

Welcome

July 1, 2010

Dear Graduate Assistant.

I'm pleased to welcome you to the 2010-2011 Graduate Assistant Health Plan.

The University works hard to provide eligible graduate assistants, fellows, trainees and their dependents access to a high quality plan at minimal cost to the student. The Graduate Assistant Health Plan is simple, affordable healthcare coverage designed to meet the unique needs of graduate assistants and their dependents.

All graduate assistants, current enrollees with enrolled dependents and those who wish to enroll in or maintain their dependent coverage on the plan fall semester 2010 must complete the enrollment process by September 20, 2010.

Highlights of the plan include:

- No pre-existing condition exclusion
- 100% coverage of eligible expenses after a \$10 office visit co-pay
- \$2,500 maximum annual out of pocket limit for covered services
- \$3,000,000 Maximum Lifetime Benefit
- Pharmacy Benefit in the HealthPartners network with no annual maximum benefit
- Dental Care Benefit—100% coverage of preventive care and restorative care coverage at your campus' designated dental clinic (co-insurance applies)

In this brochure, you'll find more information about the broad range of benefits available to you through the Graduate Assistant Health Plan. Even more detail can be found on the plan Web site. In order to make the most of your coverage, and to be sure that you are aware of deadlines, policies and procedures that affect you, you are responsible to review the information found in this brochure and on the Web carefully.

Please feel free to contact me with any questions. Our office looks forward to serving you!



Susann Jackson
Director of Student Health Benefits
Office of Student Health Benefits
University of Minnesota
gradins@bhs.umn.edu
612-624-0627

Twin Cities Campus Students: http://www.shb.umn.edu/twincities/graduate-assistants.htm Duluth Campus Students: http://www.shb.umn.edu/duluth/graduate-assistants.htm

How to Enroll

All graduate assistants who wish to take advantage of the plan fall semester 2010 must complete the enrollment process.

Step 1. Complete and Submit Enrollment Forms

To enroll in the Graduate Assistant Health Plan, please complete and return the following materials to the Office of Student Health Benefits within 14 days from the start date of your appointment or by **September 20**, **2010**, whichever is later.

Student Enrollment

All students who wish to enroll in the plan must complete and return*:

• Enrollment Form

Twin Cities Campus Students: http://www.shb.umn.edu/twincities/graduate-assistants.htm Duluth Campus Students: http://www.shb.umn.edu/duluth/graduate-assistants.htm

Dependent Enrollment

All students who wish to enroll dependents in the plan must also complete and return:

• Enroll Payment Worksheet

Twin Cities Campus Students: http://www.shb.umn.edu/twincities/graduate-assistants.htm Duluth Campus Students: http://www.shb.umn.edu/duluth/graduate-assistants.htm

· First two months payment for dependents

Once an applicant's eligibility is verified by the Office of Student Health Benefits, enrollment will be processed. Plan members will see a charge for the plan on their University bill once at the beginning of each semester. Member ID cards will be sent to the plan member by U.S. mail approximately four weeks after the start of the first semester of enrollment. Cards will be mailed to the mailing address indicated on OneStop.

* Students currently enrolled on the plan without dependents do no need to re-enroll. Current coverage will continue after eligibility has been verified by Office of Student Health Benefits.

Step 2. Update OneStop

Make sure your U.S. mail address is up-to-date:

- Twin Cities Campus Students: Look under Quick Links, Student Records and click on Personal Information. http://www.onestop.umn.edu
- Duluth Campus Students: Look under Technology and click on Update Personal Information. http://www.d.umn.edu/students/

Enter your new health plan information:

- Twin Cities Campus Students: Look under Quick Links, Registration and click on Health Plan Coverage. http://www.onestop.umn.edu
- Duluth Campus Students: Look under Financial Information and click on Student Health Insurance. http://www.d.umn.edu/students/
- All students enter the following:
 - Name of Health Plan: Graduate Assistant Health Plan
 - Health Plan Telephone Number: (612) 624-0627
 - Member ID Number: (your student ID number)

Enrollment Questions

For more information about enrollment, please contact the Office of Student Health Benefits at 612-624-0627, 1-800-232-9017 or gradins@bhs.umn.edu, or visit the Web page specific to your campus.

