



Consumer Directed Health Plan With Health Savings Account (CDHP With HSA)

Frequently Asked Questions, 2020-2021

What is the Consumer Directed Health Plan (CDHP)?

The CDHP is one of the medical plan options you have as a Lam Research employee. It is a high-deductible medical plan that provides traditional medical coverage and is compatible with a Health Savings Account (HSA).

What is an HSA?

An HSA (only available with a high-deductible health plan) is a savings account that is established with ConnectYourCare (CYC). This is similar to a regular bank savings account with special tax advantages. See [“About the HSA”](#) to learn more.

If I am considering the Kaiser CDHP with HSA, do these FAQs apply?

The [“About the HSA”](#) section of this document applies to both Anthem and Kaiser CDHP enrollees. Refer to the Kaiser CDHP plan summary to understand how that medical plan works.

Is this plan right for me?

The CDHP with HSA could work well for you if you’re looking for a way to lower your taxable income and/or you want to save money for future health care costs. While the HSA can offer you tax savings, **the CDHP does have a higher [annual deductible](#)** than other medical plans, and you share a percentage of your health care costs with the plan. This is referred to as coinsurance.

About the Anthem CDHP

What does the Anthem CDHP cover?

Like a Preferred Provider Organization (PPO), the CDHP offers comprehensive medical coverage for doctor’s office visits, lab and X-ray services, urgent care, prescription drugs (through CVS Caremark), and more. It offers you the freedom to choose any doctor; however, you’ll pay less if you visit an in-network provider. Preventive care services are also paid 100% by the plan when you visit an in-network provider, and you’re not subject to the deductible. This means the plan will pay for your preventive services regardless of whether you’ve met the [annual deductible](#).

The CDHP is a high-deductible plan with an annual deductible, which is the **amount you must pay** before the plan begins paying any benefits. After you meet the deductible, you pay the [coinsurance](#)

until you reach the [out-of-pocket maximum](#). Once you reach the out-of-pocket maximum, the plan pays for all covered services at 100%.

How do the CDHP and HSA work together?

The table below gives you an idea of how the CDHP and HSA work. As you can see, you are responsible for more of your health care costs up front; however, that’s when your HSA comes into play by helping you pay for those expenses with pretax dollars.

All your eligible preventive care is covered 100% by the plan		
<p>1. You must meet the annual deductible before the plan pays</p> <p>Before the plan benefits begin, you must meet the annual deductible. You can use your HSA funds to pay for this expense.</p>	<p>2. After you satisfy your deductible, you pay coinsurance</p> <p>Once you meet the deductible, you share the cost for covered services, referred to as coinsurance.</p>	<p>3. When you reach the out-of-pocket maximum, the plan pays 100% for covered services</p> <p>The out-of-pocket maximum protects you by putting a limit on the amount you spend during the plan year. Once you reach it, the plan pays 100% of eligible expenses.</p>
← Health Savings Account (HSA) →		
<p>Your HSA is available to help you pay for eligible health care expenses. Throughout the year, you can withdraw available funds from your HSA to reimburse yourself for eligible expenses you’ve paid directly to health care providers. If you don’t use all the funds in your account, they’ll carry over from year to year. It’s also portable and can be used even when you leave Lam Research or retire.</p>		

What are the deductibles, coinsurance, and out-of-pocket maximums in the CDHP?

The amount you are responsible for paying depends on whom you cover and whether you use in-network or out-of-network providers:

Anthem CDHP	Individual Coverage	Individual in a Family	Family Coverage
<p>Annual Deductible <i>You pay before the plan pays benefits</i></p>	<p>\$2,000 in-network \$4,000 out-of-network</p>	<p>\$2,800 in-network \$8,000 out-of-network</p>	<p>\$4,000 in-network \$8,000 out-of-network</p>
<p>Coinsurance <i>You and the plan share</i></p>	<p>In-Network: Plan pays 85% and you pay 15%</p> <p>Out-of-Network: Plan pays 70% and you pay 30%</p>		
<p>Out-of-Pocket Maximum <i>You pay no more than this amount</i></p>	<p>\$3,000 in-network \$6,000 out-of-network</p>	<p>\$3,000 in-network \$12,000 out-of-network</p>	<p>\$6,000 in-network \$12,000 out-of-network</p>

If I enroll only myself and my spouse in the CDHP, what coverage level is that considered to be?
For purposes of determining your deductible and out-of-pocket maximum, if you enroll yourself and any dependent(s) in the CDHP, you are considered to be enrolled in family coverage.

How does the deductible work for a family?

