

Choosing Your Medical Plan Option and Health Care Company

Effective January 1, 2020

The Medical Plan has two options (options 1 and 2) and two health care companies (Aetna and Cigna). You will choose your option and your health care company at the time you enroll. This tip sheet details those choices along with what happens if you do not enroll during Annual Benefits enrollment.

There are several customized resources available to help you choose on the Benefits Web Center through **My Health**. For more information, see the Tools to Help You Choose Tip Sheet on **My Health**.

Two Medical Plan Options

- Option 1 has higher payroll contributions but lower maximums. Option 2 has lower payroll contributions but higher maximums. Otherwise, both options provide the same coverage.
- The best way to choose your Medical Plan is to use the modeling tools available during your enrollment period on the Benefits Web Center through **My Health** to get the most accurate picture of your total costs under each option.
- If you typically use health care services often, or if you or a family member has a chronic condition, you know about an upcoming surgery or significant procedure or will use the plan often, you might want to consider enrolling in Option 1. Even though payroll costs are higher for this option, your annual out-of-pocket costs may be lower than if you choose Option 2.
- If you don't usually visit the doctor often except for preventive and primary care, and are generally healthy, you might want to consider enrolling in Option 2. It will cost you less in payroll contributions and still provides you with coverage in case of an unexpected illness or injury. But you could experience higher costs if you have unexpected health care expenses, so make sure you would be able to manage financially should that occur.

My Health is your centralized online resource for benefits information. Type "**go/myhealth**" into your intranet browser (for the best user-experience, use Internet Explorer or Firefox browsers).

Health Care Companies

- You can choose between two health care companies — either Aetna or Cigna. Both companies offer the same medical plan options at the same cost. And both companies offer extensive nationwide provider networks, Virtual Doctor Visits, well-established clinical programs, and comprehensive tools and resources to help you research and understand your treatment options, including Treatment Decision Support.
- Since their networks do differ, ask yourself: "Does my current doctor(s) participate in either — or both — of the health care companies' provider networks?" To find out or to find a doctor in the provider network of the health care company you are not enrolled in, go to **My Health** > Benefits Enrollment > Deciding between Aetna and Cigna for 2020?.
- When choosing your health care company, you should also review their health management programs and services (e.g., health coaching, condition management and health-related tools and resources). Some might be a better fit for your specific needs. Both companies offer many online tools to help you understand and keep track of your health care, including explanation of benefits

(EOB) statements, research tools, doctor ratings and treatment cost estimation tools.

- You will go to mycigna.com to complete your online Wellness Assessment between January 1 and November 22, 2019 – even if UnitedHealthcare (UHC) is your 2019 health care company or if you select Aetna as your health care company for 2020.

Whether you choose Option 1 or Option 2, Aetna or Cigna, your JPMC Medical Plan includes the same prescription drug coverage administered by CVS Caremark and a Medical Reimbursement Account (MRA) funded by JPMorgan Chase when you and your covered spouse/domestic partner complete certain wellness activities.

What If I Currently Am Enrolled in the JPMC Medical Plan and Don't Elect a New Health Care Company During Annual Benefits Enrollment?

If you are enrolled in the Medical Plan as of December 31, 2019 and do not take any action during Annual Enrollment, we will automatically map your 2019 medical elections to 2020 so that you and any covered family members have medical coverage on January 1, 2020. If you do not take action during Annual Enrollment, your elections will map as follows:

- If you are enrolled in Cigna for 2019, you will remain with Cigna for 2020.
- If you are enrolled in UHC for 2019, you will be enrolled in either Aetna or Cigna for 2020, depending on your state of residence. The default mapping to Aetna and Cigna by state is based on several factors, including the carrier's network breadth in that state as well as the discounts they were able to negotiate in that state. The default health care company for your state will appear in the Benefits Web Center during Annual Enrollment.
- Your medical plan options will **not** change, only your health care company (i.e., if you are enrolled in Option 1 with family coverage you will remain in Option 1 with family coverage). Your election of debit card versus automatic claim payment for your Medical Reimbursement Account (MRA) / Health Care Spending Account (HCSA) will also carry over.

Reminder: Any elections to participate in the Health Care and Dependent Care Spending Accounts will **not** map over; you are required to re-elect this benefit each year.

Contacts

Additional information to help you choose your benefits during annual enrollment and use them throughout the year can be found on **My Health**. If you have additional questions or need more information, see the tip sheet, **Who to Call With Benefits Questions**.

*For plan details, use the 2020 Annual Enrollment Bulletin and Summary Plan Descriptions (SPDs) found on **My Health** > Benefits Enrollment.*

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