- Twin Cities Campus Students: http://www.shb.umn.edu/twincities/ graduate-assistants.htm
- Duluth Campus Students: http://www.shb.umn.edu/duluth/ graduate-assistants.htm

Convenient access on campus



You want flexibility, choices and exceptional service from your health plan. With HealthPartners Open Access plan, you have access to one of the country's largest networks.

As part of this large network, your on-campus healthcare clinics are Boynton Health Service and UMD Health Services. As a U of M student, you have access to on-campus healthcare that can meet your needs in any situation—treating injuries, counseling for depression, analyzing lab results—with quality, compassion, and professionalism. Your campus health service performs the same services as a clinic out in the community, with one important difference: it caters to the special needs of college students like you!

Twin Cities Campus Students

Boynton Health Service http://www.bhs.umn.edu

Minneapolis Clinic (Main Clinic), 410 Church Street S.E., Minneapolis, MN 55455, P: 612-625-8400 Monday–Friday, 8:00 a.m.–5:00 p.m., Saturday 9:00 a.m.–1:00 p.m. (Urgent Care & Pharmacy), closed weekends and university holidays. Closed Saturdays during summer term.

- Boynton's staff of over 200 includes physicians, nurse practitioners, physician assistants, registered nurses, dentists, optometrists, physical and massage therapists, psychologists, psychiatrists, registered dietitians and pharmacists.
- **Dental Clinic**—Plan members receive preventive services such as routine exams, x-rays and cleanings at NO COST and restorative benefits of up to \$1,000 at Boynton Health Service Dental Clinic. 612-624-9998
- Eye Clinic—Select from a wide variety of designer frames at 20-40% off suggested retail price.
- **Pharmacy**—Prescriptions and over-the-counter medications at competitive prices. 612-624–7655
- Boynton Health Service St. Paul Clinic—Satellite clinic offering primary care services. Open Monday—Friday. See Web for location and hours.

Gopher Quick Clinic—

Walk-in Care for Minor Acute Illnesses http://www.bhs.umn.edu/quickclinic

Locations: Boynton Health Service Minneapolis Clinic, Coffman Union Commuter Lounge Monday–Friday, 9:00 a.m.–5:00 p.m., closed weekends and university holidays.

Duluth Campus Students

UMD Health Services http://www.d.umn.edu/hlthserv/

615 Niagara Court, Duluth, MN 55812 P: 218-726-8155, Fax:218-726-6132 Monday–Friday, 8:00 a.m.–4:00 p.m., Summer Session (4th week in May through August) Monday–Friday, 9:00 a.m.–3:00 p.m., Closed evenings, weekends and university holidays.

• UMD Health Services' staff includes physicians, nurse practitioners, physician assistants, registered nurses, psychologists and social workers.



Lake Superior Dental Associates http://www.lakesuperiordental.com

1225 East First Street, Duluth, MN 55805, P: 218-728-6445, Monday–Friday, 7:00 a.m.–5:00 p.m.

• Plan members receive preventive services such as routine exams, x-rays and cleanings at NO COST and restorative benefits of up to \$1,000 at Lake Superior Dental Associates.



HealthPartners Open Access Plan

You're covered coast-to-coast



You want flexibility and choices from your health plan. In addition to your convenient, high-quality, on-campus resources, the Open Access plan provides you access to more than 700,000 network providers throughout the United States. Plus, you don't need to worry about referrals.

HealthPartners provides you with the tools, information and support you need. To make sure your provider is in the network or to learn more about everything available to you as a HealthPartners member, please visit healthpartners.com/uofmga.

Large Open Access network

No matter where you live, work or travel, you're covered with high-quality providers.
With the Open Access network you have:

- Access to more than 700,000 providers and 5,800 hospitals nationwide
- No roadblocks you don't need to select a primary care provider and you don't need a referral to see a specialist in the network



Graduate Assistant Health Plan and Dependent Plan 1

HealthPartners®

HealthPartners Open Access Network

The University of Minnesota Graduate Assistant Health Benefit Plan and Dependent Coverage

The following is an overview of your HealthPartners coverage. For exact coverage terms and conditions, consult your plan materials, or call Member Services at (952) 883-5000 or 1-800-883-2177.