Once any combination of family members have medical expenses that reach the family deductible (e.g., \$4,000 for in-network services), the plan will then share health care costs (coinsurance) for any family member.

How does the deductible work for an individual in a family?

You don't have to meet the *entire* \$4,000 in-network family deductible before the plan begins to share medical costs. Instead, once one family member meets a \$2,800 in-network deductible, the plan will share health care costs (coinsurance) *for that family member*.

How does the out-of-pocket maximum work for a family?

Once any combination of family members have medical expenses that reach the family out-of-pocket maximum (e.g., \$6,000 for in-network services), the plan will then pay 100% of eligible expenses for all family members.

How does the out-of-pocket maximum work for an individual in a family?

The most you'll pay out of pocket for one family member's in-network care will be \$3,000 for the year. You don't need to hit the *entire* in-network family maximum of \$6,000 before the plan begins to pay 100% of eligible costs *for that family member*.

Does the cost of preventive services—including physicals—count toward the deductible or out-of-pocket maximum?

No. Since the plan pays for 100% of eligible preventive services—like physical exams, child immunizations, mammograms, and some prescription drugs—you have no expenses to count toward either the annual deductible or the annual out-of-pocket maximum.

Does the plan include prescription drugs?

Yes. The CDHP includes prescription drug coverage. Like all medical expenses, prescription drugs are subject to the deductible. Under the Anthem CDHP, once you have met the deductible, the plan will pay 85% of the cost of a prescription obtained from an in-network pharmacy. Under the Kaiser CDHP, once you have met the deductible, you are then subject to the applicable prescription drug copayment. You can choose to pay for your prescription drugs from your HSA.

In both the Anthem and Kaiser CDHPs, certain preventive drug prescriptions are 100% paid for by the plan. Refer to the CVS Caremark (for Anthem) or Kaiser Permanente preventive drug list on the [Prescription Drugs](#) page.

Will the CDHP provide medical benefits for my adult child or my domestic partner?

Yes. Medical services are covered by the CDHP for your enrolled adult child (up to age 26) or domestic partner. However, adult children and domestic partners are not considered tax dependents by the IRS; therefore, their medical expenses are not eligible for reimbursement from your HSA.

About the HSA

What is the HSA for?

After enrolling in a CDHP, a Health Savings Account (HSA) is established for you. Lam Research makes contributions to this account, and you can also choose to contribute your own money to your HSA. You can use the money in your account to pay for eligible current or future health care expenses.

Who is eligible to open an HSA?

To be eligible to open an HSA, you must meet these criteria:

- You must be covered by an HSA-compatible health plan like the Anthem CDHP or Kaiser CDHP offered through Lam Research.
- When you enroll in a CDHP during Open Enrollment, your HSA will generally open in January. If you enroll at any other time during the year, your eligibility to make contributions to your HSA begins the first of the month following your enrollment.
- Your HSA may be used only for eligible expenses incurred after your HSA is opened.
- You and your spouse cannot have a [General Purpose Health Care Flexible Spending Account \(FSA\)](#), even if your spouse is not covered by the Lam Research CDHP. That's because both an HSA and a Health Care FSA offer tax advantages that cannot be combined.
- You must **not** be enrolled in another medical plan.
- You must **not** be enrolled in Medicare, and you must stop contributing to your HSA at least six months before you apply for Medicare.
- You must **not** be eligible to be claimed as a dependent on another individual's tax return.
- You must be a U.S. resident, and not a resident of American Samoa.
- If you are a veteran, you must not have received veterans' benefits within the last three months.

Do I need to enroll in an HSA?

When you enroll in a CDHP, your HSA will automatically be opened for you at ConnectYourCare (CYC), the administrator for Lam HSAs. You will receive a payment card and a welcome packet from CYC. Once your HSA is established, contributions from Lam Research—and from you, if you choose—will start to be deposited. You must use your 16-digit payment card number to register on the CYC website if you are new to using CYC.

Note: The opening of your HSA may be delayed if:

- CYC cannot validate your Social Security number,
- You are using a PO box or corporate mailing address instead of your physical home address, or
- Your phone number has not been provided.

If you receive a notification of a delay from CYC, **it is your responsibility to follow up with CYC.**

How much is the annual company contribution to the HSA?

Lam Research's contribution for individual coverage is \$1,300 and \$2,600 for family coverage. This is an annual amount. You will receive this full amount by the end of the year if your HSA is opened in January and you remain actively enrolled in a CDHP with HSA through the end of the year.

How is my HSA funded?

Lam Research's contribution for individual coverage is \$1,300 and \$2,600 for family coverage. You may also make your own contributions to your HSA by having deductions taken from your regular paycheck. Both the company contribution and your contribution will be made on a pay-period basis.

