

Welcome to the 2016-2017 **GRADUATE ASSISTANT HEALTH PLAN**

Administered by the Office of Student Health Benefits



Student Health Benefits

UNIVERSITY OF MINNESOTA

Driven to DiscoverSM



- On-campus resources
- Great choice of doctors
- Award-winning service
- Tools to stay healthy



HealthPartners[®]

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Welcome

July 1, 2016

Dear Graduate Assistant,

The University of Minnesota is pleased to welcome you to the 2016–2017 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. The University-sponsored Graduate Assistant Health Plan (GAHP) is comprehensive and affordable health care coverage designed to meet the unique needs of graduate assistants and their dependents.

All new graduate assistants, current GAHP enrollees with enrolled dependents, and current GAHP enrollees who wish to enroll dependents or maintain dependent coverage on the plan for fall semester 2016 must complete the enrollment process by September 20, 2016.

Highlights of the plan include:

- No in-network deductible
- 100 percent coverage of eligible expenses after a \$10 office visit co-pay
- Pharmacy benefit in the HealthPartners network with no annual maximum benefit
- Dental care benefit—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 GAHP. More details and 2016–2017 plan rates can be found on the plan's website. 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 encouraged to review the information found in this brochure and online carefully.

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



Susann Jackson

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Office of Student Health Benefits

University of Minnesota

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Minneapolis, MN 55455

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Fax: 612-626-5183 or 1-800-624-9881

umgahbo@umn.edu



UNIVERSITY OF MINNESOTA

How to Enroll

All graduate assistants who wish to take advantage of the plan fall semester 2016 must complete the enrollment process.

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, 2016, whichever is later.

Student Enrollment

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

- **Enrollment Form** — available at www.shb.umn.edu

Dependent Enrollment

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

- **Enrollment Form** — available at www.shb.umn.edu
- **First two months' payment for dependents**

Once an applicant's eligibility is verified by the Office of Student Health Benefits, enrollment will be processed. Primary 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 on record with the University.

** Students currently enrolled on the plan without dependents do not need to re-enroll. Current coverage will continue after the Office of Student Health Benefits verifies eligibility. **Those with dependents need to re-enroll, even if they are not re-enrolling their dependents.***

Enter New Health Plan Information

In the MyU Student center, you may be asked to complete the University of Minnesota Health Coverage Declaration to waive enrollment in the Student Health Benefit Plan. If prompted, you should enter the following information:

- Name of insurance company: Graduate Assistant Health Plan
- Health plan member ID number: (your student ID number)
- Health plan group number: 24000

ENROLLMENT QUESTIONS

For more information about enrollment, please contact the Office of Student Health Benefits at **612-624-0627** or umshbo@umn.edu, or visit the Office of Student Health Benefits website at shb.umn.edu.



Convenient access on campus

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

As a University of Minnesota student, you have access to on-campus health care 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

www.bhs.umn.edu

Minneapolis Clinic, 410 Church Street S.E.,
Minneapolis, MN 55455, **612-625-8400**
Monday, Tuesday, Wednesday and Friday,
7:45 a.m.–4:30 p.m.; Thursday, 9 a.m.–4:30 p.m.;
closed University holidays.

- 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**—Primary plan members and pediatric enrollees receive comprehensive benefits including preventive services such as routine exams, X-rays, and cleanings at **NO COST**. Call **612-624-9998**.
- **Eye Clinic**—Select from a wide variety of designer frames at 20-40 percent off suggested retail prices. Call **612-624-2134**.
- **Pharmacy**—Prescriptions and over-the-counter medications at competitive prices. Call **612-624-7655**.
- **Boynton Health St. Paul Clinic**—
Offering primary care, mental health, nutrition and physical therapy services, plus Gopher Quick Clinic.

