Plans for a healthier you

2017 Open Enrollment

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We all need a partner.

Someone to count on for support. Someone who’s always there for you.

At HealthPartners, we’re 23,000 people dedicated to caring for our plan members and patients the way we would our closest friends and family. This commitment has helped us deliver the best health outcomes 11 years running.*

Our team is ready to help you navigate your care and coverage. We’ll answer your questions and be there for you at every step. We’re not just a health organization, we’re HealthPartners.

Let’s make good happen together.

HIGHEST MEMBER SATISFACTION

We promise to give you an outstanding experience. Thanks to our members, HealthPartners has earned the highest overall member plan rating among Minnesota health plans for 10 straight years.**

*The source for data contained in this publication is Quality Compass® 2016 and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass 2016 includes certain Consumer Assessment of Healthcare Providers and Systems® (CAHPS) data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA. CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

**According to the 2007-2016 CAHPS surveys.
Hello!

I’m a Member Services rep and mother of two. I know how important it is to pick the health plan that’s best for you. I always tell my friends and family to think about these three things when signing up for a health plan:

1. **When it comes to cost, what are my best and worst case scenarios?**
   - **Best case** — you only pay your premium. That’s how much you pay each month for your health plan. It comes out of your paycheck, whether or not you get care.
   - **Worst case** — you hit your out-of-pocket maximum. That’s the most you’ll pay on your own each year. Once you reach that limit, your plan covers the remaining eligible expenses at 100 percent for the remainder of the year. Premium + out-of-pocket maximum = the most you’ll spend all year for care your plan covers.

2. **What will I have to pay when I get care? You may have a ...**
   - **Copay** — a set amount you pay each time you go to the doctor or get a prescription. It might change depending on where you get care, like the ER or convenience clinic.
   - **Deductible** — the amount you have to pay before your plan kicks in. If your deductible is $1,000, your plan will kick in once you’ve paid $1,000.
   - **Coinsurance** — a portion of the cost you’re in charge of paying. It’s different for each plan. For example, you might be responsible for 20 percent and your plan would cover the rest.

3. **How much care will my family and I need?**
   If you don’t need a lot of care, a higher deductible plan makes most sense. You’ll pay less on your premium, but more if you need care. That means a lower premium carries more risk. But the reward is that you’ll keep more money in your pocket all year long if you stay healthy.

Since I’m a mother of two kids who need stitches a few times a year, I like a lower deductible plan. It helps cover costs as soon as the deductible is reached, but has a higher premium to pay. This might make sense for you if your family needs a lot

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**WHAT ELSE SHOULD YOU ASK?**

- How do I find an Essentia Health network provider or hospital?
- How much will I pay for my medicines, and where can I get them?
- What discounts and other perks will I get?

Remember, we’re here to help. Give us a call at 866-779-7632. Picking the right plan is just the first way we’ll help you become the healthiest you.
Growing up, my mom was a stickler about making our routine doctor and dentist appointments. Looking back, I’m so glad she was. I’m the same way today!

Getting regular preventive care helps keep you healthy. In fact, people who get the preventive care that’s recommended for them are more likely to stay healthy for years to come.

**What counts as preventive care?**

- Alcohol, tobacco and weight screenings
- Blood pressure, diabetes and cholesterol tests
- Breast, cervical and colorectal cancer screenings
- Routine pre- and post-natal care
- Vaccines
- Well-child visits

**What’s recommended for you?**

Your doctor can always tell you what you should be checked for. But you can also visit [healthpartners.com/preventive](http://healthpartners.com/preventive) to find out.

Recommended preventive care is covered at no cost to you when received at an Essentia Health facility. If you have questions on what’s covered or where you should go, call us at 866-779-7632. We’re here to help.
You’re not the only one wondering. Knowing if your health plan will cover your medicine and how much you’ll pay is important. Have no fear – I’m here with some tips to help you get the most from your medicine.

Start by checking your drug list

Step one is checking your formulary. That’s just a fancy word for a list of covered drugs. Your drug list is called PreferredRx. Searching the list is pretty easy. Go to healthpartners.com/essentia. Search by the name or type of medicine.

If you can’t find your medicine on the list, you can always give us a call. We’ll help you find it or an alternative that’s on the formulary.

So, you’ve got the list. Now what?

We’ve got an easy-to-follow guide to help you read your formulary. When you search the list, there’s an icon next to each medicine. It might be F(formulary), NF (non-formulary) or ☢ (excluded). Formulary drugs are covered, excluded medicines aren’t covered, and depending on your benefits, non-formulary medicines might be covered but will cost you more.