When does Lam make contributions to my HSA?

Lam makes contributions of \$50 for individual coverage or \$100 for family coverage each pay period. However, with the Lam HSA On Demand feature through CYC, you have access to the company's full-year HSA contribution to pay for eligible medical expenses beginning January 1.

Are contributions to an HSA taxed?

That depends on the state where you live. California and New Jersey residents will owe state tax on contributions (both from you and from the company) and on earnings from interest or investments, as shown in this table.

State of Residence	HSA Contributions and Earnings Subject to Federal Tax	HSA Contributions and Earnings Subject to State Tax
California or New Jersey	No	Yes
All Other States	No	No

How do I make contributions to my HSA?

The way to contribute to your HSA is through payroll deductions. You can select a contribution amount during Open Enrollment by logging in to the enrollment website, benefits.plansource.com. Your contributions will be deducted from your paycheck each pay period.

Can I change my HSA contribution amount during the year?

Yes, you may change your contribution amount at any time by logging in to the benefits enrollment website, benefits.plansource.com. Once logged in, click **Make a Change to My Benefits**. Choose **HSA Election/Changes** as the Life Event and the Event Date. Then click **Continue** and follow the prompts.

Is it possible to make a lump-sum contribution to my HSA at the beginning of the year? For example, I anticipate a large expense in February and want to use my HSA to reimburse myself.

Yes, you can do this by contacting the Benefits Help Desk at **877-291-9494**. Keep in mind, if you leave Lam Research anytime during the year, you may need to remove some of these funds from your account. Lower IRS limits may apply if you leave the plan during the year and are no longer enrolled in a CDHP. Excess contributions to your HSA are subject to tax penalties.

How much can I contribute to my HSA?

Provided that your HSA is opened in January, your annual maximum contribution is shown below as “Annual Employee Maximum Contribution.”

2020: Applicable when an HSA is opened in January					
Coverage	Annual IRS Maximum Contribution ¹	Annual Employee Maximum Contribution	Annual Company Contribution ²	Company Contribution per Pay Period	Pay Periods ³
Employee Only	\$3,550	\$2,250	\$1,300	\$50	26
All Other Coverage Levels	\$7,100	\$4,500	\$2,600	\$100	26

¹ If you are age 55+ at any time in the year, you can contribute an additional \$1,000 in catch-up contributions.

² You will receive this amount, awarded on a pay-period basis, if your HSA is opened in January and you remain actively enrolled in a CDHP with HSA through the end of the year.

³ There will be one extra pay period in 2020, but Lam and employee contributions will not occur with the 27th pay period.

2021: Applicable when an HSA is opened in January					
Coverage	Annual IRS Maximum Contribution ¹	Annual Employee Maximum Contribution	Annual Company Contribution ²	Company Contribution per Pay Period	Pay Periods
Employee Only	\$3,600	\$2,300	\$1,300	\$50	26
All Other Coverage Levels	\$7,200	\$4,600	\$2,600	\$100	26

¹ If you are age 55+ at any time in the year, you can contribute an additional \$1,000 in catch-up contributions.

² You will receive this amount, awarded on a pay-period basis, if your HSA is opened in January and you remain actively enrolled in a CDHP with HSA through the end of the year.

What if I exceed the annual maximum contribution to my HSA?

If contributions to your HSA exceed the annual maximum in any given year, IRS rules require you to pay regular income tax plus a 10% tax penalty on the excess amount you contributed. Lower IRS limits may apply if you leave the plan during the year and are no longer enrolled in a CDHP.

What if my spouse has an HSA, too?

If your spouse contributes to an HSA, your combined HSA contributions are limited to the annual IRS contribution maximum for family coverage.

If I have health care expenses, am I required to use the funds in my HSA?

No. You may pay out of pocket with after-tax dollars and let your HSA balance grow federal tax-free, and use your balance in the future for other eligible health care expenses.

Are medical expenses of my adult child or my domestic partner eligible for reimbursement from my HSA?

No. Adult children or a domestic partner are not considered to be tax dependents by the IRS; therefore, their medical expenses are not eligible for reimbursement from your HSA. However, qualified expenses for your same-sex married spouse are considered eligible.

Who is considered an adult child?

Any child between the ages of 19 and 27 who is not considered to be your tax dependent by the IRS.

Using Your HSA

Can I use my HSA for expenses incurred prior to the opening of my HSA?

No. You can only use the HSA funds to pay for eligible health care expenses incurred after the date your HSA was established.

How do I access the money in my HSA?

