What's the **same** and what's **new**

What's the Same for 2017?	
Open Enrollment website for information	All Open Enrollment-related information is in one place online, easily accessible by you and family members from any computer or mobile device connected to the Internet. No password required!
Summary Plan Descriptions	Detailed information on medical, dental, vision, flexible spending and health savings accounts is provided in the Summary Plan Descriptions posted on the Portal.
Deductibles, coinsurance and copayments	The deductibles, coinsurance and copayment amounts will stay the same under our medical, dental and vision plans.
2017 dental plan premiums	The dental premiums (employee paycheck contributions) will remain the same as 2016.
PPO Plan remains a medical plan option for employees currently enrolled in the PPO	If you are currently enrolled in the Blue Cross Blue Shield PPO Plan, you can continue this coverage for 2017. If you decide to enroll in one of the ABHPs for 2017, you will only be able to enroll in local plans (if available) or ABHPs in the future.
Lighting's contribution to your Health Savings Account (HSA) (See page 6 of the Open Enrollment Decision Guide)	Philips Lighting will continue to provide the same level of financial support with its annual contribution to your HSA (from \$370 - \$1200 depending on your coverage) for employees enrolled in an Account Based Health Plan.
Our commitment to your health and well-being	Philips Lighting will continue to offer you a competitive benefits package with resources to support your emotional, physical, and financial well-being.
What's NEW for 2017?	
2017 medical plan premiums (See page 11 of the Open Enrollment Decision Guide)	While Philips Lighting continues to pay the majority of the cost of your medical coverage, employees will have a small increase to premiums paid through paycheck deductions.
2017 Health Savings Account contribution limit (set by the IRS)	In 2017 the IRS increased the amount that can be contributed to an HSA for employee-only coverage from \$3,350 to \$3,400.
Advocacy and telemedicine services	As of December 31, we will end Health Advocate and Teladoc services. The decision was made as only a small number of employees used the services. Should you need assistance understanding a medical claim, contact your medical plan member services center. In addition, each medical plan has in place a defined appeals process to settle claim disputes.

