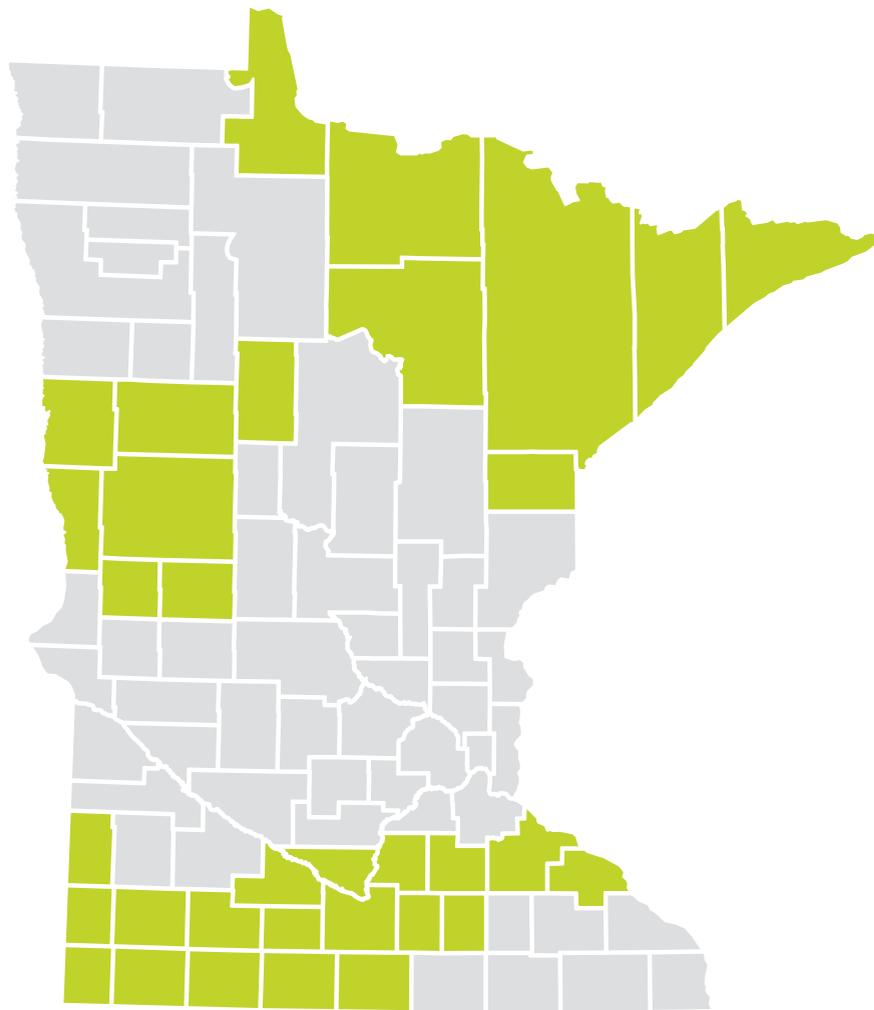


HealthPartners®

Short Term Plan Rate Guide

Proudly serving Area C:

Becker, Blue Earth, Brown, Carlton, Clay, Cook, Cottonwood, Douglas, Faribault, Goodhue, Grant, Hubbard, Itasca, Jackson, Koochiching, Lake, Lake of the Woods, Le Sueur, Lincoln, Martin, Murray, Nicollet, Nobles, Otter Tail, Pipestone, Rice, Rock, St. Louis, Steele, Wabasha, Waseca, Watonwan and Wilkin counties)





Short Term plan overview

Why should I choose Short Term coverage?

You want Short Term coverage to protect you from the high cost of serious illnesses and accidents. HealthPartners® Short Term plans give instant protection at a low cost, for those between jobs, just out of school or who are waiting for coverage to start through their employer.

- **Coverage you need – now.** Get coverage instantly with our quick and easy online shopping application.
- **Best care from top docs.** You want great care to keep you at your best. That's why you get access to 950,000 providers and 6,000 hospitals nationwide.
- **Get support.** HealthPartners' award-winning customer service is here to help.