וקו	an highlights	aber Services at (952) 883-5000 or 1- In-network	Out-of-network
I Id Pai	an inginights rtial listing of covered services	Care from a network provider	Care from an out-of-network provide
	ductible and Out-of-Pocket	Gaile ii Giii a ii Giii Gii A pi Gii agoi	
	etime maximum	\$3,000,000 combi	ned in and out-of-network
	n year deductible	None	\$200 per person; \$600 per family
	n year medical out-of-pocket maximum		00 per person
	n year prescription out-of-pocket maximum		0 per person
	n year professional out-of-pocket maximum	None	\$600 per person
	eventive Health Care	Tione	T 4000 per person
	Routine physical & eye examinations	100% coverage	80% coverage after deductible
	Prenatal, postnatal care & well-child care	100% coverage	100% coverage
	Immunizations	100% coverage	80% coverage after deductible
Of	fice Visits	100% coverage	30% coverage after deduction
J 1.	Illness or injury	\$10 copayment	80% coverage after deductible
	Allergy injections	\$10 copayment	80% coverage after deductible
•	Physical, occupational & speech therapy	\$10 copayment	80% coverage after deductible
•	Chiropractic care	\$10 copayment	80% coverage after deductible
	(neuromusculo-skeletal conditions only)	+	5575 55 . Stage after adduction
_	Mental health care	\$10 copayment	80% coverage after deductible
•	Chemical health care	\$10 copayment	80% coverage after deductible
Co	nvenience Care	\$10 copujinent	SO TO TOTAGE WITH WOMENIE
	Convenience clinics (retail clinics)	\$5 copayment	80% coverage after deductible
En	nergency Care	- to copulation	a contracting the contraction of
•	Urgently needed care at an urgent care Clinic	\$10 copayment	80% coverage after deductible
	or medical center	φτο copulyment	oo /o co / crugo urtor ucuucusto
•	Emergency care at a hospital ER	\$40 copayment	\$40 copayment
•	Ambulance	80% coverage	HealthPartners in-network benefit
lnı	patient Hospital Care		
•	Illness or injury	100% coverage	80% coverage after deductible
•	Mental health care	100% coverage	80% coverage after deductible
	Chemical health care	100% coverage	80% coverage after deductible
Ou	tpatient Care		
•	Scheduled outpatient procedures	100% coverage	100% coverage
•	Outpatient Magnetic Resonance Imaging	100% coverage	100% coverage
	(MRI) and Computing Tomography (CT)		
Du	rable Medical Equipment		
•	Durable medical equipment & prosthetic	80% coverage	80% coverage
	devices	E	
Pr	escription Drugs	HealthPartners Participating	Non Participating
	1-day supply; 3 cycles of oral contraceptives; 90-day supply	Pharmacy Benefit	Pharmacy Benefit
for	mail order)		
	Retail Pharmacy Copayment for 34 day supp		
	 Generic Preferred 	\$10 copayment	80% coverage after deductible
	 Brand Preferred 	\$25 copayment	80% coverage after deductible
	 NonPreferred 	\$50 copayment	80% coverage after deductible
	HealthPartners Mail Order Pharmacy Copay		
	 Generic Preferred 	\$20 copayment	
	 Brand Preferred 	\$50 copayment	
	 NonPreferred 	\$100 copayment	

^{*} UMD Graduate Assistants and their adult dependants do not pay a copayment for available services at UMD Health Services.



HealthPartners Open Access Network

The University of Minnesota Graduate Assistant Health Benefit Plan Dependent Coverage

The following is an overview of your HealthPartners coverage. For exact coverage terms and conditions, consult your plan materials, or call Member Services at (952) 883-5000 or 1-800-883-2177.