Gopher Quick Clinic—

Walk-in Care for Minor Acute Illnesses

www.bhs.umn.edu/gopher-quick-clinic

Locations: Boynton East Bank, Boynton St. Paul

Duluth Campus Students

UMD Health Services

www.d.umn.edu/hlthserv

615 Niagara Court, Duluth, MN 55812
Phone: **218-726-8155**, Fax: 218-726-6132
Monday, Tuesday, Wednesday and Friday, 8 a.m.–
4 p.m., Thursday, 9 a.m.–4 p.m. Summer Session
(4th week in May through August), Monday–Friday,
9 a.m.–3 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

www.lakesuperiordental.com

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

- Primary plan members and pediatric enrollees receive comprehensive benefits including preventive services such as routine exams, X-rays and cleanings at **NO COST**.

Rochester Campus Students

UMR Health Services

[www.r.umn.edu/student-life/health-and-wellness/
health-services](http://www.r.umn.edu/student-life/health-and-wellness/health-services)

OMC Skyway Clinic, 2nd Floor of 318 Commons,
Rochester, MN 55904

Phone: **507-292-7250**

Monday through Friday, 8 a.m.–5 p.m.

- UMR Health Services provides general health, nutrition, smoking, gynecological services, anxiety, birth control, depression counseling and lab testing.

Bonus Benefits

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

Dental Care Benefits

Here's a reason to smile! You, the primary member and pediatric enrollees, 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 to 30 percent. Coverage starts September 1, 2016. Call to make an appointment today!

Twin Cities Campus Students:

Boynton Health Dental Clinic

612-624-9998

www.bhs.umn.edu/east-bank-clinic/dental-clinic.htm

Duluth Campus Students:

Lake Superior Dental Associates

218-728-6445

www.lakesuperiordental.com

Emergency Travel Assistance Program

Plan members and their dependents traveling 100 or more miles away from home are eligible to obtain no cost medical assistance 24 hours a day anywhere in the world, through UnitedHealthcare Global, a leading provider of international travel assistance services. From finding an English-speaking doctor to replacing a prescription, UnitedHealthcare Global 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 Office of Student Health Benefits website and return within 60 days of loss of coverage.

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

FOR MORE INFORMATION

For more information, please contact the University of Minnesota Office of Student Health Benefits at 612-624-0627, 800-232-9017, umgahbo@umn.edu, or visit www.shb.umn.edu.



UNIVERSITY OF MINNESOTA



Open Access plan

With HealthPartners® Open Access plan, choose from the doctors in your network, and get care wherever and whenever it's best for you. It's that simple.

About your plan

You'll also have network access to many services like:

- Convenience and online care
- Specialty care — no referrals needed
- Prescription medications
- Preventive care

Find a doctor in your network

When it comes to your health care, finding the right doctor is really important. To see if your doctor is in the Open Access network or to find a new one, you can:

- Visit healthpartners.com/networks and search Open Access. Search for doctors and clinics, by specialty and more.
- Learn how doctors rate on cost and quality.
- Choose from more than 950,000 doctors and other care providers, plus 6,000 hospitals in the United States.

How your plan works

Learn more about how the Open Access plan works by using this chart with your Summary of Benefits and Coverage (SBC).

YOUR OPEN ACCESS PLAN

Your network — where can I go to the doctor?	Open Access network SBC Page 1
Your deductible — if I have a deductible, how much is it?	SBC Page 1
Your annual out-of-pocket limit — what's the most I will pay for health care?	SBC Page 1
Your office visit costs — how much will I pay for office visits?	SBC Page 2
Your tests — how much will I pay for MRIs, CT scans and X-rays?	SBC Page 2
Your emergency needs — how much does it cost to go to urgent care or the emergency room?	SBC Page 3

Plus, routine preventive care is typically covered at 100 percent. Please check Page 2 of your SBC for more details.

Need help with your plan?

Call Member Services or log on to your *myHealthPartners* account.

Graduate Assistant Health Plan and Dependent Plan 1



HealthPartners®

HealthPartners Open Access Choice

Graduate Assistant Health Plan and Dependent Plan 1

The following is an overview of your HealthPartners coverage. For exact coverage terms and conditions, consult your plan materials, or call Member Services at 952 883-7500 or 1-866-270-5434.

