MORE POWER TO YOU
Feel confident and in control when you get care.

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Health Plan Information for HSA Groups
Welcome to School District 622 Health Insurance!

Please review this handout carefully as it contains important information regarding the health plans and benefits administered by HealthPartners.

🌟 Your health plan options depend on your bargaining unit within the District. Summaries of the following health plans can be found as inserts to this document. For more information, please refer to the Plans & Policy section of SmartBen or contact the Benefits Office.

Clerical, Education Assistants, Local 70, Non Units, Paraprofessionals, Principals:
NationalONE 200-25
NationalONE $2600-100% HSA (Health Savings Account)
NationalONE HDHP $6200

🌟 All plans utilize the Open Access Provider Network. To search the provider network:

✧ On-line
www.healthpartners.com

In the middle of the page under Insurance, choose Find care in your plan network. Go to Group Medical Networks, then under the Open Access Plans option (1st choice listed), click on the Find a Doctor/Dentist or Find a Clinic/Hospital and enter search criteria

✧ For personal assistance, contact HealthPartners Member Services
1-800-883-2177; reference Group Number 23643

🌟 SmartBen is District 622’s on-line benefit system. The site is accessible via the Internet at www.smartben.com and can be accessed 24 hours a day, seven days a week. Changes to your benefits due to new benefits eligibility, a Life Event or Open Enrollment will all be done through SmartBen. SmartBen step-by-step instructions can be found at www.isd622.org/benefits

Logging onto SmartBen
Go to www.smartben.com and enter your Username (Social Security Number, no dashes) and Password (eight-digit date of birth, MMDDYYYY format).

Example 123456789 for Social Security number 123-45-6789
Example: 06101964 for date of birth on June 10, 1964

For questions, please contact the Benefits Office at (651) 748-7425 or Visit www.isd622.org/benefits
Finding the right health plan can feel like a challenge. There's a lot of information to look at, and the terms and language may seem unfamiliar. To get started, ask these questions as you review your options.

WHAT WILL MY COSTS BE?
There are two types of costs you should look at:

1. **The premium that comes out of your paycheck.**
   Your employer will probably charge you a portion of the cost of your health plan. Check with them to see how much the plan will cost you.

2. **Your out-of-pocket costs throughout the year.**
   Out-of-pocket costs usually include your deductible, coinsurance and/or copays. Think about how often you fill a prescription or go to the doctor. How are those services covered?

HOW ARE MY PRESCRIPTIONS COVERED?
To understand how your prescriptions are covered, there are two things you’ll want to check:

1. **Is it on the formulary?** Medicines on the formulary will cost you less.
2. **Is it a brand name or generic?** Generic medicines will almost always cost you less.

See how your medicine is covered at healthpartners.com/preferredrx.

WHAT ELSE SHOULD I KNOW?
You can get more from your health plan than you may think. Whether you’re dealing with a health condition or looking to get in shape, HealthPartners has programs and discounts you can use.

Looking for your benefits information?
Find it in a separate document called your Summary of Benefits and Coverage (SBC). SBCs include your deductible, office visit costs, cost for medicines and much more. You’ll get an SBC for each plan your employer offers.

Use your SBCs with this book to understand your options. To learn more, visit healthpartners.com
ABOUT YOUR PLAN
With HealthPartners® Empower HSA plan, you can save money all year long! Not only will you save with lower monthly premiums, but you’ll also be covered with a health savings account (HSA) and high-deductible health plan (HDHP). Plus, none of the money you put in your HSA is taxed, saving you even more.

You also have network access to many services like:
- Convenience and online care
- Specialty care—no referrals needed
- Prescription medicines
- Preventive care

HOW YOUR PLAN WORKS
Think of your HSA as a special savings account for medical costs. You can put money into your HSA either through payroll or direct deposits. As this amount grows over time, you can save it or spend it on eligible medical expenses. And the money in your HSA is yours to keep, even if you switch jobs.

You can use the money in your HSA to pay for expenses like:
- Plan deductible or coinsurance
- Dental care and braces
- Vision care and LASIK surgery

YOUR EMPOWER® HSA PLAN BENEFITS
Learn more about your Empower HSA plan by using this chart with your Summary of Benefits and Coverage (SBC).

**YOUR EMPOWER HSA PLAN**

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

Plus, routine preventive care is typically covered at 100 percent. Please check Page 2 of your SBC for more details.
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 and search the Open Access network. Search for doctors, clinics, 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.