Preventive drug list

If you’re enrolled in a high deductible health plan, such as an HSA, you’ll pay a copay for medicines listed on the preventive drug list. Medicines from the preventive drug list are only available at an Essentia Health Network pharmacy. You can save money on preventive medicines by ordering a 90-day supply through an Essentia Health or Dakota Pharmacy. Go to healthpartners.com/essentia to find the Essentia Preventive Drug List.

Want to save money?

Try taking a generic medicine. Generics are the same as a brand name medicine, but cost a lot less. Here’s how to tell:

- **generic** will be in all lowercase italics
- **BRAND**, oral contraceptives and Accutane generics will be in all CAPS
- Specialty drugs will be shown as

Medicine prices vary, just like gas prices. So make sure you shop around. Try our drug cost calculator to see how much your medicine will cost at different pharmacies. Go to healthpartners.com/pharmacy to find this and other tools.

Use an Essentia Health network pharmacy

Your cost will be less if you use an Essentia Health Network pharmacy. Find a printable list of Essentia Health Network pharmacies at healthpartners.com/essentia.

Always remember – we’re here to help. Give Member Services a call at 866-779-7632. And of course you can check your Summary of Benefits and Coverage (SBC), too.
I like to think that managing your medicines is like creating a great meal. It happens one step at a time and with the help of a recipe. Just like there are many recipes, there are lots of ways to stay on track with your medicine. You just need to find the recipe that works best for you.

You don’t have to be a pharmacist to know when a medicine isn’t working right. For example, I had a patient who was taking high cholesterol meds for years. He also started taking a new blood pressure medicine. He followed the directions for both of them, but he started having terrible pain. So he stopped taking his blood pressure medicine. Uh oh.

That’s where I came in. Turns out, it was just a bad interaction. We got him on a different blood pressure medicine that worked better, and he was feeling better in no time.

My team and our tools are here to help you find the right medicines to achieve your best health.

**Talk with an Essentia Health pharmacist**

In a one-on-one visit, you’ll review your medicines to make sure they’re effective and right for you. Plus, it’s free. Even if you feel fine, you might have questions about your medicines, like:

- Am I taking the right medicines for the best results?
- Are my medicines working together correctly?
- How can I stop side effects and interactions between my medicines and with the things I eat and drink?
- Is there a way my medicines can better fit my lifestyle?
- Can I save money on my medicines?

**Learn more about your medicine**

Visit [healthpartners.com/pharmacy](http://healthpartners.com/pharmacy). The health library has information on how to take your medicine, what it should look like, what to do if you miss a dose and more. And our Drug Interaction Checker will let you know what food or drinks to avoid. You can also learn about other options if your medicines don’t work well together.

Your health plan can do more than just help pay for visits to your doctor. Call Member Services at **866-779-7632** for help with your prescription benefits.
Who has time to be sick? Between work, errands and activities, I know it’s hard to fit in a trip to the doctor. But you don’t have to. I’ve got an easy way for you to get back to normal ASAP.

Head over to virtuwell.com. Our team of certified nurse practitioners can give you a diagnosis, treatment plan and even a prescription. All in about 30 minutes.

My favorite story is the time I helped someone whose daughter got pink eye on a family trip. She used virtuwell and answered the questions right on her phone. In 20 minutes, we sent a treatment plan to her inbox and a prescription to the pharmacy by their hotel. I followed up a few days later to make sure she was feeling better. Vacation saved!

How does it work?

1. It’s convenient. We’ll start with a simple question: What do you think you have? You’ll answer online – anytime, anywhere.

   Then, one of our nurses will create your treatment plan. You’ll get a text or email when it’s ready.

2. It’s safe. We only treat conditions that we can do safely online, like sinus and bladder infections, pink eye and acne. Go to virtuwell.com/conditions to see what we can treat – there are more than 60.

3. It’s affordable. You’re only charged if we can treat you. In the end, you’ll never pay more than $45. Member Services can tell you if your plan will pay for some or all of your visit. Call them at 866-779-7632.

The next time you get sick, my team is ready and waiting to get you better. Try virtuwell.com.
TakeCharge

TakeCharge is Essentia Health's well-being program. Throughout the year, you’ll have the opportunity to participate in a variety of TakeCharge offerings to help you improve and maintain your health.

Essentia Health has partnered with HealthPartners to give you access to additional resources as part of TakeCharge. You’ll be able to take a health assessment and complete your choice of activities to earn a discount toward your 2018 health insurance.

Know healthy
As part of TakeCharge, you can take 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.

