

# What's New or Changing for 2027

Refer to the Benefits Selection Guide (BSG) at [kehpn.ky.gov](http://kehpn.ky.gov) for more details.

## New Prescription Deductible

### LivingWell CDHP

- Old: Combined with Medical Deductible
- New: In-Network  
\$500 Single Prescription Deductible  
\$900 Family Prescription Deductible

### LivingWell PPO

- Old: Co-Pay for all drugs except GLP-1 Weight Loss Drugs (Deductible, then 25% Co-Insurance combined with the Medical Deductible)
- New: In-Network  
Co-Pay for most drugs (see next column for changes)  
\$500 Single Prescription Deductible (for Specialty and GLP-1 Weight Loss Drugs)  
\$1,000 Family Prescription Deductible (for Specialty and GLP-1 Weight Loss Drugs)

### LivingWell Basic CDHP

- Old: Combined with Medical Deductible
- New: In-Network  
\$500 Single Prescription Deductible  
\$1,000 Family Prescription Deductible

Please carefully review the benefits grid for changes to Out-of-Network Deductibles and Maximum Out-of-Pocket amounts.

## New Prescription Maximum Out-of-Pocket

### LivingWell CDHP

- Old: Combined with Medical Maximum Out-of-Pocket
- New: In-Network  
\$1,000 Single Prescription Maximum Out-of-Pocket  
\$2,000 Family Prescription Maximum Out-of-Pocket

### LivingWell Basic CDHP

- Old: Combined with Medical Maximum Out-of-Pocket
- New: In-Network  
\$1,000 Single Prescription Maximum Out-of-Pocket  
\$2,000 Family Prescription Maximum Out-of-Pocket

Please carefully review the benefits grid for changes to Out-of-Network Deductibles and Maximum Out-of-Pocket amounts.

## Changes to Co-Pay Amounts

### LivingWell PPO

- Old: Medical Co-Pay  
\$25 Co-Pay PCP  
\$50 Specialist
- New: Medical Co-Pay  
\$30 Co-Pay PCP  
\$55 Specialist
- Old: Prescription Co-Pay  
Generics: \$20 for 30-day; \$40 for 90-day  
Formulary: \$40 for 30-day; \$80 for 90-day
- New: Prescription Co-Pay  
Generics: \$30 for 30-day; \$50 for 90-day  
Formulary: \$50 for 30-day; \$100 for 90-day  
Specialty: Deductible, then 30%

## Other Changes

The amount you contribute to a Healthcare FSA and the carryover maximum has increased. The maximum contributions for a Dependent Care FSA are unchanged for 2027.

- Old:  
Maximum contribution is \$3,300 per year  
Maximum carryover from 2026 to 2027 is \$660
- New:  
Maximum contribution is \$3,400 per year  
Maximum carryover from 2027 to 2028 is \$680

The **Child & Adult Daycare Flexible Spending Account (FSA)** will now be called a **Dependent Care FSA**.

The **Value Benefit for Diabetes, COPD, Asthma, and Hypertension** (see **page 14**).

**Reminder:** Each member is responsible for confirming that only legitimate claims are processed in their FSA and HRA accounts. You must notify KEHP or HealthEquity within 60 days of any suspected fraudulent activity posted on your HealthEquity account.