

January 14th – Choosing the Right Network Presentation: Q&A Digest

Q1. On the app it asks for email and password, when will we be able to sign into the app? How will we get our credentials for the app?

Answer: Beginning March 1, 2026, you will be able to register online your member ID or last 4 of your SSN.

Costs

Q2. I keep hearing 100%. What is 100% of the costs? pre insurance or the bill sent to the patient (me).

Answer: When we say that Preventive care is covered at 100% that means the services are covered in full and you won't have any member responsibility. This applies to preventive services received from in-network providers only as there is no out-of-network coverage, except for emergencies, on any of the Nordstrom medical plans.

General

Q3. Can you go more in depth on embedded and aggregate deductible and OOP Max?

Answer: Aggregate Deductible/Out-of-Pocket: This is a deductible/out-of-pocket that may be met by a single enrolled member or more than one enrolled member in combination. Certain benefits are not provided for any family member until the family enrollment deductible has been reached. Once the family amount is reached, the deductible is met for all enrolled family members. Same for the out-of-pocket.

Embedded Deductible/Out-of-Pocket: Each enrolled family member on the plan carries their own deductible, which must be satisfied before certain benefits apply to coinsurance, regardless of whether the family deductible (as applicable) has yet been met. Once the family deductible is reached, the deductible is considered met for all enrolled family members. Same for out-of-pocket. Unlike the aggregate deductible, an individual with an embedded deductible/out-of-pocket cannot help meet the family deductible beyond the value of their own individual deductible amount.

General

Q4. 844.56.NORDY - how long is this available, can we call this any day during regular business hours?

Answer: M-F 5am - 8pm Pacific

General

Q5/6. Hey i dont know alot about insurance, When do we pay our deductible?

Answer: A deductible is the set amount you pay for covered medical services before your insurance plan starts paying. You pay 100% of the costs for your healthcare services until you meet your deductible. Certain services, such as preventive care, are covered at 100% before the deductible is met. Once your deductible is met, your insurance will start paying and you will be responsible for a smaller portion (e.g. coinsurance) of your medical expenses.

General

Q7. What about preexisting care with an oncologist? Mine isn't listed, so you are saying I have to change Drs for care?

Answer: If you're receiving treatment from an out-of-network provider, you may be eligible for Transition of Care (TOC), allowing you to continue care at the in-network benefit level for a limited time. TOC applies to serious or ongoing conditions like pregnancy, surgery, cancer care, behavioral health, or other complex medical needs. Contact Premera customer service at 844-56-NORDY for more information on TOC and to see if you qualify.

General

Q8. What about preexisting care with an oncologist? Mine isn't listed, so you are saying I have to change Drs for care?

Answer: Important note: Be sure to check both networks to confirm whether your provider is in network with Premera Blue Cross. Providers may be contracted in the BlueCard PPO network, but not in the Blue High Performance Network.

General

Q9. What about preexisting care with an oncologist? Mine isn't listed, so you are saying I have to change Drs for care?

Answer: If you're not seeing your provider in our directory and want help verifying if they are in network please contact Premera Customer Service at 844.56.NORDY and we would be happy to help!

General

Q10. Are any of these plans self funded by Nordstrum?

Answer: Yes, standard for large companies.

General

Q11. Is 24/7 doctor access available for pediatrics?

Answer: Our 24/7 nurse line is available for adults and children.

General

Q12-14. Is the deductible inclusive in the out of pocket max?

Answer: Yes, it is. Your out-of-pocket maximum is the most you'll pay for covered medical care in a given plan year. Once reached, your insurance pays 100% of your covered medical care. Any deductible, copay or coinsurance amounts you pay out of pocket for covered medical care during the plan year applies to your out-of-pocket maximum.

General

Q15. Do I have to use nordstrom email?

Answer: You do not.

HSA/HCSA

Q16. can you speak to how HSA works?

Answer: Great question but a long answer. Best to call the Benefits Service Center at 844-487-5595 and they can give all the details.