Need help with your plan?
Check out all the helpful tools at healthpartners.com/simple

Here’s an example of how an HSA works:

During your plan year, you put $1,000 in your HSA. This money is not taxed! Direct deposits are allowed until April 15 of the next year.

Throughout the year, you and your family spend $400 on medical expenses. You pay your bills using your HSA.

$600 is left in your HSA at the end of the year.

Next year you deposit another $1,000 into your HSA. You now have $1,600 to spend!

If you don’t use it all up this year, you can rest easy knowing it will be there for next year.
High Deductible Health Plan with a Health Savings Account (HSA)

Key Plan Features

• The employee and the District (based on bargaining unit) contribute money to the HSA to help with your eligible health care expenses. Funds in the HSA can be used to pay for these eligible expenses.
• Unused funds roll over to the next plan year; you do not lose remaining money.
• Online access to check account information i.e. election, deposits, interest earned, claims, payments, summary plan descriptions, reimbursement schedule, and an extensive listing of eligible expenses.
• There are additional tax, eligibility, and record keeping elements; be sure to review the full plan information provided either on SmartBen or from the Benefits Office.
• You will be provided a Benny Card (debit card) to pay for eligible expenses. You may also reimburse yourself through the online banking system.

Contributions*

Each year, the IRS sets contribution limits. These limits are for the total funds contributed, including the District contributions, your contributions and any other contributions. For 2015 the limits are $3,350 for individual coverage and $6,650 for family coverage and the “catch-up” contribution for those 55 and older is $1000. For 2016 the limits are $3,350 for individual coverage and $6,750 for family coverage and the “catch-up” contribution remains at $1000.

Non-Units, Clerical 12 months, Local 70 12 months, Paraprofessionals, and Principals

Where applicable, effective July 1, 2015 contributions to the $2600/$5200 HSA will be the surplus of the District Contribution compared to the health plan premium. The contributions will be made twice a month in conjunctions with the pay dates from July 2015 through June 2016.

<table>
<thead>
<tr>
<th>Employee Group</th>
<th>District Contribution to the HSA-- Monthly</th>
<th>Contribution per Payday (Oct-May) (July-June)</th>
<th>District Contribution to the HSA-- Monthly</th>
<th>Contribution per Payday (Oct-May) (July-June)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical-10 mo, Hired before 8/7/92</td>
<td>$132.20</td>
<td>$99.15</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Clerical-10 mo, Hired after 8/7/92</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Clerical-11 mo, Hired before 8/7/92</td>
<td>$132.20</td>
<td>$99.15</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Clerical-11 mo, Hired after 8/7/92</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Clerical-12 mo</td>
<td>$132.20</td>
<td>$66.10</td>
<td>$101.74</td>
<td>$50.87</td>
</tr>
<tr>
<td>Driver/Custodian-12 mo full-time</td>
<td>$132.20</td>
<td>$66.10</td>
<td>$101.74</td>
<td>$50.87</td>
</tr>
<tr>
<td>Driver/Custodian-10 mo full-time, 12 mo part-time</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Ed. Asst., Hired before 7/1/90</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$34.04</td>
<td>$25.53</td>
</tr>
<tr>
<td>Ed. Asst., Hired after 7/1/90</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$34.04</td>
<td>$25.53</td>
</tr>
<tr>
<td>Non-Units-Family Cap</td>
<td>$132.20</td>
<td>$66.10</td>
<td>$101.74</td>
<td>$50.87</td>
</tr>
<tr>
<td>Non-Units-Single Cap</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$101.74</td>
<td>$76.31</td>
</tr>
<tr>
<td>Paraprofessional, Hired before 08/31/98</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$56.02</td>
<td>$42.02</td>
</tr>
<tr>
<td>Paraprofessional, Hired after 08/31/98</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$56.02</td>
<td>$42.02</td>
</tr>
<tr>
<td>Principals</td>
<td>$132.20</td>
<td>$66.10</td>
<td>$101.74</td>
<td>$50.87</td>
</tr>
</tbody>
</table>

*Contribution amounts for all employees will be prorated and administered as applicable due to coverage changes, hire and termination dates.
District’s Third Party Administrator for the HSA:
Corporate Health Systems Website: www.corphealthsys.com
Benefit Administrator: Danielle Maresh
Email: dmaresh@corphealthsys.com Phone: 952.939.0911 ext 125

Banking Institution for the HSA:
The Bancorp Bank HSA Website: www.thebancorphsa-eb.com
Phone: 866.902.0356 (24 hours a day, 7 days a week)

For more information, please refer to the Plans & Policy section of SmartBen or contact the Benefits Office at (651) 748-7425
What is Well@Work
It’s a clinic at your work that treats many of the same things your regular clinic does.