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		
Lifetime maximum	Unlimited	
Plan year deductible	None	\$200 per person; \$600 per family
Plan year medical out-of-pocket maximum	\$2,500 per person	
Plan year prescription out-of-pocket maximum	\$300 per person	
Plan year professional out-of-pocket maximum	None	None
Preventive Health Care		
▪ 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
Office Visits		
▪ 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 (neuromusculo-skeletal conditions only)	\$10 copayment	80% coverage after deductible
▪ Mental health care	\$10 copayment	80% coverage after deductible
▪ Chemical health care	\$10 copayment	80% coverage after deductible
Convenience Care		
▪ Convenience clinics (retail clinics)	\$5 copayment	80% coverage after deductible
Emergency Care		
▪ Urgently needed care at an urgent care clinic or medical center	\$10 copayment	\$10 copayment
▪ Emergency care at a hospital ER	\$40 copayment	\$40 copayment
▪ Ambulance	80% coverage	80% coverage
Inpatient 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
Outpatient Care		
▪ Scheduled outpatient procedures	100% coverage	80% coverage after deductible
▪ Outpatient Magnetic Resonance Imaging (MRI) and Computing Tomography (CT)	100% coverage	80% coverage after deductible
Durable Medical Equipment		
▪ Durable medical equipment & prosthetics	80% coverage	80% coverage
Prescription Drugs <i>34-day supply; 3 cycles of oral contraceptives; 90-day supply for mail order</i>	HealthPartners Participating Pharmacy Benefit	Non Participating Pharmacy Benefit
Retail Pharmacy Copayment for 34-day supply		
▪ 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 Copayment for 90-day supply		
▪ Generic Preferred**	\$20 copayment	
▪ Brand Preferred**	\$50 copayment	
▪ NonPreferred**	\$100 copayment	

Note: UMD Graduate Assistants and their adult dependents do not pay a copayment for available services at UMD Health Services.

** When a member purchases a brand drug when a chemically equivalent generic is available, the member will pay the brand copay and the difference in cost between the brand drug and the generic drug, regardless of whether "dispense as written" is written on the prescription.

Graduate Assistant Health Plan and Dependent Plan 2



HealthPartners®

HealthPartners Open Access Choice

Dependent Plan 2

The following is an overview of your HealthPartners coverage. For exact coverage terms and conditions, consult your plan materials, or call Member Services at 952 883-7500 or 1-866-270-5434.

Plan highlights	In-network	Out-of-network
Partial listing of covered services	Care from a network provider	Care from an out-of-network provider
Deductible and Out-of-Pocket		
Lifetime maximum	Unlimited	
Plan year deductible	\$100 per person; \$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 family, 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	90% coverage after deductible
▪ Allergy injections	\$25 copayment	90% coverage after deductible
▪ Physical, occupational & speech therapy	\$25 copayment	90% coverage after deductible
▪ Chiropractic care (neuromusculo-skeletal conditions only)	\$25 copayment	90% coverage after deductible
▪ Mental health care	\$25 copayment	90% coverage after deductible
▪ Chemical health care	\$25 copayment	90% coverage after deductible
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	90% coverage after deductible
Durable Medical Equipment		
▪ Durable medical equipment & prosthetics	90% coverage after deductible	90% coverage after deductible
Prescription Drugs 34-day supply; 3 cycles of oral contraceptives; 90-day supply for mail order	HealthPartners Participating Pharmacy Benefit	Non Participating Pharmacy Benefit
Retail Pharmacy Copayment for 34-day supply		
▪ 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 Copayment for 90-day supply		
▪ Generic Preferred**	\$20 copayment	
▪ Brand Preferred**	\$50 copayment	
▪ NonPreferred**	\$100 copayment	

Note: UMD Graduate Assistants and their adult dependents do not pay a copayment for available services at UMD Health Services.

** When a member purchases a brand drug when a chemically equivalent generic is available, the member will pay the brand copay and the difference in cost between the brand drug and the generic drug, regardless of whether "dispense as written" is written on the prescription.



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 	<p>Member Services</p> <p>Monday – Friday, 7 a.m. – 7 p.m., CT Call the number on the back of your member ID card or 866-270-5434.</p> <p>Español: 866-398-9119 Interpreters are available if you need one.</p> <p>healthpartners.com/uofmga</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 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, 8 a.m. – 5 p.m., CT 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 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., CT 800-883-2177</p> <p>healthpartners.com/uofmga</p>



Is your medication covered?