Plan highlights Partial listing of covered services	In-network Care from a network provider	Out-of-network Care from an out-of-network provider
Deductible and Out-of-Pocket	·	<u> </u>
Lifetime maximum	\$3,000,000 combir	ned in and out-of-network
Plan year deductible	\$100 per pers	son; \$200 per family
Plan year medical out-of-pocket maximum	\$1,000 per person; \$2,000 per family	
Plan year prescription out-of-pocket maximum	\$300 per person; \$500 per fa	amily, for all covered prescriptions
Preventive Health Care		-
Routine physical & eye examinations	100% coverage	90% coverage after deductible
 Well-child care 	100% coverage	100% coverage
Prenatal & postnatal care	100% coverage	100% coverage
 Immunizations 	100% coverage	90% coverage after deductible
Office Visits		
 Illness or injury 	\$25 copayment	\$25 copayment
 Allergy injections 	\$25 copayment	\$25 copayment
 Physical, occupational & speech therapy 	\$25 copayment	\$25 copayment
Chiropractic care	\$25 copayment	\$25 copayment
(neuromusculo-skeletal conditions only)	- 1	
 Mental health care 	\$25 copayment	\$25 copayment
 Chemical health care 	\$25 copayment	\$25 copayment
Convenience Care		
 Convenience clinics (retail clinics) 	\$15 copayment	90% coverage after deductible
Emergency Care		
 Urgently needed care at an urgent care Clinic or medical center 	\$25 copayment	\$25 copayment
■ Emergency care at a hospital ER	90% coverage after deductible	90% coverage after deductible
 Ambulance 	90% coverage after deductible	90% coverage after deductible
Inpatient Hospital Care	•	
 Illness or injury 	90% coverage after deductible	90% coverage after deductible
 Mental health care 	90% coverage after deductible	90% coverage after deductible
Chemical health care	90% coverage after deductible	90% coverage after deductible
Outpatient Care	•	
 Scheduled outpatient procedures 	90% coverage after deductible	90% coverage after deductible
 Outpatient Magnetic Resonance Imaging (MRI) and Computing Tomography (CT) 	100% coverage	100% coverage
Durable Medical Equipment		
 Durable medical equipment & prosthetic devices 	90% coverage after deductible	90% coverage after deductible
Prescription Drugs	HealthPartners Participating	Non Participating
(34-day supply; 3 cycles of oral contraceptives; 90-day supply for mail order)	Pharmacy Benefit	Pharmacy Benefit
■ Retail Pharmacy Copayment for 34 day supp		
 Generic Preferred 	\$10 copayment	90% coverage after deductible
 Brand Preferred 	\$25 copayment	90% coverage after deductible
 NonPreferred 	\$50 copayment	90% coverage after deductible
■ HealthPartners Mail Order Pharmacy Copa	yment for a 90 day supply	
■ Generic Preferred \$20 copayment		
 Brand Preferred 	\$50 copayment	
 NonPreferred 	\$100 copayment	

^{*} UMD Graduate Assistants and their adult dependants do not pay a copayment for available services at UMD Health Services. 7

Healthy Discounts



Saving money never felt so good

HealthPartners gives you FREE perks with our Healthy DiscountsSM program. Simply show your HealthPartners Member ID card to participating retailers to receive Healthy Discounts on exercise equipment, classes, snowboard and ski equipment, spa and wellness services and much more.

Eyewear

- Enjoy the convenience of one-stop optical shopping at HealthPartners Eye Care Centers, featuring a wide selection of contacts, stylish frames and lenses to fit every budget with savings of up to 35 percent on eye wear!
- Extended Vision Network savings of 10 to 20 percent on eyewear at more than 60 providers throughout the HealthPartners vision network!
- Save up to 35 percent on eyeglasses, plus get great deals on contact lenses and more from EyeMed Vision Care. Choose from thousands of independent and optical retailers like LensCrafters®, Pearle Vision® and the optical centers at Sears, Target and JCPenney.

Weight Watchers®

- \$10 off a three-month subscription to Weight Watchers Online®
- A \$10 discount on At-Home kits
- Local meeting coupons for a discount on weekly meeting fee and waived registration fee
- Visit weightwatchers.com/cs/ healthpartners

Albertville Premium Outlets

Enjoy a free Albertville Premium Outlet® VIP Coupon Book, which contains discounts at a variety of Albertville Premium Outlet stores.

Solimar Wellness Spa

Full-service day spa supporting healing for body, mind and spirit. A variety of discounts are available on different services, including spa, classes and special events, wig consultations and more.