Activity options
- Need support to reach your health goals? Work with a health coach through video or phone for a personalized approach.
- Want to get moving? Consider exercising at your local health club through Frequent Fitness or choose your own activity through Your Choice.
- Looking for tips on eating better? Listen and learn by watching the Eating Well videos.
- Up for fun, easy and convenient? Set goals and track your steps, sleep or tobacco use with the MePlus mobile app.
- Want to live life without tobacco? Essentia has support for living tobacco free.

Get rewarded
When you complete the health assessment and a well-being activity, you’ll save on your health plan premium or receive an HSA contribution.

TakeCharge to be your best you.

TakeCharge Program Coordinator

Karey
I know what a difference being healthy can make in your life, and how a little support – and savings – can be a big help. That’s why I’m excited to tell you about some great healthy discounts you get just for being a HealthPartners member.

**Save money at your favorite gym**

Work out 8 days or more each month and you’ll save up to $40 ($20 per adult member) on your monthly membership.

Participating gyms include:

- Anytime Fitness*
- Curves
- LA Fitness*
- Life Time Fitness
- Snap Fitness
- And more!

Go to [healthpartners.com/frequentfitness](http://healthpartners.com/frequentfitness) to search for other participating gyms.

**Save with the Essentia Health vision discount**

You are eligible for a vision discount at Essentia Health.

Employee discount at the Duluth and Virginia optical shops:

- 20 percent off your purchase

Employee discount at Wahpeton and South University Clinic:

- 25 percent off frames and lenses
- 10 percent off contacts

**Get discounts at other places too**

Just use your HealthPartners member ID card to save money at loads of places to help you live a little healthier.

You can save money on:

- Eyewear
- Fitness and wellness classes
- Healthy eating programs and delivery services
- Healthy mom and baby products
- Recreational equipment
- Spa services
- Swim lessons
- And more!

Saving money is one more way we can help you live a healthier life. Go to [healthpartners.com/discounts](http://healthpartners.com/discounts) to see all the places where you can get big savings.

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*Not all locations apply. Frequent Fitness is limited to members, age 18 years or older, 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. Workout requirements and program eligibility may vary by employer. Please check with your employer or call Member Services to verify eligibility and visits requirements.
"I need care, but who should I see?"

What a tough question, right? I spend a lot of my day answering this. I tell people it’s tempting to rush to the emergency room when you need care now, but online care might be faster and cost less.

Use my notes below to help you decide where to go when it’s between “ouch” and “OMG." If you’re still not sure, a CareLineSM service nurse can help.

<table>
<thead>
<tr>
<th>WHEN YOU NEED</th>
<th>GO TO</th>
<th>AVERAGE COST</th>
<th>AVERAGE TIME SPENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health advice from a nurse for: • Where to go for care • At-home remedies</td>
<td>Essentia Nurse Care Line Call 855-802-0412 (toll free)</td>
<td>Free</td>
<td></td>
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<tr>
<td></td>
<td>CareLineSM service Call 24/7 at 612-339-3663 or 800-551-0859</td>
<td></td>
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<tr>
<td>Treatment and prescriptions for minor medical issues, like: • Bladder infection • Pink eye • Upper respiratory infections</td>
<td>Essentia Health convenience clinics e-visits essentiamyhealth.org (where MyHealth is available) virtuwell®* (a 24/7 online clinic)</td>
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<tr>
<td>A regular checkup or special care during the day for things like: • Diabetes management • Vaccines</td>
<td>Primary care clinics</td>
<td>$$</td>
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<tr>
<td>Care for urgent problems when your doctor’s office is closed, like: • Cuts that need stitches • Headaches</td>
<td>Urgent care clinics</td>
<td>$$$</td>
<td></td>
</tr>
<tr>
<td>Help in an emergency, such as: • Chest pain or shortness of breath • Head injury</td>
<td>Emergency room</td>
<td>$$$$</td>
<td></td>
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</tbody>
</table>

*virtuwell is available for residents of AZ, CA, CO, CT, IA, MI, MN, NY, ND, PA, VA and WI.

The Essential Nurse Care Line offers answers from registered nurses about your health care questions - 24 hours a day, seven days a week. They’ll listen to your concerns and help you find the best medical treatment for your needs. You can reach Essentia Nurse Care Line at 855-802-0412.
Are you pregnant or thinking about having a baby? As a mom and a nurse, I know what a wonderful yet uncertain time this is. I work with a team of nurses to support women who are pregnant or planning a pregnancy.

Whether this is your first, second or sixth baby, we’re here to help. All support is confidential and available at no cost to you. Here are some of the ways we’ll support you:

**Pregnant or planning assessment**

This online assessment helps us understand your needs and how we can help. Based on your answers, you may get a call from a nurse on my team. The nurse will work with you over the phone to answer your questions and give you advice when you’re between visits with your doctor.