What can I be seen for at my Well@Work Clinic?
Well@Work can diagnose and treat most routine needs, including:
- Cold & flu
- Seasonal Allergies
- Sinus Infections
- Strep Throat
- Ear Infections
- Back Pain
- Sprains
- Some Primary care services
- Lab tests and more

Who can be seen at the Well@Work?
- All employees covered by the District’s health plan.
- Dependents (18 months or older) of employees who are covered under the District’s insurance plan.

Cost
District health plan members and dependents visiting Well@Work pay no office visit copays and no prescription copays for generic drugs.
Members and dependents on the NationalOne HSA plan will have a $40 office visit fee that includes the cost of preventive prescriptions.

Location
District Education Center
2520 East 12th Ave
North St. Paul, MN 55109
Access clinic through Northwest entrance. Parking is available on the south side of the street in front of the clinic entrance as designated by the “clinic parking signs”

Hours
Monday, Wednesday and Friday 6 a.m. to 2 p.m.
Tuesday and Thursday 10 a.m. to 6 p.m.

To schedule an appointment call 952-967-6857 or visit healthpartners.com
Get back in the game

Who is PNBC?

Physicians Neck and Back Clinics (PNBC) is a leader in the treatment of chronic (long term) spinal pain. Back pain often keeps you from doing the activities you love. Whether it is golf, hiking, running, biking or playing with your kids, let PNBC help you to resume activity.

Get rid of pain...without surgery

Major spine surgery is often unnecessary and may worsen your condition or only provide temporary relief from long term back pain. PNBC’s Board-certified medical doctors and trained rehabilitation professionals offer a better solution. PNBC offers an exercise based program that emphasizes muscle strengthening using specialized, computerized equipment that isolates important neck and back muscles. The goal of the program is to improve core strength, mobility, and endurance to restore function and remove pain from your back and neck. More than 80% of patients experience a significant reduction in symptoms after completing the PNBC rehabilitation program.

Treatment usually consists of two sessions per week for 8-12 weeks. During treatment sessions a specially trained staff-member will work with you to perform customized, aggressive strengthening of the neck and spine. After your treatment sessions are completed, PNBC’s staff will create a customized at-home maintenance program for you so you will be able to keep your spine strong.

PNBC locations

PNBC has multiple locations. Call the PNBC most convenient for you to learn more or to schedule your appointment.

**Sartell**
(320) 253-5385  
158 19th St

**Maple Grove**
(763) 585-0600  
11671 Fountains Dr

**Coon Rapids**
(763) 585-0700  
10160 Foley Blvd NW

**Edina**
(952) 851-8200  
3601 Minnesota Dr

**Burnsville**
952-851-6000  
14300 Nicollet Court, Suite 335

**Roseville**
(651) 631-4242  
3050 Ctr Pointe Dr

**Woodbury**
(651) 735-6100  
1000 Radio Dr

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.
It’s time to get healthy and feel great.

Health and Well-Being: It’s as simple as 1-2-3!

1. Take the Health Assessment starting July 1, 2015.

   The first step to participating is to take the Health Assessment. This 15 to 20 minute, online assessment generates your personal report to give you tips for healthier living. You’ll discover your strengths and what you can do to improve your health.

2. Complete a wellness program by March 31, 2016

   Your health assessment results will help guide you toward an ISD 622 or HealthPartners wellness program that’s right for you. These programs give you the tools you need to be healthy and stay healthy. Choose from a wide variety of phone-based and online programs.

3. Get rewarded

   There is no greater reward than living a happier, healthier life. But just in case you need a little more incentive, you’ll also qualify for a Preferred Benefit effective July 1, 2016.

   If you have questions, please call 952-883-7800, 800-311-1052 or TTY 952-883-7498.

More information on ISD 622’s wellness programs can be found on the District’s wellness website. Just go to www.isd622.org/wellness.

Log on to healthpartners.com/isd-622 to take your health assessment and enroll in a wellness program now.
GET REAL TREATMENT BY REAL PEOPLE, REALLY FAST.
virtuwell® is an online clinic connecting you with safe and convenient care. After a simple, guided interview about your symptoms, a nurse practitioner will make a diagnosis. In about 30 minutes or less, you’ll get a personalized treatment plan and a prescription if you need one.