Exercise & recreation equipment

HealthPartners members also receive exclusive discounts on exercise and recreational equipment from a number of stores, including 2nd Wind Exercise Equipment, Erik's Bike Shop, Penn Cycle & Fitness and Hoigaard's.

Safe Beginnings®

Get a 20 percent discount* on a large selection of items from Safe Beginnings to keep your baby safe. To order, visit **safebeginnings.com** and enter code "HPW" or call 1-800-598-8911 for a catalog. Be sure to identify yourself as a HealthPartners member when you call to place your order. *Some exclusions may apply.

Fitness classes

Receive discounts on specialized off-campus fitness classes offered throughout the metropolitan area, including courses with Professional Karate Studios and Jazzercise.

Yoga Class

Start weekly yoga classes at Good Life Yoga today! With the Healthy Discount you get:

- One Free Week of Good Life Yoga Classes
- 10% discount off your first six week session of classes
- Both discounts apply to new yoga students only

These discounts are good at Good Life Yoga located in Deephaven, MN. To get your discount, show your Member ID card to the instructor to indicate you are eligible for the discount. Visit goodlifeyoga.com or call 952-913-6557.

Seattle Sutton's

Seattle Sutton's is a meal pick-up/ delivery service that provides fresh meals to individuals who wish to eat healthy or to lose weight.

- Local (Minnesota and western Wisconsin): \$5 off per week
- National: \$100 off after 25 consecutive weeks on the program (about \$4 off per week)



Members can log on to **healthpartners.com/uofmga** for the most up-to-date discounts.



Phone Support



Personal assistance from your health partner

As a HealthPartners member, you have personal support whenever you need it. Contact us with any questions about your health or your coverage — we're here to help you get the most out of your health plan.

Member Services

Your main source for information on health plan benefits, claims, account balances, finding a provider and more. Nine of ten questions are resolved with the first call. Plus, you have a custom phone number just for University of Minnesota graduate assistants. That means the representative is prepared to give you personal support.

Available Monday through Friday, 7 a.m. to 7 p.m., CST. Please, call your graduate assistant number at 952-883-7500, 1-866-270-5434 or 952-883-5127 (TTY). Español: 952-883-7050 o 1-866-398-9119.

CareLineSM Service

Need advice or not sure if you should see a doctor? Talk to a nurse who is trained to review your symptoms and explain your treatment options.

Available 24/7, 365 days a year. Call **612-339-3663**, **1-800-551-0859 or 952-883-5474** (TTY).

BabyLine Phone Service

BabyLine helps expectant and new parents up to six weeks after the baby is born. Nurses can answer questions about mood swings, morning sickness, healthy eating, safe medications and more. Nurses can also help you tell the difference between normal discomfort and signs of preterm labor.

Available 24/7, 365 days a year. Call **612-333-2229** or **1-800-845-9297**.

HealthPartners® Nurse NavigatorSM Program

When you need help sorting out health and insurance issues, call our nurse navigators. You'll talk to skilled nurses who can research and coordinate healthcare based on your benefits and coverage. They can also guide you through tough decisions like choosing a treatment option.

Available Monday through Friday, 7 a.m. to 7 p.m., CST. Call **952-883-5000, 1-800-883-2177 or 952-883-5127 (TTY).**

Behavioral Health Personalized Assistance Line (PAL)

Talk to professionals who can help when you have questions about mental and chemical health network, benefits and services.

Available Monday through Friday, 7:30 a.m. to 5 p.m., CST. Call **952-883-5811 or 1-888-638-8787.**





When you've got questions, we've got answers. No matter what time of day, help is just a phone call away.





Disease and Condition Management



Helping you manage your health

If you have a disease or condition impacting your health, we're here to help. HealthPartners CareSpan® disease management services are free for eligible members, voluntary and confidential. These personalized programs provide you with valuable support to help you manage your health.