Is a short term plan for me?

Short term plans don't take the place of comprehensive medical plans. Individuals are required to have health insurance that qualifies as minimum essential coverage, as defined by the Affordable Care Act. Short term health plans are meant to be temporary, so they are not required to meet those requirements.

This plan doesn't cover all health care expenses. Like all short term plans, HealthPartners Short Term doesn't cover pre-existing conditions, including pregnancy. A pre-existing condition is any injury, illness or condition that has received medical treatment, care, advice or diagnosis, symptoms or a manifestation before the effective date of your coverage. Please see your HealthPartners Short Term plan contract for details on what is and isn't covered.



Short Term Plan Summary of Benefits

For a detailed description of terms and conditions or other questions, our Individual Sales staff is ready to help: email individualsales@healthpartners.com or call **952-883-5599** or **877-838-4949**. Or contact your agent or broker.

	SHORT TERM 1000	SHORT TERM 2000
Coverage length	30, 60 or 90 days	30, 60 or 90 days
Deductible (per person)	\$1,000	\$2,000
Out-of-pocket maximum (per person)	\$3,000	\$4,000
Lifetime maximum per person	\$1,000,000*	
Coinsurance	You pay 20% after deductible is met	
Preventive care: well-child services up to age six; immunizations up to age 18	You pay nothing (Other preventive care is not covered*)	
Office visits Emergency and urgent care Inpatient and outpatient hospital care Outpatient MRI and CT Laboratory services Home hospice services	You pay 20% after deductible. Then you pay nothing when you reach your out-of-pocket maximum.	
Prescription medicines PreferredRx formulary; excludes birth control	You pay 20% after deductible. Then you pay nothing when you reach your out-of-pocket maximum.	

See page 7 for more information on eligibility and pricing.

Remember: You will get the highest benefit level and lowest out-of-pocket costs when you see a network provider for your care. For out-of-network costs and deductibles, please contact Individual Sales.

*Short term, limited duration plans are not subject to certain provisions of federal health care reform, including provisions related to lifetime limits, dependent coverage, preventive care and pre-existing conditions. If you have questions about how health care reform impacted our plans, please contact Individual Sales.

Services not covered: After you enroll, you will receive a Membership Contract that explains 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. Services not covered include, but are not limited to: treatment, services or procedures which are experimental, investigative or are not medically necessary; dental care or oral surgery, including orthognathic**; 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.**

**except as specifically described in your Membership Contract



Prescriptions and discounts

Prescription medicines

With this plan, you pay in full for your prescription at the pharmacy. When you show your HealthPartners Member ID card, you have the advantage of our contracted discounts at more than 65,000 pharmacies nationwide.

If the medicine is used to treat a newly diagnosed condition and is not excluded, you can submit your pharmacy claim for application to your deductible. Once you've reached your deductible, you'll receive a reimbursement.

Go to healthpartners.com/formulary and click on *PreferredRX Formulary* to see what medicines are covered.

Healthy DiscountsSM program

Use your HealthPartners Member ID card to get discounts at many popular local and national retailers of health and well-being products and services. Discounts include:

- Eyewear
- Fitness and wellness classes
- Healthy eating programs and delivery services
- Recreational equipment
- Spa services
- Swimming lessons
- Healthy mom and baby products

For a list of participating companies and details on discounts, go to healthpartners.com/discounts.



For your eyes only

Save up to 35 percent on eyeglasses at thousands of retailers including LensCrafters[®], Pearle Vision[®], Target Optical[®] and more. Plus, get great deals on contact lenses.



Your plan made easy

It's easy to manage your plan and feel confident when you get care. Whether it's online, on your mobile device or via text.

