



2026 Benefit FAQs

What is changing for 2026?

There are no major plan changes occurring in 2026 that will affect your usage of our plans. There is an increase in premiums for 2026. In order to help reduce the impact of the increases, we have changed our deductions for Medical and Dental to all 26 pay periods per year, rather than the current 24 pay periods. Williamson Health still covers most of employees' benefits premiums ranging from \$500-\$2,000 per month depending on the plan type.

Exception Process:

While Williamson offers an exception process to consider Tier 2 providers as Tier 1 in situations where no Tier 1 provider is available, there is no exception process for Emergency Room visits, ambulance services, or for reclassifying a Tier 3 provider as Tier 2 or Tier 1. Because emergency situations often require visiting the nearest ER regardless of network status, these cases do not qualify for an exception. This approach is standard across most health plans nationwide.

Our medical plan is self-funded, meaning Williamson directly pays employee medical claims. When employees choose Tier 1 providers, it helps reduce overall plan costs, allowing us to offer lower copays and coinsurance rates to everyone enrolled in our plans.

Out of Area Dependents:

Williamson Health offers enhanced medical coverage for out of area dependents attending college or university more than 100 miles from Franklin, TN (Zip Code: 37067). Eligible dependents have access to office visits, urgent care, and associated diagnosis for providers within the BCBS National Network to be billed at the Tier 1 benefits copay and deductible level.

To enable your dependent's enhanced coverage, please complete and submit the **Out of Area Dependent Coverage Verification Form** found on the Benefits website.

Tier 1 PARE Exception:

All services performed in a Tier 1 facility by a Tier 2 provider or diagnostic services ordered by a Tier 1 provider that are performed by a Tier 2 provider, may be considered under Tier 1 benefits. It is sometimes difficult for BCBS to tell if PARE services were performed at a Tier 1 facility. Employees should be encouraged to check their PARE invoices associated with visits to Tier 1 facilities/providers and if charged at Tier 2, escalate the issue to the Benefits Team for resolution.

Incorrect Tier 1 Copays:

Employees have reported being incorrectly charged Tier 2 copays for visiting Tier 1 providers. The Williamson team worked with BCBS last year to create additional insurance copay cards that explain our Tier 1 structure and provide providers directions to contact BCBS to verify the correct copay/coinsurance. These cards will be available in HR and at the Benefits fair.

If employees believe they've been billed incorrectly, they should escalate with the Williamson Benefits Team.

Benefits Team Contacts:

employeebenefits@williamsonhealth.org

Pete Eiden, Sr. Mgr, Total Rewards
615-435-5117
peiden@WilliamsonHealth.org

Jennifer Saeed, HR Benefits Specialist
615-435-5124
jsaeed@WilliamsonHealth.org