How the program works

Our disease and condition management programs are tailored to your needs and health condition. We will invite you to participate in the program that is right for you. Services available to you include:

- Mailed information and resources specific to your condition
- Online tools and resources for additional support

Depending upon your health status and needs, you may be contacted by phone by a personal health coach who is knowledgeable about your condition. Your personal health coach will work one-on-one with you over the phone to help you:

- Better understand your role in managing your disease or condition
- Manage medical, personal and emotional issues
- Improve communication and relationships with your doctor and pharmacist
- Understand and take your medications as prescribed
- Get the support you need
- Make healthy lifestyle choices

HealthPartners has disease and condition management programs for members with the following conditions:

- Asthma
- Coronary artery disease (CAD)
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Diabetes
- Healthy Pregnancy

Want to stop using tobacco?
Help is just a phone call
away! Call **Partners in Quitting** at 952-883-7800 or
toll-free at 1-800-311-1052.



For more information, call HealthPartners Member Services at 952-883-7500, 1-866-270-5434 or 952-883-5127 (TTY). You can find more information on our disease and condition management programs, and even self refer into the program, by visiting healthpartners.com/uofmga.



Healthy Pregnancy



Your partner for a healthy pregnancy

Are you a mom-to-be? Or are you planning to be? We can help you prepare for a healthy pregnancy!

What you get

Healthy Pregnancy is a free program for women who are pregnant or planning a pregnancy. Here's what's included:

- Online pregnancy assessment or planning assessment
- Timely e-mail newsletters with tips for a healthy pregnancy
- Personalized phone coaching from a registered nurse for those who are identified as at risk for a difficult pregnancy



It's as easy as 1-2-3!

- **1** Take a pregnancy assessment

 Take a 10-minute, confidential
 online assessment to gauge your
 prenatal health. There is even a
 separate planning assessment
 for women who are in the
 planning stages.
- 2 Get e-mails from the experts
 Watch your e-mail box for tips
 and information tailored for
 your specific state of pregnancy
 or planning.
- Get specialized personal support
 If you are identified to be at risk
 for a difficult pregnancy, you
 will be contacted by a registered
 nurse for personal coaching by
 phone to help keep you and your
 baby healthy.

Even if you aren't at risk and have questions, you can call our 24/7 BabyLine, a phone service staffed by specially trained OB/GYN nurses who focus on expectant and new parents, up to six weeks after delivery. Call 612-333-2229 or 1-800-845-9297.



To get started, go online to **healthpartners.com/uofmga** and log on to your secure account. Go to the Health and Wellness tab and select Healthy Pregnancy. Please call Member Services at **952-883-7500** or toll-free at **1-866-270-5434** if you have any additional questions.

Pharmacy Tools



Your pharmacy benefits

HealthPartners leads the way with pharmacy services to help you manage your prescriptions. With more than 60,000 pharmacy locations nationally and medications available through the mail, we make it easy for you to take care of your needs. Using HealthPartners online tools you can find the latest cost-saving options, fill your prescriptions, search the PreferredRx preferred drug list (formulary) and more.

Great ways you can save on your prescriptions!

1 Review the PreferredRx preferred drug list

- The PreferredRx preferred drug list is a list of medications that are covered by your pharmacy benefits. You can search for a specific medication, browse alphabetically or by category on healthpartners.com/preferredrx.
- Once you find your medication, you can log on to see your copay or coinsurance (the amount you pay).

2 Choose generics

- When you're searching the PreferredRx preferred drug list, check to see if your medication is a generic. If it's not, check to see if there is a generic in the same category that might work for you. Generic medications are identical to brand-name medications they work the same as brand names and save about \$100 per fill.
- You will almost always save on the amount you pay if you use a generic medication. To see if there is a generic medication for you, ask your doctor or visit healthpartners.com/preferredrx.

3 Rely on HealthPartners Mail Order Pharmacy

- HealthPartners Mail Order Pharmacy is a quick and easy way to fill your prescriptions.
 No driving, no waiting in line and no shipping charges!
- Plus, you will probably save on the amount you pay for your medications! To get started, call 952-833-0497 or 1-888-356-6656 or visit healthpartners.com/mailorder.

4 Use our online tools

- Use the online Drug Cost and Copay Calculator to compare medication costs, mail order pricing, find generics and discover other ways to save on your prescriptions.
- HealthPartners online tools can also help you find a network pharmacy, view and print your claims, check for potential medication interactions and research information on both prescription and non-prescription medications. To get started, please visit healthpartners.com/pharmacy.