**Phone support, whenever you need it**

When you have a question at 3 a.m. – trust me, it happens – you can talk with a nurse any time. Just call the BabyLine phone service at 612-333-2229 or 800-845-9297.

**Email tips**

After taking the assessment, you can sign up to get emails with tips about eating right, budgeting for child care and more.

**Text tips**

Sign up for free tips texted to your phone during your pregnancy and baby’s first year. Just text BABY to 511411 (or BEBE for Spanish).

**Online resources**

Find the assessment and more resources on things like planning, parenting and infertility. Go to healthpartners.com/pregnancysupport.

They say it takes a village to raise a child. My team is here to help.
I get a lot of calls from people who are jet-setting across the world for the trip of a lifetime or just about to head out on a quick family getaway.

Wherever they’re going, they all have something in common: they’re thinking “What if?” What if my daughter gets sick and needs care, or what if I fall and sprain my ankle?

I remind folks all the time about our partnership with Assist America®. With Assist America, you can get the support you need if the unexpected happens. And it’s really easy. Just go online to healthpartners.com/getcareeverywhere or use the Assist America mobile app to download your ID card on the go. Use the reference number 01-aa-hpt-05133 to get started.

Get help 24/7

When you’re traveling away from home and have an emergency, Assist America can help you with:

- Filling lost prescriptions
- Finding quality care
- Hospital admission
- Pre-trip info, like immunizations you need
- Sending health updates home
- Tracking down lost luggage
- Translator referrals
- Medical transport to care facilities

So keep making those travel plans and feel confident you have support no matter where you are.

Member Services
One thing I love about my job is how my team helps people 24/7.

Like this: a man called because his chest felt heavy, his skin felt clammy, and he wasn’t sure what to do. Scary, right?

The CareLine℠ service nurse told him to hang up and call 911 immediately – he was having a heart attack. He was rushed to the hospital for emergency surgery. Afterward, he called us to say thank you. He didn’t realize how serious the situation was until he called and was so grateful that we were there to give him advice.

Call us at one of the numbers below if you have questions about your health or what your plan covers. We’re here to help.

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<th>IF YOU HAVE QUESTIONS ABOUT:</th>
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<tbody>
<tr>
<td>• Your coverage, claims or account balances</td>
<td><strong>Member Services</strong></td>
</tr>
<tr>
<td>• Finding a doctor, dentist or specialist in your network</td>
<td><strong>Essentia Nurse Care Line</strong></td>
</tr>
<tr>
<td>• Finding care when you’re away from home</td>
<td><strong>CareLine℠ service nurse line</strong></td>
</tr>
<tr>
<td>• Health plan services, programs and discounts</td>
<td><strong>Nurse Navigator℠ program</strong></td>
</tr>
<tr>
<td>• Whether you should see a doctor</td>
<td><strong>BabyLine phone service</strong></td>
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<tr>
<td>• Home remedies</td>
<td><strong>Behavioral Health Navigators</strong></td>
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<tr>
<td>• A medicine you’re taking</td>
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<tr>
<td>• Understanding your health care and benefits</td>
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<tr>
<td>• How to choose a treatment</td>
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<tr>
<td>• Your pregnancy</td>
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<tr>
<td>• The contractions you’re having</td>
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<tr>
<td>• Your new baby</td>
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<tr>
<td>• Finding a mental or chemical health care professional in your network</td>
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Registered Nurse

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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 certain kinds of care
- Outpatient case management to provide care coordination
- The CareCheck® program

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 inpatient 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. Benefits will be reduced by 20 percent if CareCheck is not notified.

Our approach to protecting personal information

HealthPartners complies with all applicable laws regarding privacy of health and other information about our members and former members. 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 compliant, 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 Notice of Privacy Practices, 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 (drug list). These prescription medicines are continually reviewed and approved for coverage based on quality, safety, effectiveness and value.
- A free, confidential one-on-one appointment (in-person or telephonic) with an experienced clinical pharmacist. Our Medication Therapy Management (MTM) program helps members who use many different medications get the results they need from their medicines.
- A pain management program. Our opioid management program supports members in managing their pain.
- A pharmacy transition of care program. Our patient alert program provides seamless transition to our formulary. We allow coverage for a first time fill of a qualifying non-preferred medicine within the first three months of a member’s time with HealthPartners.

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.
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.
When you eat better, you feel 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. Get tips, recipes and more at yumpower.com. Your mind, body and taste buds will thank you.