Learn more about how your medication is covered under the plan you choose.

Is your prescription covered?

You can see if your prescriptions are covered by searching the GenericsPlusRx formulary. A formulary is a list of medications that are covered by your plan.

Searching the list is easy. Just go to healthpartners.com/genericsplusrx and search by medication name, category or first letter. You can also print the list of covered medications.

What if your medication isn't on the list?

When you search GenericsPlusRx, medications will come up with **F** (formulary), **NF** (non-formulary), or  (excluded). Excluded drugs aren't eligible to be covered. Depending on your benefits, non-formulary medications may be covered but cost more than those medications on the formulary.

To switch to a formulary medication, we can help you see what your options are:

- Go to healthpartners.com/genericsplusrx.
- Under *Brand & Generic Name Search*, choose the type of medication you're taking.
- Choose the subclass of the type of medication you're taking.
- Print out the list of medications that comes up. Bring it to your doctor to see if a formulary medication **F** will work for you.


How much do you have to pay for your prescriptions?

The amount you have to pay depends on two things:

- If your medication is on the **formulary**
- Whether it's a **generic** or **brand name** medication

You'll usually save the most money by taking a generic medication that's on the formulary.

To see what group your medication is in, use this key when you're searching GenericsPlusRx online.

- *Generic will be in all lower case italics*
- BRAND, oral contraceptives and Accutane generics will be in all CAPS
- Specialty drugs will be shown as 

You can see what your benefits are by looking at your Summary of Benefits and Coverage.

Which pharmacies can you use?

You have prescription coverage at most pharmacies around the country. But did you know the pharmacy you go to can affect the cost of your medications? HealthPartners has tools you can use to find a pharmacy that's convenient for you and offers your medications at the best price.

At healthpartners.com/pharmacy you can use the:

- *Pharmacy locator* to see what network pharmacies are in your neighborhood
- *Drug cost calculator* to see how the cost of your prescriptions changes depending on your pharmacy



For help understanding your medications and saving money on your prescriptions, visit healthpartners.com/pharmacy. Once you're there, log on to your *myHealthPartners* account and select *Email a pharmacist*.



Get healthy. We'll help.

No matter where you are on the path to better health, we have a program that fits your busy life.

Know healthy

It's easy to get started. Take your first step by registering for a biometric health screening through Boynton Health. Screenings only take about 15 to 20 minutes and are offered at no cost to you and your spouse. Trained Boynton staff will perform tests for cholesterol, body mass index, blood pressure and more -- and help you interpret your results.

Watch your email for more information on how to sign up for your screening.

The next step is to complete the health assessment. This quick, online assessment asks you questions about your diet, exercise, sleep, stress and more. You'll discover how you can be healthier. Once you know your health, you'll learn what steps you can take to maintain or improve it.

After taking the assessment, you'll select any of the following activities to best meet your needs.

Get healthy with a personal coach

Do you need extra support? Do you prefer talking to a person more than being online? Get the support of a health coach to help you reach your goals. You'll work with a registered dietitian, health educator or exercise specialist. You can schedule phone calls when it's convenient for you.

Watch for your invitation to get started on your way to well-being. Details will be coming soon!

Get healthy with a virtual coach

Tailored and unique to you, virtual coaching helps you achieve your health goals. Watch, listen and interact online with these motivating and fun activities. Each topic contains three "conversations" that take about 20 minutes each.

Get healthy online

Are you self-motivated? Love being online? If so, our online programs are perfect for you. They're available anytime, anywhere, and only take eight weeks to complete. Just long enough for you to see results.

Get healthy with a mobile app

With the MePlus mobile app, you can track steps, sleep and tobacco use at your fingertips. And, sync your activity tracker to keep track of steps on-the-go.





Get healthy savings

Want to save money while doing something great for your health?
Get special discounts while getting healthy!