5 Save money with the Half-Tablet Advantage program

- Cut your prescription bill in half with select medications when you use HealthPartners tablet-splitting program. With this program, you save money when you split higher strength tablets into your prescribed dose. For example, instead of 30 lower strength tablets, you receive 30 tablets with twice the strength to last for 60 doses two months for the price of one!
- For the list of eligible medications, please visit healthpartners.com/pharmacy.

Questions?

- Submit your questions online with the "Ask a pharmacist" tool at healthpartners.com/preferredrx.
- Or, call Member Services at 952-883-7500 or 1-866-270-5434.



Provider Reimbursement information for Medical Plans

Our goal in reimbursing providers is to provide affordable care for our members while encouraging quality care through best care practices and rewarding providers for meeting the needs of our members. Several different types of reimbursement arrangements are used with providers. All are designed to achieve that goal.

Some providers are paid on a "fee-for-service" basis, which means that the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.

Some providers are paid on a "discount" basis, which means that when a provider sends us a bill, we have negotiated a reduced rate on behalf of our members. We pay a predetermined percentage of the total bill for services.

Sometimes we have "case rate" arrangements with providers, which means that for a selected set of services the provider receives a set fee, or a "case rate," for services needed up to an agreed upon maximum amount of services for a designated period of time. Alternatively, we may pay a "case rate" to a provider for all of the selected set of services needed during an agreed upon period of time.

Sometimes we have "withhold" arrangements with providers, which means that a portion of the provider's payment is set aside until the end of the year. The year-end reconciliation can happen in one or more of the following ways:

- Withholds are sometimes used to pay specialty, referral or hospital providers who furnish services to members. The provider usually receives all or a portion of the withhold based on performance of agreed upon criteria, which may include patient satisfaction levels, quality of care and/or care management measures
- Some providers usually hospitals are paid on the **basis of the diagnosis** that they are treating; in other words, they are paid a set fee to treat certain kinds of conditions. Sometimes we pay hospitals and other institutional providers a set fee, or "**per diem**," according to the number of days the patient spent in the facility.
- Some providers usually hospitals are paid according to Ambulatory Payment Classifications (APCs) for outpatient services. This means that we have negotiated a payment level based on the resources and intensity of the services provided. In other words, hospitals are paid a set fee for certain kinds of services and that set fee is based on the resources utilized to provide that service.
- Occasionally our reimbursement arrangements with providers include some **combination** of the methods described above. For example, we may pay a case rate to a provider for a selected set of services needed during an agreed upon period of time, or for services needed up to an agreed upon maximum amount of services, and pay that same provider on a fee-for-service basis for services that are not provided within the time period or that exceed the maximum amount of services. In addition, although we may pay a provider such as a medical clinic using one type of reimbursement method, that clinic may pay its employed providers using another reimbursement method.

Check with your individual provider if you wish to know the basis on which he or she is paid.

Summary of utilization management programs

HealthPartners utilization management programs help ensure effective, accessible and high quality health care. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of health services. These programs include:

- Inpatient concurrent review and care coordination to support timely care and ensure a safe and timely transition from the hospital
- "Best practice" care guidelines for selected kinds of care
- Outpatient case management to provide care coordination
- The CareCheck® program to coordinate out-of-network hospitalizations and certain services.

We require prior approval for a small number of services and procedures. For a complete list, go to **healthpartners.com** or call Member Services. You must call CareCheck® at 952-883-5800 or 1-800-942-4872 to receive maximum benefits when using out-of-network providers for in-patient hospital stays; same-day surgery; new or experimental or reconstructive outpatient technologies or procedures; durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. We will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. Benefits will be reduced by 20 percent if CareCheck® is not notified

Our approach to protecting personal information

HealthPartners complies with federal and state laws regarding the confidentiality of medical records and personal information about our members and former members. Our policies and procedures help ensure that the collection, use and disclosure of information complies with the law. When needed, we get consent or authorization from our members (or an authorized member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable law and standards. Our policies and practices support appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, our patients and the community, while being sensitive to privacy. For a copy of our privacy notice, please visit healthpartners.com or call Member Services at 952-883-5000 or 1-800-883-2177.

