

For Employees of Johns Hopkins All Children's Hospital

BENEFITS OPEN ENROLLMENT

Oct. 15–31, 2025

Enroll in or change your benefits for the 2026 plan year
on SmartSource by Friday, Oct. 31



You can enroll in, drop or change these benefits, which will be effective Jan. 1, 2026:

- Medical and prescription drug, dental and vision insurance
- Health and dependent care flexible spending accounts (FSA)
- Supplemental life insurance
- Accident, critical illness and hospital indemnity insurance
- Prepaid legal services
- Long-term disability insurance
- Identity theft and fraud protection

Now is a good time to check your beneficiaries, too.

What's Changing For 2026

Important changes to Allegiance medical plans

In our continued effort to harmonize benefits across the health system, we will no longer offer the Allegiance medical plans as of Jan. 1, 2026:

- Allegiance Consumer Driven Plan (CDP)
- Allegiance Open Access Plan (OAP)

You can choose to enroll in one of the Johns Hopkins Employer Health Programs (EHP) medical plans that we introduced in 2025.

See page 2 for more details about this change.

Do I Need to Enroll?

Yes, only if you want to...

- Have a flexible spending account (FSA)
- Add or drop dependents from coverage
- Add or change benefits

Otherwise, you don't need to do anything. Your current benefits, **except FSAs**, will continue in 2026.

Employee contributions

To continue providing comprehensive coverage in the face of rising health care costs nationwide, medical, dental and vision contributions will increase moderately for most employees.

Deductible and out-of-pocket maximum for EHP PPO medical plan

The deductible and out-of-pocket maximum for the Johns Hopkins Preferred Provider Organization (PPO) medical plan will increase for employees with an annual salary of \$50,000 or more.

Discontinuing Allegiance Medical Plans

If you're enrolled in an Allegiance medical plan in 2025, you can choose to enroll in an EHP medical plan for 2026 during open enrollment:

- Johns Hopkins Exclusive Provider Organization (EPO) Plan
- Johns Hopkins Preferred Provider Organization (PPO) Plan

These are the same plans offered to other JHHS hospitals and member organizations.

If you don't do anything during open enrollment, you'll automatically be enrolled in an EHP medical plan to prevent accidental loss of coverage.

If you're enrolled in the...	You'll be automatically enrolled in the...
Allegiance Consumer Driven Plan (CDP)	Johns Hopkins EPO Plan
Allegiance Open Access Plan (OAP)	Johns Hopkins PPO Plan

Key Highlights of the EHP Plans

- **More providers:** You will have access to a larger network of physicians and providers. Most employees can continue seeing their current providers and can continue accessing Johns Hopkins All Children's Hospital physicians and providers for your dependent children at no cost.
- **Lower plan costs:** The EHP plans have lower deductibles, so you'll pay less out of pocket before the plan begins to pay. They also have lower copays for in-network primary and urgent care visits.

View a side-by-side plan comparison of the EHP plans on page 3.

Visit myBenefitsJHHS.com for more details about providers, plan costs, coverage and other important differences.

Everything You Need Is on myBenefits

Visit myBenefitsJHHS.com to view information about all your benefits, changes for 2026 and contributions.

When you're ready to enroll, access **SmartSource** directly from myBenefits beginning Oct. 15.

myBenefits y SmartSource están disponible en español:

- En myBenefits, seleccione **Spanish** en el menú desplegable Choose Language.
- En SmartSource, seleccione **Español** en el menú desplegable Welcome en la esquina superior derecha.

If you need help picking a plan, talk to **ALEX** to get personalized recommendations.



Find **ALEX** and more information about the EHP medical plans at myBenefitsJHHS.com.

Health Plan Comparison Charts

These charts reflect in-network coverage only. For more coverage details, including prescription drug and out-of-network coverage, visit [myBenefitsJHHS.com](#). We will no longer offer the Allegiance medical plans as of Jan. 1, 2026.

Medical	Johns Hopkins EPO Plan	Johns Hopkins PPO Plan		
Annual Deductible ¹	\$500 per person \$1,000 per family	Determined by salary tier		
		<\$50K \$150 per person \$300 per family	\$50K–\$120K \$300 per person \$600 per family	>\$120K \$400 per person \$800 per family
Annual Out-of-Pocket Maximum	\$3,000 per person \$6,000 per family	Determined by salary tier		
		<\$50K \$1,500 per person \$3,000 per family	\$50K–\$120K \$2,500 per person \$5,000 per family	>\$120K \$3,500 per person \$7,000 per family
Out-of-Network Coverage	No	Yes		
Coinsurance ¹ Applies after deductible	Preferred ² : You pay 10% Cigna: You pay 20%	Preferred ² : You pay 10% Cigna: You pay 20%		
Primary Care Office Visit ¹	\$20 copay	\$10 copay		
Emergency Room	\$250 copay	\$250 copay		
Urgent Care	\$40 copay	\$25 copay		

Dental	Cigna Dental PPO Plan
Annual Deductible	\$50 per person
Annual Maximum Excluding orthodontia	\$1,500 per person
Preventive Services	\$0 copay
Basic Services	You pay 10% coinsurance
Major Services	You pay 40% coinsurance
Orthodontia	Plan covers 50% after deductible up to a \$2,000 lifetime maximum per person
Wisdom Tooth Extraction	Plan covers 90% after deductible up to a \$4,000 lifetime maximum per person

Vision	Superior Vision Plan
Eye exam	Covered 100%
Frames or contact lenses	\$175 allowance
Single, bifocal, trifocal, lenticular and polycarbonate ³ vision lenses	Covered 100%
Progressive lenses	Covers up to trifocal amount ⁴
Contact lens fitting	Standard: Covered 100% Specialty: \$50 allowance
Medically necessary contact lenses	Covered 100%

1. The deductible, coinsurance and copay does not apply to All Children’s Hospital physicians, providers or partner facilities for dependent children (excluding the emergency room). You’ll pay nothing out of pocket. In addition, services provided by Johns Hopkins All Children’s Hospital OB-GYN and maternal-fetal medicine physicians are fully covered.

2. Preferred physicians and providers are those in the Employer Health Programs (EHP) Preferred Provider Network. Visit [ehp.org/find-a-provider](#) to find preferred providers.

3. Covered for dependent children only.

4. Covered to physician’s or provider’s in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable copay.