The best way to access your HSA for eligible expenses is to use your CYC payment card at the time of service or purchase. When you use the card, you will not need to do anything else, except save your receipts with your tax records.

You may also request reimbursement from your HSA by logging in to the CYC website or myCYC mobile app and selecting HSA from the list of accounts.

How do I find my HSA balance?

Log in to the CYC website, and select your HSA from the account list on the left.

What if I use HSA funds to pay for nonqualified health care expenses?

Any amount you spend from your HSA on nonqualified expenses will be considered part of your taxable income. You will also owe a 20% penalty on that amount unless you reach age 65, become disabled, or are deceased.

What if I have money left in my HSA at the end of the plan year?

The HSA dollars you don't spend are yours to keep and save year after year. Your HSA can help you pay for future health care expenses. You can use your HSA to pay for eligible health care, or you can

pay for those expenses out of your own pocket as they come up—saving the money in your HSA for future use.

Are there HSA Bank administrative or banking fees?

Yes, but while you are actively employed, Lam Research pays the monthly service charge. Similar to a banking account, if you overdraw your account, you will be charged an overdraft fee of \$20 per occurrence.

Is there a time restriction on when I may use the funds in the account?

No. There is no time restriction on when funds may be used. Once funds have been contributed to the HSA, they may be used at any time in the future for qualified health care expenses.

What are the federal tax benefits of an HSA?

There are three federal tax benefits:

- Contributions to the account come out of your paycheck before taxes, reducing your taxable income.
- Withdrawals from the account for qualified health care expenses are not taxed.
- Any investment and interest earnings in your account are not taxed when used for health care expenses.

Note: If you live in California or New Jersey, you will owe state tax on contributions to your HSA and on interest or investment earnings.

What should I do with my receipts?

You should keep your receipts for services you've received. You are responsible for providing documentation to the IRS, if needed, for expenses paid/reimbursed from your HSA. The money that goes into and out of your HSA—contributions, earnings, and disbursements—is reported to the IRS each year. It's important that you review this account with your tax advisor.

Are there any special instructions for filing my taxes?

Yes. You will receive a Form 1099 and a Form 5498 in the mail near tax time so you can file your taxes. You will have to complete a Form 8889 when you file your taxes. In addition, you need to keep track of your receipts for anything you pay for from your account, in the event you need to provide documentation to the IRS. Please consult a tax advisor. *Note: Since contributions are through a cafeteria plan, contributions—both yours and Lam's—should be reported on line 9 of Form 8889.*

If I enroll in a CDHP with HSA, can I switch back to one of the other medical plans in a following year? What happens to my HSA balance?

Yes. You may change medical plans, provided the medical plan is offered by Lam Research and you are eligible for it. You own the balance in your HSA and can continue to use those funds for qualified health care expenses, even in years when you are not enrolled in a CDHP. However, you will not be able to contribute to an HSA in any year that you are not enrolled in an HSA-compatible medical plan.

Where can I get more information about HSA regulations?

Visit the IRS website at [irs.gov](https://www.irs.gov) and type “Publication 969” in the search box. You may also want to read the HSAs for Dummies ebook on the [CYC website](#).

Health Savings Account vs. Health Care Flexible Spending Account

What is a Health Care Flexible Spending Account (FSA)?

There are two types of Health Care FSAs:

- **General Purpose Health Care FSA:** An account that lets you set aside pretax dollars from your paycheck to pay for your eligible medical, dental, and vision expenses.
- **Limited Purpose Health Care FSA:** An account that lets you set aside pretax dollars from your paycheck to pay for eligible dental and vision expenses only. When you are enrolled in a CDHP with HSA, FSA enrollment defaults to a Limited Purpose FSA.

How does an HSA compare to a Health Care FSA?

	FSA	HSA
Lam Research contributions	No	Yes
Funded with federal pretax dollars to pay health care expenses	Yes	Yes ¹
Tax advantaged—lowers your federal taxable income	Yes	Yes ¹
Balances can be invested to earn income	No	Yes
Balances at the end of each plan year are lost	Yes, any balance greater than \$550	No
Balances at the end of the plan year roll over to the next year	Yes, up to \$550	Yes
Payments or reimbursements for qualified health care expenses are tax-free	Yes	Yes
Account is portable—you can take it with you if you leave Lam Research	No ²	Yes
2020 IRS annual contribution limit	\$2,750	\$3,550 individual/ \$7,100 family ³
2021 IRS annual contribution limit	\$2,750	\$3,600 individual/ \$7,200 family ³

¹ If you live in California or New Jersey, you are subject to state tax.

² You must elect COBRA to continue your participation with after-tax dollars. This allows you to exhaust your FSA balance.