Appropriate use and coverage of prescription medications

We provide our members with coverage for high quality, safe and cost-effective medications. To help us do this, we use:

- A preferred list of prescription medications that has been reviewed and approved for coverage based on quality, safety, effectiveness and value.
- · A special program that helps members who use many different medications avoid unintended medications interactions.
- The drug lists are available on **healthpartners.com**, along with information on how medications are reviewed, the criteria used to determine which medications are added to the list and more. You may also get this information from Member Services.

Services not covered

After you enroll, you will receive plan materials that explain exact coverage terms and conditions. This plan does not cover all health care expenses. In general, services not provided or directed by a licensed physician are not covered. The following is a summary of excluded or limited items:

- Treatment, services or procedures which are experimental, investigative or are not medically necessary
- · Dental care or oral surgery†
- Non-rehabilitative chiropractic services
- Eyeglasses, contact lenses, hearing aids and their fittings
- Private-duty nursing; rest, respite and custodial care†
- · Cosmetic surgery†
- · Vocational rehabilitation; recreational or educational therapy
- · Sterilization reversal and artificial conception processes†
- Physical, mental or substance-abuse examinations done for, or ordered by third parties†
- · Out-of-network coverage may also exclude preventive health care services

† except as specifically described in your plan materials.

THIS PLAN MAY NOT COVER ALL YOUR HEALTHCARE EXPENSES. READ YOUR PLAN MATERIALS CAREFULLY TO DETERMINE WHICH EXPENSES ARE COVERED.

For details about benefits and services, call Member Services at 952-883-5000 or 1-800-883-2177.

Language Services: If you do not speak English or cannot hear, you can get interpreters to come with you to your clinic or hospital. Oral interpretation can be given to you in your language. You may also be able to get written information in your language. Contact Member Services to arrange for an interpreter.

Plans are underwritten and/or administered by HealthPartners, Inc., Group Health, Inc., HealthPartners Insurance Company and HealthPartners Administrators, Inc. Fully insured Wisconsin plans are underwritten by HealthPartners Insurance Company.

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Bonus Benefits

In addition to awesome HealthPartners benefits, students and dependents enrolled in the Graduate Assistant Health Plan have access to these cool bonus benefits through the University of Minnesota*.

Dental Care Benefits

Here's a reason to smile! You, the primary member, receive preventive services such as routine exams, x-rays and cleanings at NO COST at the dental clinic designated for your campus. Your dental plan also pays 80 percent of basic restorative services and 50 percent of major restorative services up to \$1,000. Dependents will receive preventive and other covered restorative dental services at a discount of 20-30 percent. Coverage starts September 1, 2010. Call to make an appointment today!

Twin Cities Campus Students: Boynton Health Service Dental Clinic 612-624-9998

http://www.bhs.umn.edu/services/dentalclinic.htm

Duluth Campus Students: Lake Superior Dental Associates 218-728-6445

http://www.lakesuperiordental.com/

Emergency Travel Assistance Program

Plan members and their dependents traveling 100 or more miles away from home and outside of their home country, have emergency medical, travel and personal security assistance 24 hours a day, anywhere in the world, through MEDEX, a leading provider of international travel assistance services. From finding an English-speaking doctor to replacing a prescription, MEDEX has the resources and experience to offer rapid coordination and monitoring of medical care while you are abroad.

Option to Continue Coverage

After losing eligibility for the plan (for example, your assistantship drops below 25 percent, you leave your appointment, or your appointment, fellowship or traineeship ends), plan members have the option to continue coverage for up to 18 months by paying the full cost of coverage. To request continuation, simply complete the Continuation of Coverage Form found on the Student Health Benefits Web site and return within 60 days of loss of coverage.

For more information on these services, please contact the University of Minnesota Office of Student Health Benefits at 612-624-0627, 1-800-232-9017 or gradins@bhs.umn.edu or visit the Web page specific to your campus.

- Twin Cities Campus Students: http://www.shb.umn.edu/twincities/graduate-assistants.htm
- · Duluth Campus Students: http://www.shb.umn.edu/duluth/graduate-assistants.htm

^{*} These bonus benefits are not a part of the HealthPartners plan. They are provided by the University of Minnesota.





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Our mission is to improve the health of our members, our patients and the community.