TRY VIRTUWELL AND SAVE TIME
1. A virtuwell visit starts with a quick online interview that checks your history and makes sure the problem isn’t serious.
2. Next, a certified nurse practitioner will make a diagnosis and write your treatment plan. You’ll get an email or text the moment your plan is ready - usually within 30 minutes or less.
3. If you need a prescription, we’ll send it to your favorite pharmacy.
4. If you need to speak with a nurse practitioner about your plan, they’re available 24/7.

Get started at virtuwell.com.

SAVES YOU MONEY
virtuwell costs $45, or the amount of your copay, depending on your plan. You’re only charged if you can be treated, and if you’re not completely satisfied you’ll get your money back. Still not feeling better? Call virtuwell at anytime for free follow-up care.

TREATS MANY COMMON CONDITIONS
virtuwell only treats conditions that can be safely treated online:
- Sinus infections
- Pink eye
- Bladder infections
- Upper respiratory infections
- Rashes and other skin irritations
- And more...

Find the full list at virtuwell.com/conditions.

98 percent of customers highly recommend virtuwell®.
Source: virtuwell patient satisfaction survey
Want to live a healthier life? We can help. As a HealthPartners member, you’ll get the tools, support and resources you need to be a healthier, happier you. We’ll help you focus on what’s important to you.

**GET HEALTHY**

- **Get one-on-one support.**
  - Sign up with a health coach for help living tobacco free. Call 800-311-1052.
  - Get advice 24/7 from a nurse. Call our CareLine℠ service at 800-551-0859.

- **Make the right decision for you.**
  It can be hard to know which treatment option is best for you. Get help making the right decision based on what’s important to you. Just call Member Services at the number on the back of your Member ID card and ask for a Nurse Navigator.

- **Watch, listen and interact online.**
  Our virtual coaching can help you eat better, be active and stress less.

**STAY HEALTHY**

- **Discover the Healthy Discounts℠ program.**
  Just for being a HealthPartners member, you’ll save on exercise equipment, spa services and more.

- **Stay up-to-date.**
  Find out when you and your family are due for vaccines, lab tests, screenings and routine checkups.

- **Get group support.**
  Take a class or attend a group session. Topics include asthma, car seat clinics, weight loss and more.

**KNOW HEALTHY**

- **Find information about your health.**
  Visit the Health Information Library to search health topics, try out the symptom checker and use other great tools.

- **Discover yumPower.**
  Find tasty tips and useful resources to eat better and get power at yumpower.com.

- **Sign up for weekly texts.**
  Get helpful tips to help you and your family on your way to better health.
  
  To sign up, text one of the following commands to 77199:
  - FAMILY for ideas to support your family’s health
  - QUITNOW for tips to help you quit smoking
  - YUM for better-for-you eating tips from yumPower
  
  Plus, you can get helpful tips for you and your baby’s health. Text BABY (or BEBE for Spanish) to 511411.

Visit healthpartners.com/healthyliving to check out these tools and more.
Whether you’d like help with your personal life or are having issues at work, HealthPartners Employee Assistance Program (EAP) is here for you. Call 24/7 for help from a counselor finding child care, dealing with a loss, finding community resources and more. HealthPartners EAP will help you with the tough stuff, so you can enjoy life a little more.

HELP BY PHONE
EAP counselors are ready to give you the support you need. Just call and they’ll listen to your concerns, give you guidance and help you find solutions that are right for you. Here are just a few of the things they can help you with:

- Marital issues
- Balancing work and family
- Financial concerns
- Mental and emotional health
- Parenting
- Job stress
- Legal issues
- Substance abuse
- Personal relationships
- Grief and loss
- Divorce

Plus, the EAP staff can help you find child care, elder care and other resources in your community.

HELP ONLINE
Get help 24/7 with our wide range of online resources.
You’ll find:

- More than 4,000 articles and tip sheets
- Self-assessment tools
- Child and elder care resource searches
- Legal information and forms
- More than 60 financial calculators
- Monthly webinars
- Skill Builders
- Savings center
- Relocation center
- And more!

You can also instant message or email an EAP or work-life counselor anytime day or night.

HELP WITH AN APP
Experience help on-the-go with the iFindCare app for your iPhone. Use it to search for child and elder care resources wherever you are.

Your privacy is important
Everything you do with HealthPartners EAP will be confidential—no information will be shared with your employer or health plan without your permission.

You can rest assured that your personal issues will be just that—personal.
As a HealthPartners member, you have personal support when you need it. Contact us when you have questions about your coverage or health — we’re here to help.

