

# Providence Anesthesiology Associates



2023 Open Enrollment Presentation

# Meeting Agenda

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- Administrators / Same Plan Designs
  - Medical – Medcost
  - Pharmacy - MaxorPlus
  - Telemedicine – Teladoc – **New: Healthiestyou**
  - Health Savings Account
- Dental and Vision Administrator / Same Plan Designs
  - Dental - Unum
  - Vision - Unum
- UNUM
  - Life Insurance/AD&D (Basic Term & Voluntary)
  - Disability (STD & LTD)
  - Accident
  - Critical Illness with Cancer
- Next Steps
- Questions

# MEDICAL PLAN OPTIONS

For 2023, you can choose from the following three medical plan options. Our Medical will be administered by Medcost Benefit Services. Network providers and additional information can be found on the website at [www.medcost.com](http://www.medcost.com) or call the number on the back of your card.

IN-NETWORK BENEFIT	HDHP 2750/100%	HDHP 3500/100%
Deductible (Calendar Year)	\$2,750 individual \$5,500 family	\$3,500 individual \$7,000 family I
<sup>1</sup> Out-of-Pocket Maximum	\$2,750 individual \$5,500 family	\$3,500 individual \$7,000 family
Office Visits PCP Specialist	You pay 0% after you pay your deductible You pay 0% after you pay your deductible	You pay 0% after you pay your deductible You pay 0% after you pay your deductible
Wellness Benefit	Covered at 100%	Covered at 100%
Hospital Inpatient	You pay 0% after you pay your deductible	You pay 0% after you pay your deductible
Hospital Outpatient	You pay 0% after you pay your deductible	You pay 0% after you pay your deductible
Emergency Room	You pay 0% after you pay your deductible	You pay 0% after you pay your deductible
Prescription Drugs <i>Retail 31 day</i>	You pay 0% after you pay your deductible	You pay 0% after you pay your deductible

<sup>1</sup> Includes medical and prescription drug deductible, coinsurance and copays.

<sup>2</sup> Each individual's expense limited by the family member cap. Once the family maximum is met, expenses will be paid at 100%.

# MEDICAL PLAN OPTIONS - Continued

IN-NETWORK BENEFIT	PPO 2500/60%
Deductible (Calendar Year)	\$2,500 individual \$5,000 family
<sup>1</sup> Out-of-Pocket Maximum	\$6,850 individual \$13,700 family
Office Visits PCP Specialist	You pay \$25 Copay You pay 40% after you pay your deductible
Wellness Benefit Mental Health Visits	Covered at 100% \$25 Copay
Hospital Inpatient	\$250 admission charge then you pay 20% after you pay your deductible
Hospital Outpatient	You pay 40% after you pay your deductible
Emergency Room	You pay 40% after you pay your deductible
Prescription Drugs <i>Retail 31 day</i> Tier 1 Tier 2 Tier 3 Tier 4 Tier 5	You pay a \$10 copay You pay 50% up to a \$100 maximum You pay 50% up to a \$100 maximum You pay 50% up to a \$100 maximum You pay 50% up to a \$100 maximum

<sup>1</sup> Includes medical and prescription drug deductible, coinsurance and copays.

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

Medcost provides many programs that help members actively manage their healthcare and their costs.

## Medcost Cost Estimator Tool

Medcost works to give you information and tools to help you be a better, more active health care consumer – letting you choose providers based on the criteria most important to you. The cost estimator tool brings together information about procedures, providers, and costs in one place. This tool lets you see where certain procedures are performed near you and what the approximate costs for that procedure are likely to be. Exact costs will vary, so work with your provider for insight into your actual costs.

## Medcost – TELCARE – Diabetes Management Prog

Managing diabetes takes effort, but the Telcare blood glucose meter, available through Medcost’s Personal Care Management (PCM) program, can help make it a lot easier. If you receive a communication from Telcare, say “yes” to the Telcare solution and experience a better way to monitor your diabetes.

## Personal Care Management (PCM)

PCM identifies at-risk individuals before they develop chronic and costly medical conditions and educates you about actions you can take to lower risk levels. PCM works with dependent children, as well as spouses. Medcost’s PCM nurse health coaches take a holistic approach to participant care, evaluating all aspects of a participant’s situation, from lifestyle and habits to knowledge about a particular health condition, in addition to medical history and claims data.