HSA/HCSA

Q17. Will the HCSA health care savings account be offered as part of the classic plan as it currently is with Aetna classic. I know HSA is only available with basic and advantage

Answer: Great question. Yes, it will still be offered under both the basic and advantage plan.

HSA/HCSA

Q18. What is the difference between the amount that was contributed to the HSA with the Aetna Advantage versus the BCBS Advantage plan?

Answer: Nordstrom will contribute \$500 for individual coverage and \$1,000 for family coverage for employees enrolled in the Advantage HDHP medical plan for 2026.

HSA/HCSA

Q19. I forced to go to a specialist that is out of network and I have an HSA, I can pay that full amount as it is not covered by BCBS from my HSA correct?

Answer: Yes, that is HSA eligible.

HSA/HCSA

Q20. I know its not HSA qualified but last year under classic plan Nordstrom offered an HCSA (flexible spending Plan) instead. Do you know if that is still being offer

Answer: Yes, the HCSA remains for 2026.

HSA/HCSA

Q21. Will the HCSA health care savings account be offered as part of the classic plan as it currently is with Aetna classic. I know HSA is only available with basic and advantage

Answer: The Classic EPO Plan isn't an IRS-qualified high deductible health plan so it's not HSA compatible.

Network Coverage

Q22. for Premera HP plan, if the specialist is out of that network, can we go out of network but part of PPO network after authorization

Answer: No, all providers must be in-network.

Network Coverage

Q23. I'm currently on Aetna Whole Health and have had very disappointing experience around hardly any providers I care about being in network. I'm considering BlueHPN and my search shows me that all providers I care about are in network. Is there ANY chance they will fall out of network by March, or even throughout the plan year? Might be overly paranoid due to my abysmal experience with Aetna

Answer: We can completely understand your concerns. We are hopeful that there wouldn't be any provider changes between now and March 1, 2026. Providers may renew their contracts at different times throughout the year. We do always provide our members with advanced notice of any of those changes should they occur.

Network Coverage

Q24. Can you explain what dental care falls under the BlueCard PPO plans? I see dentists and periodontists, etc. listed as in network.

Answer: Typically, it's dental accidents that are covered under the medical plan. Standard dental coverage for Nordstrom is through Cigna.

Network Coverage

Q25. Is Urgent Care covered if out of Network?

Answer: No, only ER care. I would use Virtual Care for Urgent Care if you can't find an in-network Urgent Care center.

Network Coverage

Q26. So the Blue Card Network option is the one that is listed on our Nordstrom Benefits info we got in the mail is the one they call Blue High Performance?

Answer: There are 4 medical plan options on two different networks with Premera. The BlueCard PPO network is our broad network available to Nordstrom employees nationwide. The Basic HDHP, Advantage HDHP, and Classic EPO medical plans are on the BlueCard PPO network. The other network option with Premera is the Blue High Performance Network. This is a smaller network that includes only high-quality and lower-cost providers. The Blue High Performance Network is available in 68+ major metropolitan areas and only the Blue High Performance medical plan is on this network. To see if the Blue High Performance

Network is right for you and your family please use the Check BlueHPN tool at <https://www.premera.com/sites/nordstrom/checkbluehpn>.

Network Coverage

Q27. Is there a slide showing a cost comparison of the different network options?

Answer: If you still have questions, please call Premera customer service at 844.56.NORDY and we would be happy to go over your plan options with you :)

Network Coverage

Q28/29. Is there a slide showing a cost comparison of the different network options?

Answer: Please see the plan comparison chart on page 3 of the 2026 Nordstrom Benefits Guide available on the Nordstrom Benefits Portal.

Network Coverage

Q30. Could you please clarify whether the following plans cover services such as acupuncture, massage therapy, and chiropractic care?

- Basic HDHP Plan
- Advantage HDHP Plan
- Blue High Performance Network

If these services are covered, I would appreciate details on whether they require a referral, are subject to deductible and coinsurance, or have visit limits.

Answer: Best to call Premera as it varies by each plan. 844-566-6739 (844-56-NORDY)

Network Coverage

Q31. If you relocate with the company and your new area does not have high Performance network, would you have to wait for open enrollment?