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<tr>
<th>If you have questions about:</th>
<th>Call:</th>
<th>Go online:</th>
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<td>Log on to healthpartners.com to chat with Member Services</td>
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<td>• Finding care when you’re away from home</td>
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<td>• Immunizations and paperwork needed for travel</td>
<td><strong>Member Services</strong></td>
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<td>• Whether you should see a doctor</td>
<td><strong>CareLineSM service — nurse line</strong></td>
<td>Visit healthpartners.com/decisionsupport</td>
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<td>• Home treatment options</td>
<td><strong>CareLineSM service — nurse line</strong></td>
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<td>• A medicine you’re taking</td>
<td><strong>CareLineSM service — nurse line</strong></td>
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<td>• Understanding your health care and benefits</td>
<td><strong>HealthPartners® Nurse Navigator program</strong></td>
<td>Visit healthpartners.com/decisionsupport</td>
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<tr>
<td>• How to choose a treatment option</td>
<td><strong>HealthPartners® Nurse Navigator program</strong></td>
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<tr>
<td>• Your pregnancy</td>
<td><strong>BabyLine phone service</strong></td>
<td>Visit healthpartners.com/decisionsupport</td>
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<tr>
<td>• The contractions you’re having</td>
<td><strong>BabyLine phone service</strong></td>
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<td>• Your new baby</td>
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<td>• Finding a mental or chemical health care professional in your network</td>
<td><strong>Behavioral Health Navigators</strong></td>
<td>Log on to healthpartners.com</td>
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<tr>
<td>• Your behavioral health benefits</td>
<td><strong>Behavioral Health Navigators</strong></td>
<td></td>
</tr>
<tr>
<td>• How health care reform might impact you</td>
<td><strong>Member Services</strong></td>
<td>Visit healthpartners.com/reform</td>
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</tbody>
</table>
At home, work or on-the-go, it’s easy to manage your health care with myHealthPartners online and mobile tools. Here’s a guide to help you get started.

CREATE AN ACCOUNT
1. Go to healthpartners.com/signupnow.
2. Under Get started with a myHealthPartners account, click on I have HealthPartners insurance.
3. Enter your eight-digit Member ID number and date of birth; then click Continue.
4. Create a username and password, and enter the email address you’d like tied to your account.
5. Choose three security questions and click Continue.
6. Congratulations! You’ve created a myHealthPartners account.

MANAGE YOUR HEALTH CARE COSTS
It’s easy to manage your health care costs and plan for future expenses with your myHealthPartners account:
• Track your spending and view what’s left in your HSA, HRA or FSA.
• Search for a treatment or procedure, and get cost estimates specific to your plan, benefits and deductible.
• View past claims or explanations of benefits (EOB) with the new My activity timeline. You’ll get a real-time look at how the care you receive works with your plan.

Learn more about what your myHealthPartners account can do for you at healthpartners.com/signupnow.

You can also view plan balances on the myHP mobile app! Learn more at healthpartners.com/gomobile.
As a HealthPartners member, it’s easy to manage your plan and feel confident when you get care. Whatever your preference, you can stay connected—online, on your mobile device or via text.

### When you want to: | Find it:
---|---
See your benefits and specific plan information | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
See your past care including claims, explanations of benefits (EOBs), test results and immunizations | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
Check your plan balances, including your deductible, out-of-pocket maximum and more | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
Search for doctors in your network or near your current location | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
Get cost estimates specific to your plan, benefits and deductible when you search for a treatment or procedure | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
View your HealthPartners Member ID card and fax it to your doctor’s office | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)
Find tips for getting and staying healthy | ![Online](icon.png) ![Mobile device](icon.png) ![Text](icon.png)

* = Online
= Mobile device
= Text

**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.
IS YOUR PRESCRIPTION COVERED?
You can see if your prescriptions are covered by searching the PreferredRx formulary. A formulary is a list of medications that are covered by your plan.

Searching the list is easy. Just go to healthpartners.com/preferredrx. From there, you can search by medication name, category or first letter. You can also print the complete medication list.

Infertility, erectile dysfunction and non-sedating antihistamine medications aren’t covered by your plan. H2 blockers aren’t covered for those age 10 and older.

WHAT IF YOUR MEDICATION ISN’T ON THE LIST?
When you search PreferredRx, medications will come up with F (formulary), NF (non-formulary), or X (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/preferredrx
• 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:
1. If your medication is on the formulary
2. 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 preferredrx. online.
Generic will be in all lower italics
BRAND, oral contraceptives and Accutane generics will be in all CAPS
Specialty drugs will be shown as X

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.
When it comes to your prescriptions, it’s important to have options that work for you and your wallet. HealthPartners can help with these tips.