WHEN YOU WANT TO	ONLINE	MOBILE	TEXT
See your benefits and specific plan information.	•		
See your past care including claims and explanations of benefits (EOBs).	•		
Check your plan balances, including your deductible, out-of-pocket maximum and more.	•	•	•
Search for doctors in your network or near your current location.	•	•	
Get cost estimates specific to your plan, benefits and deductible when you search for a treatment or procedure.	•		
View your HealthPartners Member ID card and fax it to your doctor's office.	•	•	
Find tips for getting and staying healthy.	•		•

Connect online

With a *myHealthPartners* account, your specific benefits, claims and tips for living healthy are just a click away. You'll even get cost saving tips based on your claims! Learn more about what your *myHealthPartners* account can do for you at healthpartners.com/getmyinfo.

Connect on your mobile device

Whether you're at home or on-the-go, your plan information is right at your fingertips. With the *myHP* mobile app and mobile site, using your plan is easy wherever you are. Visit healthpartners.com/gomobile or text **MOBILE** to **77199** to learn more.

Text to connect

Check your plan balances by setting up your mobile phone to get texts from HealthPartners. Go to healthpartners.com and log on to your *myHealthPartners* account to enter your phone number. Once you verify your phone number, text us to get your balance.



We're here to help

Contact us 24/7 when you have questions about your coverage or health — we're here to help.

IF YOU HAVE QUESTIONS ABOUT	CONTACT
<ul style="list-style-type: none"> • Your coverage, claims or account balances • Finding a doctor, dentist or specialist in your network • Finding care when you're away from home • Immunizations and paperwork needed for travel 	<p>Member Services</p> <p>Monday – Friday, 7 a.m. – 7 p.m. Call the number on the back of your member ID card or 952-967-7540 or 866-232-1166.</p> <p>Español: 952-883-7050 o 866-398-9119 Interpreters are available if you want one.</p> <p>healthpartners.com</p>
<ul style="list-style-type: none"> • Whether you should see a doctor • Home treatment options • A medication you're taking 	<p>CareLineSM service — nurse line</p> <p>24/7, 365 days a year 612-339-3663 or 800-551-0859</p> <p>healthpartners.com/healthlibrary</p>
<ul style="list-style-type: none"> • Understanding your health care and benefits • How to choose a treatment option 	<p>HealthPartners[®] Nurse Navigator program</p> <p>Monday – Friday, 7 a.m. – 7 p.m. Call the Member Services number on the back of your member ID card.</p> <p>healthpartners.com/decisionsupport</p>
<ul style="list-style-type: none"> • Your pregnancy • The contractions you're having • Your new baby 	<p>BabyLine phone service</p> <p>24/7, 365 days a year 612-333-2229 or 800-845-9297</p> <p>healthpartners.com/healthlibrary</p>
<ul style="list-style-type: none"> • Finding a mental or chemical health care professional in your network • Your behavioral health benefits 	<p>Behavioral Health Navigators</p> <p>Monday – Friday, 8 a.m. – 5 p.m. 952-883-5811 or 888-638-8787</p> <p>healthpartners.com</p>



Pricing your plan is easy

Use this worksheet to estimate your total premium

The fine print

Here are some important things to know before you apply for your HealthPartners® Short Term plan:

- Coverage is available to Minnesota residents only.
- Children can be policyholders on this plan.
- Premiums are charged for a maximum of three children per family. If a child age 90 days to 18 years old is the policyholder, use the 90 days to 18 rate. Any additional children on that plan will be charged the dependent child rate.
- Only one plan and coverage term is allowed per family.
- Full payment, including a \$20 non-refundable application fee, is required at the time of application. If we do not receive your full payment, your application will be returned to you. If you are ineligible for coverage, we will return your entire payment.

Estimating your total premium

Your chosen coverage length _____ days

Your rate \$ _____

Spouse rate (if applicable) \$ _____

1 child \$ _____

2 children \$ _____

3 children \$ _____

Application fee \$ 20 _____

Estimated premium \$ _____

Let us do the math for you!

Visit healthpartners.com/individual and click *Price and compare* to get started!