Answer: No, that is a qualified event to change to a new plan available in your area to change before OE.

Network Coverage

Q32. Can you speak on the differences between the 3 plans in the PPO network. Is it only the deductibles that are the biggest difference?

Answer: Please see the plan comparison chart on page 3 of the 2026 Nordstrom Benefits Guide available on the Nordstrom Benefits portal.

Network Coverage

Q33. Is availability guaranteed for high performance network?

Answer: To see if the Blue High Performance Network is right for you and your family please use the Check BlueHPN tool at <https://www.premera.com/sites/nordstrom/checkbluehpn>

Network Coverage

Q34. Does transition of care for cancer treatment continue if out of network?

Answer: If you're receiving treatment from an out-of-network provider, you may be eligible for Transition of Care (TOC), allowing you to continue care at the in-network benefit level for a limited time. TOC applies to serious or ongoing conditions like pregnancy, surgery, cancer care, behavioral health, or other complex medical needs. Contact Premera customer service at 844-56-NORDY for more information on TOC and to see if you qualify.

Network Coverage

Q35. When you mentioned that Emergency Care is still covered if out-of-network, does that also include urgent care? Out of Network and emergency care. If you are on vacation, end up in the ER at a out of Network Hospital. After the ER and emergency surgeries, you than spend weeks at that hospital in ICU before you are able to be transferred back "home" to a hospital in your Network. Would that entire Hospital stay be covered? Or just the ER portion of it? I'm asking because this is a true situation my family was in a few years back.

Answer: Great question! All Nordstrom medical plans covering in-network services only with the exception of emergencies (out-of-network urgent care is not covered). If you're admitted to an out-of-network hospital through the Emergency Room the whole inpatient stay is considered an emergency and will process at the in-network benefit level.

Network Coverage

Q37. Could you please confirm whether the Blue High Performance Network is considered a PPO plan?

Answer: All Nordstrom medical plans are EPOs

Network Coverage

Q38/39. Could you please confirm whether the Blue High Performance Network is considered a PPO plan?

Answer: EPO = Exclusive Provider Organization, which means there is no out of network coverage except for emergency room care

Network Coverage

Q40. with less options but higher quality doctors are there more waitlists with the High performance network?

Answer: We have not seen anything about longer waits for services in HPN relative to PPO. However, with it being a narrower network, there will be less options to chose from when referred out.

Network Coverage

Q41. When searching for providers in Network, it seems that some systems are in the network (Such as University of Washington) but not individual doctors. Is this expected? Would doctors within a large system commonly not be included? or is it a quirk of how the search functionality works?

Answer: Great question! Most of the time providers are contracted at the individual provider level but sometimes they are contracted at the group level so depending on the contracting, they could be loaded in our Find a Doctor provider directory under the individual provider or the provider group level. It's best practice to start your search at the individual provider level. If you're unable to locate your provider in the Premera Find a Doctor tool or need assistance confirming the network status of a provider, please contact Premera customer service at 844.56.NORDY, M-F 5am-8pm PST, and we would be happy to assist!

Network Coverage

Q42. I'm , if this is a stupid question. For our Nordstrom Options we got in the mail we see them listed as Basic HDHP , Advantage HDHP, Classic EPO Plan, and Blue High Performance, which of those options is the BlueCard Network?

Answer: Basic HDHP , Advantage HDHP, and Classic EPO Plans are on the BlueCard PPO network.

Network Coverage

Q43. Can you speak on the differences between the 3 plans in the PPO network. Is it only the deductibles that are the biggest difference?

Answer: The premiums, deductibles and out of pocket maximum amounts are different on each plan. The types of services that are covered are the same on each plan but how the service is covered may be different.

Network Coverage

Q44. Is there a risk of provider going out of network in the middle of the year?

Answer: With all insurance companies, that is possible, doctors come and go but its typically not super common.

Network Coverage

Q45. I'm , if this is a stupid question. For our Nordstrom Options we got in the mail we see them listed as Basic HDHP , Advantage HDHP, Classic EPO Plan, and Blue High Performance, which of those options is the BlueCard Network?