## Complex Case Management (CM)

Medcost utilizes a variety of criteria to proactively identify potential high-risk and high dollar illnesses and injuries. Complex and long-term cases, such as strokes, certain cancers, spinal cord injuries, debilitating diseases and terminal illnesses, are closely managed and monitored to ensure members receive the best possible care while effectively managing health care expenditures. Case Management nurses work in collaboration with the member, provider and others on the member’s health care team to ensure the member receives the services necessary for making a swift recovery as cost effectively as possible.

## Medcost’s Online Resources

The Medcost app allows you to get access to your Medcost account any time, any where. You will have access to your Digital ID card, check for in-network providers, and check the status of any outstanding claims.



MaxorPlus have provided outstanding pharmacy benefits to members since 1991. They help you manage your prescriptions safely and cost-effectively and are dedicated to provide you with the best customer care service anytime you need it.

## Retail Pharmacy

- Present your new combination ID card at your current retail pharmacy on January 1<sup>st</sup> or after.
- You do not need a new prescription at retail unless expired or out of refills.
- To locate a pharmacy near you, log on to [www.maxorplus.com](http://www.maxorplus.com) and access our online pharmacy locator.
- You may also contact MaxorPlus **Member Services at 1-800-687-0707** and speak with a Member Advocate to assist in finding a pharmacy.

## Mail Order MXP Pharmacy

- Request your filling pharmacy transfer your mail order prescription to Maxor MXP pharmacy or request a new prescription from your prescriber be sent electronically.
- To fill through mail order, you will be required to enroll in MXP Mail Order by phone, enrollment form, or phone **MXP Pharmacy at 1-800-687-8629**.
- Provides a convenient, cost-effective way to mail order your maintenance prescriptions.
- No additional charge to you with a quick shipping time.

# HEALTH SAVINGS ACCOUNT

## You must be enrolled in the HDHP to participate in the group Health Savings Account

### What is a Health Savings Account?

- 2023 annual contribution limits (Employee + Employer) per IRS regulations...TAX FREE;
  - ❖ \$3,850 (\$4,850 if you are age 55 or older) – Employee Only coverage
  - ❖ \$7,750 (\$8,750 if you are age 55 or older) – Employee/Spouse, Employee/Child(ren) or Family coverage
- The Health Savings Account is not a use it or lose it plan and the account belongs to you at all times;
- No limit on when you file your claims on your Health Savings Account, but date of service must be on, or after, the date the savings account is opened;
- Covers you and your dependents for Copays, Deductibles, Prescriptions, Dental and Vision;
- The Health Savings Account is not prefunded - The money must be in the account to use it;
- In order to open/contribute you must not be:
  - ❖ Covered by any other health plan other than another HDHP
  - ❖ Eligible to be claimed as a dependent on another person's tax return
  - ❖ Enrolled in Medicare
- If you use the funds for non-qualified items prior to age 55, you will be subject to income taxes plus a penalty tax.

# Health Reimbursement Account

## HRA-Flex Summary

Plan Year: 1/1/2023 – 12/31/2023

Claims Filing Deadline: March 31, 2024

## Benefit Summary

Shareholders and junior partners have the option to elect whether they want to participate in the HRA plan or not as this would be an additional payroll deduction of **\$150.00**. A person can have medical coverage and opt *not* to participate in the HRA plan.

If you are enrolled in the PPO plan the HRA-Flex funds are available to reimburse all qualified medical, dental, vision and prescription expenses for those who have enrolled.

If you are enrolled in one of the two HDHP's ,with an active HSA, the HRA-Flex balances are considered “limited purpose” and can only be used towards qualified dental and vision expenses.

Eligible employees can rollover unused balances from one plan year to the next for use towards qualified expenses incurred the following year.

**MAXIMUM ANNUAL CONTRIBUTION \$1,800 TOTAL MAX BENEFIT \$15,000**

## Reimbursement Process

1

Funds accessed either by using your *Flores Benefits* Card to pay a provider directly, or you may pay with another form of payment, then file a claim to seek reimbursement from your HRA balance.

2

If have incurred an HRA eligible expense, submit your EOB or itemized invoice along with a copy of your HRA Reimbursement Claim Form to Flores for processing.

Claims can be submitted either by upload at [www.flores247.com](http://www.flores247.com), uploaded using the *Flores Mobile* application, by fax, or by mail.

3

HRA claims are processed for reimbursement on a weekly basis. If an email address is on file, you will be sent an email notification when we receive your claim and after your request is processed.

Reimbursement will be sent by check, mailed to your home address, or by direct deposit, if you have provided your banking information to Flores.





