-of-
	Network <sup>1</sup>	Network <sup>2</sup>	Network <sup>1</sup>	Network <sup>2</sup>	Network <sup>1</sup>	Network <sup>2</sup>	Network <sup>1</sup>	Network <sup>2</sup>
Durable	You pay	You pay	You pay					
Medical	50% after	50% after	35% after	50% after	20% after	50% after	0% after	0% after
Equipment	deductible	deductible	deductible	deductible	deductible	deductible	deductible	deductible
Hearing Aid Exam	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Hearing Aids	You pay	You pay	You pay					
\$2,500 max every	50% after	50% after	35% after	35% after	20% after	20% after	0% after	0% after
3 years	deductible	deductible	deductible	deductible	deductible	deductible	deductible	deductible
Mental Health & Substance Abuse – Outpatient	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Mental Health and Substance Abuse – Inpatient	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Autism Spectrum Disorder Treatment	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Applied	You pay	You pay	You pay					
Behavioral	50% after	50% after	35% after	50% after	20% after	50% after	0% after	0% after
Analysis	deductible	deductible	deductible	deductible	deductible	deductible	deductible	deductible
Mental Health and Substance Abuse – Inpatient	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Autism Spectrum Disorder Treatment	You pay 50% after deductible	You pay 50% after deductible	You pay 35% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible	You pay 0% after deductible	You pay 0% after deductible
Applied	You pay	You pay	You pay					
Behavioral	50% after	50% after	35% after	50% after	20% after	50% after	0% after	0% after
Analysis	deductible	deductible	deductible	deductible	deductible	deductible	deductible	deductible

<sup>&</sup>lt;sup>1</sup>Covered services received from a network provider will be paid based on the negotiated rate.

<sup>&</sup>lt;sup>4</sup>For non-emergent use of the emergency room, employee pays 50% after deductible.



<sup>&</sup>lt;sup>2</sup>Covered services received from an out-of-network provider will be paid based on the reasonable and customary (R&C) limit.

<sup>&</sup>lt;sup>3</sup>In-Network covered services apply only to the in-network deductible and OOP maximum. Out-of-network covered services apply only to the out-of-network deductible and OOP maximum.