Answer: Only the Blue High Performance Plan is on the Blue High Performance Network.

Urgent/Emergency Care

Q46. Do any of the plans offered have prescriptions that are not subject to the deductible?

Answer: Yes, on the Blue High Performance plan prescriptions are not subject to the deductible. The deductible does apply to prescriptions on the Basic HDHP, Advantage HDHP, and Classic EPO plans.

Urgent/Emergency Care

Q47. Is there an Out of Pocket Maximum after you meet your deductible?

Answer: Yes please see the guide: <https://www.premera.com/documents/070773.pdf>

Urgent/Emergency Care

Q48. I did not see durable medical listed on the chart of covered expenses

Answer: It is covered and would apply to the plans deductible/coinsurance.

Urgent/Emergency Care

Q49. What is the difference between deductible and out of pocket?

Answer: A deductible is the upfront amount you pay for covered healthcare services before your insurance starts paying, while the out-of-pocket maximum is the most you'll spend on covered care in a plan year.

Urgent/Emergency Care

Q50. Is premera blue cross under the umbrella of anthem blue cross? for example would it say under insurances accepted premera blue cross?

Answer: Premera Blue Cross is one of 33 companies (include Anthem Blue Cross) that make up the Blue Cross Blue Shield Association. We collaborate with the other 32 BCBS companies to make sure you have access to the largest network of providers in the country.

Urgent/Emergency Care

Q51. I am trying to use the QRC currently on the screen and getting a 403 forbidden error message

Answer: The one on the screen now just worked for me. Can you try again?

Urgent/Emergency Care

Q53. What's the difference between coinsurance and a copay?

Answer: Copay means you pay say \$25 fee, co-insurance say 20%, means you pay 20% of the bill, up to out of pocket max.

Urgent/Emergency Care

Q54. I understand new plan starts on 3/1, when will be my dependent need to cancel their existing plan?

Answer: If adding them 3/1 during Open Enrollment, they should cancel their plan 2/28.

Urgent/Emergency Care

Q55. We can review the recorded meetings when we want, correct? And when we do, do we get to see all the questions & answers?

Answer: Yes, the recorded session along with the Q&As answered in this session will be posted for review.

Urgent/Emergency Care

Q56. I'm blanking on the exact term but if my health insurance plan covers myself, my husband, and my daughter, would you recommend choosing the plan where all family members contribute toward one combined deductible? And once that deductible is met, the plan then switches to 20% coinsurance. Is that correct?

Answer: Great question. Here is a comparison of aggregate vs embedded deductible and out of pocket maximum.

Aggregate Deductible/Out-of-Pocket: This is a deductible/out-of-pocket that may be met by a single enrolled member or more than one enrolled member in combination. Certain benefits are not provided for any family member until the family enrollment deductible has been reached. Once the family amount is reached, the deductible is met for all enrolled family members. Same for the out-of-pocket.

Embedded Deductible/Out-of-Pocket: Each enrolled family member on the plan carries their own deductible, which must be satisfied before certain benefits apply to coinsurance, regardless of whether the family deductible (as applicable) has yet been met. Once the family deductible is reached, the deductible is considered met for all enrolled family members. Same for out-of-pocket. Unlike the aggregate deductible, an individual with an embedded deductible/out-of-pocket cannot help meet the family deductible beyond the value of their own individual deductible amount.

Urgent/Emergency Care

Q57. How do I set up an online primera account?

Answer: www.premera.com

Urgent/Emergency Care

Q59. Do we have to get a referral from our Primary Physician before seeing a specialist?

Answer: You do not.

Urgent/Emergency Care

Q60. Is there any coverage out of country?

Answer: Only for Urgent or ER care - not routine care.

Urgent/Emergency Care

Q61. Is provider coverage micro-specific to doctor or can a clinic be covered and therefore any doctor there?

Answer: Great question. It's always best to check the specific provider that you will be seeing as sometimes their individual contracting may change.

Urgent/Emergency Care

Q62. can you explain the difference between ppo and epo

Answer: PPO = Preferred Provider Organization where you will have access to a broader range of access to providers. EPO = Exclusive Provider Organization where you will have access to a narrower network.