 [Teladoc.com](http://Teladoc.com)

 [Facebook.com/Teladoc](https://Facebook.com/Teladoc)

 1-800-Teladoc

 [Teladoc.com/mobile](http://Teladoc.com/mobile)

Enrolled on HDHP?  
No charge

Enrolled on the PPO?  
No charge

## So many reasons to use Teladoc®!

Teladoc gives you 24/7/365 access to a doctor through the convenience of phone or video consults. It's an affordable option for quality medical care.



Talk to a doctor anytime,  
anywhere you happen to  
be



Receive quality  
care via phone or  
online video



Prompt treatment,  
average call back in  
16 min



A network of doctors  
that can treat children of  
any age



Secure, personal and  
portable electronic  
health record (EHR)



No limit on  
consults, so take  
your time

### WHEN CAN I USE TELADOC?

- When you need care now
- If your doctor is unavailable
- If you're considering the ER or urgent care center for a non-emergency issue
- On vacation, on a business trip, or away from home
- For short-term prescription refills

### GET THE CARE YOU NEED

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Bronchitis
- Skin problems
- Respiratory infection
- Sinus problems
- And more!






### SHARE WITH YOUR PCP

With your consent, Teladoc is happy to provide information about your Teladoc consult to your primary care physician.

Talk to a Doctor anytime and pay \$0



Take control of your health. Download the app to start using your free healthcare services.

-  **Talk to a doctor 24/7** \$0 visit fee - Unlimited Visits  
Speak to a licensed doctor by phone or video 24/7 from anywhere
-  **Expert Medical Services** \$0 visit fee - Unlimited Visits  
Receive a second opinion on an existing diagnosis and treatment for any condition
-  **Mental Health-"myStrength Complete"** \$0 visit fee - Unlimited Visits  
Connect with a licensed therapist by phone/video. Explore skill building tools and resources based on your ongoing needs and preferences.
-  **Joint/Back Care** \$0 visit fee - Unlimited Visits  
Relieve your back pain through guided videos with a certified health coach
-  **Dermatology** \$0 visit fee - Unlimited Visits  
Upload photos of your condition to the app and get a treatment plan from a dermatologist within two business days
-  **Nutrition** \$0 visit fee - Unlimited Visits  
Connect with a certified dietitian and start meeting your nutrition goals today!



**Download the app and talk to a doctor for free 24/7.**

Member.HealthiestYou.com | 866-703-1259

HealthiestYou is now part of Teladoc Health, the global leader in virtual care. Teladoc Health, Inc., on its own behalf and on behalf of its affiliates and/or wholly owned subsidiaries including but not limited to Best Doctors, Inc., HealthiestYou, Inc., Teladoc Physicians, P.A., and Teladoc Behavioral Health, P.A. (collectively referred to as "Teladoc Health," "we," "us," or "our"), owns and operates the websites located at www.teladoc.com, www.bestdoctors.com, www.askbestdoctor.com, members.bestdoctors.com, www.healthiestyou.com, and various mobile applications (collectively, the "site" or "sites"). Through these sites we operate various online services that enable eligible individuals ("members") to receive various types of healthcare information and telehealth services ("services"). The sites also have public portions that allow anyone to educate themselves on the services available from Teladoc Health. 100-1010\_3-40100700\_07-7-2018

# DENTAL PLAN OPTIONS



Our Dental plan is administered by Unum. Network providers and additional information can be found on the website at [www.unumdentalcare.com](http://www.unumdentalcare.com).

\*Out-of-Network benefits are processed and paid on a 90<sup>th</sup> percentile of the Usual & Customary rates.

IN-NETWORK BENEFIT	
<b>Deductible (Calendar Year)</b>	<b>\$50 per insured</b>
<b>Annual Maximum (Calendar Year)</b>	<b>\$1,500 per insured</b>
<b>Preventive Services</b> Routine exams, cleanings, x-rays	<b>You pay 0%</b>
<b>Basic Services</b> Fillings, periodontics, extractions, endodontics	<b>You pay 0% of after your deductible</b>
<b>Major Services</b> Inlays, onlays, fixed bridge, dentures, crown repair	<b>You pay 40% after your deductible</b>
<b>Orthodontics</b> Children only up to age 19	<b>You pay 50% after you pay your deductible up to a maximum of \$1,500 per covered dependent child</b>

Refer to the carrier benefits summaries for the exact benefit levels . Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# VISION PLAN OPTIONS



Our vision will be administered through Unum. Additional information can be found on the website at [www.unum.com](http://www.unum.com).