Rec Well Membership reimbursement

Twin Cities campus graduate assistants may be eligible to receive up to a \$20 per month reimbursement toward your member dues when you visit the Minneapolis or St. Paul Rec & Wellness center at least eight times a month. To learn more or to sign up, call **612-625-6800** or visit www.rewell.umn.edu/facilities/minneapolis.php.

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
- Healthy mom and baby products
- Recreational equipment
- Spa services
- Swim lessons

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



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.

*Not all locations apply. Frequent Fitness program is limited to employees and covered spouses of HealthPartners senior or individual medical plans and members of participating employer groups. Some restrictions apply. Termination of club membership may result in forfeiture of any unpaid incentive. See participating club locations for program details. The information here should not be used as medical advice.



Healthy pregnancy support

Whether you're pregnant or planning a pregnancy, this can be an exciting time. You may have questions or just need someone to talk to. We're here to help.

Get your questions answered by a nurse

If you're at risk for a difficult pregnancy, you'll get a call from an experienced nurse trained to work with pregnant women and their families. They'll give you the help you want and work with you and your family so you can have the best pregnancy possible. Plus, you'll get connected to valuable resources for a happy, healthy pregnancy.

Get tips timed to your pregnancy

After you get started by taking the Healthy Pregnancy survey, you can choose to get helpful emails with tips about eating right, what to expect and how to stay healthy throughout your planning and pregnancy.

Take the survey today.

Log on at healthpartners.com/uofmga.

Get resources for your pregnancy

Get your questions answered 24/7

If you're pregnant or have a new baby who's six weeks old or younger, call the BabyLine phone service to get quick answers about morning sickness, pre-term labor and more. Call **612-333-2229** or **800-845-9297**.

Sign up for free texts

With text4babySM, you'll get helpful weekly texts throughout your pregnancy and your baby's first year. All texts are free, even if you don't have a text messaging plan on your phone. Sign up by texting **BABY** to **511411** (or **BEBE** for Spanish). For more information, visit text4baby.org.

Find resources online

Get helpful information and great tools for your pregnancy and planning a pregnancy online with the *Health Information Library*. Just visit healthpartners.com/healthlibrary.

How to get started

Get started by taking the Healthy Pregnancy survey. This simple, confidential survey helps us to better understand the type of support that best fits your pregnancy. If you're planning to become pregnant, there's a separate survey just for you.

Visit healthpartners.com/uofmga and log on. If you don't have a HealthPartners online account, you'll need to create one. If you have questions, call Member Services at **952-883-7500** or **800-270-5434**.





Healthy living support

Sometimes medical conditions get in the way of what's important to you, but don't worry, we're here to help.

Nurse support when you need it

Our registered nurses are specially trained to help you focus on what's important to you and help you feel as well as possible. When you work with a nurse, they'll keep your doctor or clinic informed about your condition and any services provided to you.

Tips and resources for you

BY MAIL – You may receive resources in the mail with useful information, such as tips on how to best manage your care and where to go for more support.

ONLINE – You can also find helpful information on your health condition, get help making decisions about your health and interact with a virtual coach online.

How to get started

If you have a medical condition, we'll get in touch with you by mail or phone inviting you to participate in our condition management support. Or you can sign up at healthpartners.com/uofmgma. Partnering with us is free, voluntary and confidential.

IF YOU'D LIKE TO	VISIT
Find information on your health condition, helpful topics and tools.	healthpartners.com/healthlibrary
Get help making decisions about your health and find tools to walk you through making a choice that's right for you.	healthpartners.com/decisionsupport
Interact with a virtual coach to achieve your goals.	healthpartners.com/letstalk



Get started today at healthpartners.com/uofmgma.

You can also call Member Services at **952-883-7500** or **800-270-5434**.

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 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 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 formulary 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 medication interactions

The formulary is available at **healthpartners.com/pharmacy**, 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.

THIS PLAN MAY NOT COVER ALL YOUR HEALTH CARE EXPENSES. READ YOUR PLAN MATERIALS AND SUMMARY OF BENEFITS AND COVERAGE (SBC) CAREFULLY TO DETERMINE WHICH EXPENSES ARE COVERED.

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



Notes

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Student Health Benefits

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The HealthPartners family of health plans are 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.

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