³ The IRS annual HSA contribution limits increase by \$1,000 if you are at least age 55 any time during the year. These figures represent the combined employer and employee HSA contributions.

Can I have an HSA and a Health Care FSA?

Yes. If you are enrolled in a CDHP, you are eligible to have both an HSA and a Limited Purpose Health Care FSA. You can only use the FSA to pay for eligible dental and vision expenses, until you meet the minimum IRS high-deductible health plan (HDHP) annual deductible (\$1,400 individual/\$2,800 family). You may then use your Health Care FSA for medical expenses (incurred after you've met the IRS deductible), in addition to dental and vision expenses, after you provide proof to CYC of having met the IRS minimum annual deductible.

How do I provide proof that I've satisfied the minimum IRS HDHP deductible?

Log in to the CYC website and select your FSA tab on the left-hand side. Then, from the **I Want To...** menu on the upper right, select **Certify I've Met My Medical Deductible**, and follow the prompts to provide the necessary information and documentation.

What happens if I'm currently enrolled in a PPO or HMO and will have a carryover balance in my General Purpose Health Care FSA on December 31 and I enroll in a CDHP with HSA plan?

A carryover balance (maximum of \$550) in your General Purpose Health Care FSA will be automatically converted into a Limited Purpose FSA.

Terms to Know

Annual deductible: The amount you must pay before the medical plan begins paying benefits. The amount depends on whether you have individual coverage or are covering one or more dependents, and whether you visit in-network or out-of-network providers. The annual deductible does *not* apply to eligible preventive care services, which are paid 100% by the plan when using in-network providers.

Consumer Directed Health Plan (CDHP): A consumer-directed health plan (CDHP) typically involves the combination of high-deductible health coverage with a Health Savings Account (HSA). To help you satisfy the deductible, you can make pretax contributions to a Health Savings Account (HSA) in addition to what the company contributes (up to IRS limits).

Copayment, or Copay: A flat dollar amount that you pay out of your pocket when you receive health care services or prescriptions. The Anthem CDHP does not have any copayments; however, the Kaiser CDHP does (once the deductible has been satisfied).

Coinsurance: The cost for provider services, including prescriptions, that the plan shares with you after you meet your annual deductible. The plan pays a higher coinsurance amount when you use in-network providers.

Explanation of benefits (EOB): A statement provided by Anthem or Kaiser that summarizes your claims and the benefit amount paid by the plan. The EOB also details how much of your provider's charges are your responsibility.

General Purpose Health Care Flexible Spending Account (FSA): An account that lets you set aside pretax dollars from your paycheck to pay for your eligible medical, dental, and vision expenses, as defined by the Internal Revenue Service (visit [irs.gov](https://www.irs.gov) and type "Publication 502" in the search box).

Health Savings Account (HSA): A savings account funded by contributions from Lam Research and, if you choose, contributions from your regular paychecks. The account offers tax advantages, and you decide when and how your health care dollars are used.

In-network (Anthem enrollees only): Providers (e.g., doctors and hospitals) that have contracted with Anthem and will accept its payments as payment in full for specific covered services. When you visit an in-network provider, the plan pays higher benefits, and you'll have lower costs based on the contracted rates.

IRS minimum deductible: Under a Consumer Directed Health Plan (CDHP), the amount you must pay for medical expenses before a Limited Purpose Health Care FSA can be used for reimbursement of medical expenses. The minimum annual medical deductible is \$1,400 for an individual and \$2,800 for a family.

Limited Purpose Health Care Flexible Spending Account (FSA): An account that lets you set aside pretax dollars from your paycheck to reimburse yourself for eligible dental and vision expenses only. When you are enrolled in a CDHP with HSA, FSA enrollment defaults to a Limited Purpose FSA.

Out-of-network: Providers (e.g., doctors and hospitals) that do not belong to the network and, therefore, have not agreed to accept an insurance company's payments as payment in full for specific covered services. Out-of-network providers may charge more for services than what in-network providers have agreed to accept. If you choose an out-of-network provider, you will be responsible for any additional amount they may charge.

Out-of-pocket maximum: The maximum amount you could pay in a plan year before the plan pays the remaining eligible expenses.

Important Note

This document provides an overview of certain health care plan provisions under the Lam Research U.S. Benefits Program. It is not intended to be a complete description of these benefits. Lam Research may terminate, withdraw, or modify any benefits described here, in whole or in part, at any time. The description of these benefits is not a guarantee of future employment or benefits. If there is any conflict between this guide and the official plan documents, the official plan documents and IRS regulations regarding HSAs will govern.