Urgent/Emergency Care

Q63. Will my medical expenses be covered if I need emergency care outside of the United States?

Answer: Yes, ER care outside the US is covered, you will likely need to pay out of pocket then seek reimbursement since there is no network outside the US.

Urgent/Emergency Care

Q64. so it sounds like if we don't have access or the ability to use the mobile apps, we aren't able to get urgent care?

Answer: For virtual care, you will need the app (desktop coming soon). For in person care, you will not need any apps.

Urgent/Emergency Care

Q65. How can we see which hospitals are covered by each plan?

Answer: www.premera.com to search their online directory, look under BlueCard PPO.

Urgent/Emergency Care

Q66. My partner and I are expecting a baby, which plan is best?

Answer: Congratulations! How exciting! Please contact Premera customer service at 844.56.NORDY and we would be happy to go over your medical plan options with you.

Urgent/Emergency Care

Q67. Didn't he say there is no urgent care facility in WA?

Answer: You can search for in-network providers at <https://www.premera.com/sites/nordstrom/find-doctor>.

Urgent/Emergency Care

Q68. Didn't he say there is no urgent care facility in WA?

Answer: There are lots of options for urgent care centers in WA :)

Urgent/Emergency Care

Q69. For the virtual care mobile app, what can the provider do for you. Would they be able to prescribe medication if needed?

Answer: It is for common issues like colds, pink eye, etc. Not fo serious medical issues. Yes, for certain drugs (like antibiotics) they can prescribe. They can't prescribe things like pain killers, ambien, etc.

Urgent/Emergency Care

Q70. For cost projection purposes, what category of coverage do mental health therapists and psychiatrists fall under? Specialists? PCP?

Answer: This would apply to the professional care.

Urgent/Emergency Care

Q71. I assume after we sign up for the plan is when we can use the app, but how do we get the login and password?

Answer: You can create your account on [premera.com/nordstrom](https://www.premera.com/nordstrom) on March 1 once your plan is active and you receive your Premera ID card.

Urgent/Emergency Care

Q72/73. If during the year my spouse loses coverage due to employer reasons, would that qualify me to add them to my plan and can I make a change to plans if needed?

Answer: This would be considered a qualifying life event, and you would be able to add or make those changes if needed.

Urgent/Emergency Care

Q74. Can you go back to the slide for the personal health clinicians? Am I able to contact them for health care advocacy on my behalf as well?

Answer: <https://www.premera.com/sites/nordstrom/personal-health-support>

Urgent/Emergency Care

Q75. Can you go back to the slide for the personal health clinicians? Am I able to contact them for health care advocacy on my behalf as well?

Answer: Please visit this page for more information on the Premera Personal Health Support program. Starting March 1, you can request Personal Health Support.

Urgent/Emergency Care

Q77. My wife is currently patient at City of Hope cancer center, how do I find out if she is still eligible to get care

Answer: Sorry to hear that. If that provider is out of network, Premera has a "transition of care" service to continue care. You can visit <https://www.premera.com/sites/nordstrom> to search if they are in network. Please call Premera at 844-566-6739 if you need to arrange transition of care.

Urgent/Emergency Care

Q78. Will Premera app recognize us now?

Answer: Great question. It will not until March 1, 2026. Feel free to visit [Premera.com/nordstrom](https://www.premera.com/sites/nordstrom) in the meantime. We have great resources available now without needing to log in.

Urgent/Emergency Care

Q79. I don't see "professional care" (mental health therapists/psychiatrists) in the plan cost details. Where can I find cost information?

Answer: I apologize. When comparing on the benefit guide the cost share that will apply will be the same as primary care.

Urgent/Emergency Care

Q80. What is the cost of each plan? Where can I find that information?

Answer: 2026 Nordstrom Benefits Guide on the Nordstrom Benefits Portal.

Urgent/Emergency Care

Q81. Do you still have to pay copays after the OOP max?

Answer: Your out-of-pocket maximum is the most you'll pay for covered medical care in a given plan year. Once reached, your insurance pays 100% of your covered medical care, including copays.