Consumer Driven Health Plan

Frequently Asked Questions

2027 plan year • Effective January 1, 2027

What is a Consumer Driven Health Plan (CDHP)?

The Consumer Driven Health Plan (CDHP) has a higher deductible and lower premiums than our current PPO plan. All services are subject to the deductible first, except for preventive care and certain preventive medications. This means you will pay 100% of the allowed charges until the deductible is satisfied. Once the deductible is met, your share of the expenses covered depends on the service and provider network. Refer to the Summary of Benefits and Coverage for applicable coinsurance. After the out-of-pocket maximum is reached, all covered services will be paid by the insurance at 100% for the remainder of the calendar year.

Why choose the CDHP option?

In exchange for a higher deductible, the CDHP has lower premiums and offers a Health Savings Account (HSA) to help pay for qualified medical expenses such as deductibles and coinsurance on a tax-free basis. CHPW will contribute up to $500 annually for an individual or $1,000 annually for a family to your HSA to help offset the higher deductible. You may also contribute to your HSA through payroll deductions on a tax-free basis up to the IRS maximums allowed. (See the Health Savings Account FAQ for more details.)

How are prescriptions covered under the CDHP?

The cost of prescriptions counts towards your medical deductible on the CDHP plan. You will pay the full cost of your medications until you meet the deductible. The deductible is waived for certain preventive medications including a number of asthma, cholesterol, diabetes and heart medications. A current list of preventive medications under the CDHP is posted on the benefits portal. If you take prescription drugs, it is recommended that you ask your doctor if there are less expensive alternatives that would have the same result.

What if I want to choose the CDHP option but my spouse is covered under a non-CDHP plan?

IRS guidelines limit use of tax-free plans such as Health Savings Accounts (HSA) and Flexible Spending Accounts (FSA). If you are enrolled in the CDHP and have an HSA, you cannot also be covered by your spouse's non-CDHP plan. In addition, your spouse cannot participate in a general-purpose FSA for healthcare related expenses. A limited purpose FSA is allowed. For more information, see the benefit guide located on the benefits portal.

What if I want to have my Dependent Care FSA?

If you enroll in the CDHP you are eligible to participate in the FSA Dependent Care for day care expenses only.

Please refer to the summary plan description (SPD) and CHPW policies for complete benefit provisions. In the event of a discrepancy, the SPD and plan documents govern plan administration.

How does the deductible work under the CDHP?

Your deductible is the amount you'll pay out-of-pocket each year before your insurance provider begins to cover any medical costs (excluding any applicable preventive care services/medications). The CDHP plan deductibles are $1,750 for employee only coverage, and $3,500 for family-level coverage. Office visits, virtual visits, medical services, and prescription medications all apply towards the CDHP plan deductible.

How does the out-of-pocket maximum work on the CDHP?

The CDHP has an embedded out-of-pocket maximum of $4,000 per person and $8,000 per family. Once a family member reaches their $4,000 individual maximum, the plan pays 100% of that person's covered in-network expenses for the rest of the calendar year. Once the family's combined eligible out-of-pocket expenses reach $8,000, the plan pays 100% of covered in-network expenses for all covered family members for the rest of the calendar year. Family members do not each have to reach their individual maximum for the family maximum to be met.

How does the deductible work with family coverage on the HDHP?

The CDHP has an aggregate family deductible of $3,500. This means the full family deductible must be met before the plan begins paying for services subject to the deductible for any covered family member. One person or several family members combined can meet this amount. Once the family deductible is met, the plan begins sharing the cost of covered services for everyone enrolled in family coverage.

What happens if I terminate employment?

You may elect to continue coverage under the CDHP plan through COBRA. CHPW contributions to your HSA will stop, however you may continue to contribute to the HSA if you are covered by a CDHP. The HSA is your account and goes with you when you leave CHPW.

Where can I get more information about the HSA?

See the Easy Guide to Understanding Your CDHP from Human Resources.

Please refer to the summary plan description (SPD) and CHPW policies for complete benefit provisions. In the event of a discrepancy, the SPD and plan documents govern plan administration.