Short Term Rates Area C - 30 Days

AGE	SHORT TERM 1000	SHORT TERM 2000
90 Days - 18	\$64.08	\$51.26
19 - 24	\$59.32	\$47.47
25 - 29	\$59.32	\$47.47
30 - 34	\$66.70	\$53.36
35 - 39	\$69.78	\$55.83
40 - 44	\$79.42	\$63.53
45 - 49	\$101.57	\$81.26
50 - 54	\$137.78	\$110.22
55 - 59	\$177.06	\$141.64
60 - 64	\$177.98	\$142.38
1 Child	\$51.28	\$41.02
2 Children	\$102.56	\$82.04
3+ Children	\$153.84	\$123.06

Rates are effective from April 1, 2016 through December 31, 2016.

Rates are subject to change.



Short Term Rates Area C - 60 Days

AGE	SHORT TERM 1000	SHORT TERM 2000
90 Days - 18	\$128.16	\$102.52
19 - 24	\$118.64	\$94.94
25 - 29	\$118.64	\$94.94
30 - 34	\$133.40	\$106.72
35 - 39	\$139.56	\$111.66
40 - 44	\$158.84	\$127.06
45 - 49	\$203.14	\$162.52
50 - 54	\$275.56	\$220.44
55 - 59	\$354.12	\$283.28
60 - 64	\$355.96	\$284.76
1 Child	\$102.56	\$82.04
2 Children	\$205.12	\$164.08
3+ Children	\$307.68	\$246.12

Rates are effective from April 1, 2016 through December 31, 2016.

Rates are subject to change.



Short Term Rates Area C - 90 Days

AGE	SHORT TERM 1000	SHORT TERM 2000
90 Days - 18	\$192.24	\$153.78
19 - 24	\$177.96	\$142.41
25 - 29	\$177.96	\$142.41
30 - 34	\$200.10	\$160.08
35 - 39	\$209.34	\$167.49
40 - 44	\$238.26	\$190.59
45 - 49	\$304.71	\$243.78
50 - 54	\$413.34	\$330.66
55 - 59	\$531.18	\$424.92
60 - 64	\$533.94	\$427.14
1 Child	\$153.84	\$123.06
2 Children	\$307.68	\$246.12
3+ Children	\$461.52	\$369.18

Rates are effective from April 1, 2016 through December 31, 2016.

Rates are subject to change.

Important Information about HealthPartners Individual plans

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® program at **952-883-5800** or **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 approved 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 **952-967-7540**

or **866-232-1166**. Please contact your provider for a copy of the HealthPartners privacy notice.

Appropriate use and coverage of prescription medicines

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

- A formulary, which is a preferred list of prescription medicines 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 medicines avoid unintended medicine interactions.

The preferred medicine list is available on **healthpartners.com**, along with information on how medicines are reviewed, the criteria used to determine which medicines 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 a Membership Contract that explains 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. Services not covered include, but are not limited to:

- Treatment, services or procedures which are experimental, investigative or are not medically necessary
- Adult dental care or oral surgery, including orthognathic[†]
- 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[†]

[†] except as specifically described in your Membership Contract.

READ YOUR MEMBERSHIP CONTRACT CAREFULLY TO DETERMINE WHICH EXPENSES ARE COVERED.

For details about benefits and services, call Member Services at **952-967-7540** or **866-232-1166**.

HealthPartners negotiates with some providers to pay discounted rates. In those cases, coinsurance (a specific percentage of the charge) is based on that discounted amount. Copayments (flat amounts specified in advance for categories of service, such as office visits or prescriptions) are based on an aggregate of billed charges for that type of service. Our mission is to improve health and well-being in partnership with our members, patients and community.

To find additional HealthPartners Individual plans please visit **healthpartners.com** or **mnsure.org**.



Questions or ready to enroll?

Visit healthpartners.com/individual

Call Individual Sales at **952-883-5599** or toll free **877-838-4949**

Or contact your agent or broker

The HealthPartners family of health plans is underwritten and/or administered by HealthPartners, Inc., Group Health, Inc., HealthPartners Insurance Company or HealthPartners Administrators, Inc. Fully insured Wisconsin plans are underwritten by HealthPartners Insurance Company.

8593 (11/15) © 2015 HealthPartners

