



2026 PLAN YEAR · OPEN ENROLLMENT

2026 Employee Benefits

Northstar Health Group

01 / WELCOME

Coverage that takes care of the people who take care of others

Northstar's benefits are designed for a workforce that knows healthcare from the inside. This year we've expanded mental-health access, added a fourth medical option for families with high ongoing needs, and lowered specialty-drug costs across every plan.

Take the time to read this before open enrollment closes. The plan that was right for you last year may not be the best fit now — premiums, networks, and your own care needs all shift. The comparison on the following pages is the fastest way to see the differences side by side.

If you have questions the portal can't answer, the benefits team holds walk-in hours every Tuesday and Thursday during enrollment, plus a dedicated line staffed through the deadline.

DATES TO KNOW

Open enrollment opens	October 27, 2025
Benefits fair (virtual)	November 6, 2025
Open enrollment closes	November 19, 2025
Coverage begins	January 1, 2026
Last day to add dependents	December 1, 2025

02 / YOUR MEDICAL PLANS

Choose the plan that fits your life

Northstar offers four medical plans this year. Three run on our broad national network; the new Care+ plan adds enhanced coverage for ongoing and specialty care. Every plan includes \$0 virtual primary care and expanded behavioral-health visits.

HMO **Core HMO** **\$88** / mo employee

Predictable copays, lowest paycheck cost.

A simple, low-premium plan for people who use in-network care and prefer fixed copays over coinsurance math.

Annual deductible (individual)	\$1,750
Out-of-pocket maximum	\$6,250
Primary care visit	\$25 copay
Behavioral health visit	\$25 copay
Virtual primary care	\$0

PPO **Choice PPO** **\$172** / mo employee

See anyone, referrals never required.

The PPO gives you the widest freedom of choice: any provider, in or out of network, with no referrals. It carries the highest premium of the standard plans, balanced by a low deductible and strong out-of-network coverage.

It suits households juggling multiple specialists, frequent travel, or care spread across different health systems. Out-of-network providers are reimbursed at the plan's allowed amount; you're responsible for the balance above it, so confirm rates in advance for planned care.

Annual deductible (individual)	\$800
Out-of-pocket maximum	\$4,250
Primary care visit	\$20 copay
Specialist visit	\$40 copay
Out-of-network coverage	Yes, 60%
Virtual primary care	\$0

HDHP + HSA

Saver HDHP

\$49 / mo employee

Lowest premium, tax-free HSA, employer match.

A high-deductible plan paired with a Health Savings Account. Northstar contributes \$800 a year for individuals and \$1,600 for families, and matches your own contributions dollar-for-dollar up to an extra \$500.

Because the HSA balance rolls over and is never taxed when used for care, this plan rewards lower-utilization years and anyone treating the account as long-term, tax-advantaged savings for future medical costs.

Annual deductible (individual)	\$3,300
Out-of-pocket maximum	\$5,800
Northstar HSA contribution	\$800 / yr
Employer match	Up to \$500
Preventive care	\$0

PPO PLUS **Care+ Enhanced** **\$214** / mo employee

Built for families managing ongoing or specialty care.

New for 2026, Care+ is for households with significant, predictable care needs — chronic conditions, ongoing specialty treatment, or several family members under active care. It carries the highest premium and the lowest out-of-pocket exposure of any Northstar plan.

Care+ includes dedicated care coordination: a named nurse navigator who helps manage referrals, prior authorizations, and specialty pharmacy, so families spend less time fighting the system. Specialty drugs are capped per fill rather than charged as a percentage.

If your household routinely hits its out-of-pocket maximum, the higher premium is often offset by the lower cost share and the coordination support. The cost estimator in the portal will show whether that’s true for you.

Annual deductible (individual)	\$400
Out-of-pocket maximum	\$3,000
Primary care visit	\$15 copay
Specialist visit	\$30 copay
Specialty drugs	\$150 / fill cap
Care navigator	Included

03 / SIDE BY SIDE

Plan comparison

Every plan, side by side. Your true annual cost depends on how much care you use — run your numbers through the estimator before deciding on premium alone.

Feature	Core HMO	Choice PPO	Saver HDHP	Care+
Monthly premium (employee)	\$88	\$172	\$49	\$214
Deductible (individual)	\$1,750	\$800	\$3,300	\$400
Deductible (family)	\$3,500	\$1,600	\$6,600	\$800
Out-of-pocket max (individual)	\$6,250	\$4,250	\$5,800	\$3,000
Primary care visit	\$25	\$20	After ded.	\$15
Specialist visit	\$50	\$40	After ded.	\$30
Behavioral health visit	\$25	\$20	After ded.	\$15
Urgent care	\$60	\$50	After ded.	\$40
Emergency room	\$350	\$300	After ded.	\$250
Generic prescriptions	\$10	\$10	After ded.	\$5
Specialty prescriptions	30%	25%	After ded.	\$150 cap
Out-of-network coverage	No	Yes (60%)	Yes (50%)	Yes (70%)
HSA eligible	No	No	Yes	No
Employer HSA contribution	—	—	\$800	—
Care navigator	No	No	No	Yes
Virtual primary care	\$0	\$0	\$0*	\$0

04 / GETTING STARTED

How to enroll

1

Sign in to the Northstar benefits hub

Visit hub.northstarhealth.example and log in with your network credentials. New hires activate their account from the welcome email.

2

Run the cost estimator

Before comparing plans by premium, enter last year's approximate usage. The estimator projects total annual cost for each plan including the HSA match, which often changes the ranking.

3

Select your plans

Choose medical, dental, vision, and any voluntary coverage. If you want Care+, confirm your providers participate — the network is the same, but the navigator program enrolls separately.

4

Set your HSA or FSA

Elections don't roll over year to year. Set your contribution amount even if your plan is unchanged, or you'll contribute \$0 by default.

5

Confirm dependents and documents

Add or remove dependents and upload required documentation before December 1. Undocumented dependents are dropped at year-end.

6

Submit before November 19

Your elections are final only after you submit and reach the confirmation screen. Missing the deadline defaults you to Core HMO, employee-only, with no HSA contribution.

05 / REQUIRED NOTICES

Important plan information

These notices are required and apply to all Northstar medical plans. This guide summarizes coverage; where it differs from the official plan documents and Summary of Benefits and Coverage, those documents govern.

Summary of Benefits and Coverage (SBC)

A standardized SBC for every plan is in the benefits hub and available free on request. It follows the federal format and includes coverage examples so you can compare plans on equal footing.

Women's Health and Cancer Rights Act

For members who have had or will have a mastectomy, the plan covers reconstruction, prostheses, and treatment of physical complications at all stages, determined in consultation with the attending physician, subject to plan deductibles and coinsurance.

Newborns' and Mothers' Health Protection Act

Plans generally may not limit a hospital stay for childbirth to less than 48 hours for a vaginal delivery or 96 hours for a cesarean, and may not require a provider to obtain authorization for stays within those limits.

Mental Health Parity

Mental-health and substance-use disorder benefits are provided at parity with medical and surgical benefits, meaning cost sharing and treatment limits are no more restrictive than those applied to comparable medical care.

HIPAA Notice of Privacy Practices

Northstar protects your health information and uses it only as the law permits to run the plan. The full notice explains your rights, including access and amendment, and how to file a complaint at no cost.

Premium assistance under Medicaid and CHIP

If you or your children qualify for Medicaid or CHIP and are eligible for Northstar coverage, your state may help pay your premiums. Ask the benefits team for the current state notice.