FIND THE RIGHT MEDICINE FOR YOU

1. **Check interactions**
   Do you ever wonder how the things you eat and drink might interact with your medicines? Visit [healthpartners.com/pharmacy](http://healthpartners.com/pharmacy) and use the Drug Interaction Checker to see how your medicines interact with each other.

2. **Search for medicine information**
   Visit [healthpartners.com/healthlibrary](http://healthpartners.com/healthlibrary) to find all the medicine information you need. Learn how to take your medicine, what it should look like, what to do if you miss a dose and more.

3. **Participate in RxCheckup**
   Are your medicines right for your lifestyle? In a one-on-one appointment with a pharmacist, you’ll review your medicines to make sure they’re safe, effective and right for you. For more information, visit [healthpartners.com/rxcheckup](http://healthpartners.com/rxcheckup).

FIND WAYS TO SAVE

1. **Use the formulary**
   Choose the formulary that matches your benefits to see if your medicine is listed. If it isn’t, do a quick search to find other options. Formulary medicines are usually less expensive. Just type the name of your medicine and click “Go.” Share the list with your doctor to see if you can switch.

2. **Choose generics**
   Generic medicines are just as safe and effective as brand name medicines but cost less. To see if you’re taking a generic, look for a “G” next to your medicine when you search the formulary.

3. **Calculate your costs**
   The cost of your medicine depends on the pharmacy you choose. Use HealthPartners Drug Cost Calculator to find the pharmacy with the best price. You can also see if a 30-day or 90-day supply is less expensive.

4. **Get your medicines in the mail**
   Skip the trip to the pharmacy and use myMailRx, HealthPartners Mail Order Pharmacy. Shipping is free and you can save money!

5. **Get your questions answered**
   Let our Pharmacy Navigators help you with pharmacy costs, benefits, changes, formularies and more. Call the Member Services number on the back of your Member ID card and ask to talk to a Pharmacy Navigator.

Learn more about these tools and ways to save at [healthpartners.com/pharmacy](http://healthpartners.com/pharmacy). Once you’re there, log on to your [myHealthPartners](http://myHealthPartners) account.
Who says you need to leave the house to fill your prescriptions? Get them delivered right to your door with myMailRx, HealthPartners Mail Order Pharmacy. It’s the quick and easy way to fill your routine prescriptions.

SAVE TIME AND MONEY
myMailRx could save you time and money. With a copay plan, you may be able to save up to 33 percent by getting a three-month supply of your medicine for just two copays. Plus, you don’t have to pay for shipping.

Check with your employer or call the Member Services number on the back of your Member ID card to see if this is an option for you.

SKIP THE TRIP
Avoid long pharmacy lines and wait times by filling your prescriptions with myMailRx. Transferring your prescriptions is easy, and your medicine will come right to your door.

Plus, in most cases we send a three-month supply of your medicine instead of a 30-day supply so you don’t have to worry about refills as often.

BUNDLE YOUR PRESCRIPTIONS
Sync My Meds puts all of your prescriptions on the same refill, payment and delivery schedule. You’ll get reminders when it’s time to refill and we’ll let you know when your prescriptions are on the way. By working one-on-one with the HealthPartners pharmacy team, you’ll choose an arrival date that works best for you.

You can also line up the medication schedules of your spouse and family so everything ships at once.

REST ASSURED
When you transfer or refill a prescription, you can sleep tight knowing you’ll get your medicine when you need it. In fact, 95 percent of our orders are shipped in five days or less. To keep your information private, we ship all prescriptions in a recyclable plain package.

And because your safety is important to us, our mail order pharmacy is VIPPS® accredited by the National Association of Boards of Pharmacy®, which means you get the highest quality medicine.

myMAILRx AT YOUR FINGERTIPS
Managing your medicine just got easier. Download the myHP mobile app for an easy way to refill, transfer and check the status of your prescriptions.

Download the app today in the iTunes® app store or visit m.healthpartners.com. Visit healthpartners.com/gomobile to learn more.

It’s easy! Transfer your prescriptions today. Call 612-623-4002 or 800-591-0011, or visit healthpartners.com/mymailrx.
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 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.

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.

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Want tips for eating better?

Check out HealthPartners yumPower—it’s all about finding tasty, good-for-you foods that power your body and help you live the best life possible. After all, when you eat better, you feel better! Get started at yumpower.com — your mind, body and taste buds will thank you.