	In Network
<b>Annual Exam</b>	You pay a \$10 copay
<b>Materials Copay</b> (waived for elective contact lenses)	You pay a \$25 Copay
<b>Lenses</b> (one per benefit period) Single Bifocal Trifocal	You pay \$0 copay You pay \$0 copay You pay \$0 copay
<b>Frames</b> (One per 2 benefit periods)	Covered in full up to <u>\$120</u> retail value
<b>Contact Lenses – Medically Necessary</b> One per benefit period in lieu of glasses	Covered in full
<b>Elective Contact Lenses – Conventional/Disposable</b> One per benefit period	Covered in full up to <u>\$120</u> retail value

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# BASIC LIFE & AD&D AND VOLUNTARY LIFE

Providence Anesthesiology Associates provides Basic Life and AD&D coverage to physicians at a cost of \$7.75 per month. They also provide an opportunity for you to purchase additional Voluntary Employee, Spouse and Child Life coverage. Our plan is administered by Unum. Additional information can be found on the website at [www.Unum.com](http://www.Unum.com) or by calling 866-679-3054.

Basic Life and AD&D and Voluntary Life	
<b>Basic Employee Life and AD&amp;D</b>	<b>\$50,000</b>
<b>Voluntary Employee Life</b>	<b>Increments of \$10,000 up to \$500,000, not to exceed 5X salary <sup>1</sup> Guaranteed issue of \$150,000 for newly eligible employees</b>
<b>Voluntary Dependent Life</b>	<b>Spouse: Increments of \$5,000 up to \$500,000, not to exceed 100% of employee benefit, employee must have voluntary life <sup>1</sup> Guaranteed issue of \$50,000 for newly eligible employees</b>  <b>Children: \$10,000 for ages 6 months to 19 (or 26 if full-time student) (\$1,000 from birth to 6 months) Guaranteed issue of \$10,000</b>

<sup>1</sup> If you wish to elect amounts over the guaranteed issue amount, or waived coverage when initially eligible, you will need to complete an Evidence of Insurability (EOI) form, which can be found on the Paylocity portal.

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# SHORT TERM DISABILITY

Short term disability will continue to be administered by Unum. Additional information can be found on the website at [www.Unum.com](http://www.Unum.com) or by calling 866-679-3054.

	<b>Voluntary Short Term Disability Benefits</b>
<b>Elimination Period</b>	<b>14 days for an accident or sickness</b>
<b>Benefit Amount</b>	<b>60% of weekly earnings</b>
<b>Benefit Duration</b>	<b>Up to 11 weeks</b>
<b>Benefit Maximum</b>	<b>Up to \$1,000 weekly</b>

*Not currently enrolled?*

*If you did not elect this benefit when first made eligible, an Evidence of Insurability Form (EOI) will be required. This form can be found on the Paylocity portal.*

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# LONG TERM DISABILITY

Providence Anesthesiology Associates enrolls physicians in Long Term Disability insurance at a cost of \$233.34.

The plan is administered by Unum and additional information can be found on the website at [www.Unum.com](http://www.Unum.com) or by calling 866-679-3054.

	Long Term Disability Benefits
<b>Elimination Period</b>	<b>90 days</b>
<b>Benefit Amount</b>	<b>60% of your monthly salary</b>
<b>Benefit Duration</b>	<b>Up to age 65 if you are 60 years old or younger at the time the disability occurred</b>
<b>Benefit Maximum</b>	<b>Up to \$10,000 monthly</b>

Did you know that you are more likely to become disabled than to die before age 65?

Providence Anesthesiology Associates provides this benefit for you to protect you and your family.

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# VOLUNTARY BENEFITS – CRITICAL ILLNESS with CANCER

PAA provides all employees the opportunity to purchase group critical illness with cancer. This benefit provides you with a lump sum benefit if you are diagnosed with one of the covered conditions. Please see the carrier benefit summary for full details.

Tier	Benefit
Employee	\$10,000 or \$20,000 All Guarantee Issue
Spouse	\$10,000 All Guarantee Issue
Children	Automatically included with employee coverage at 50%
Wellness Benefit	\$50

Category	Covered Conditions
Category 1	Heart Attack, Stroke, Coronary Artery Bypass Surgery
Category 2	Benign brain tumor, Major organ failure, End stage renal (kidney) failure, Blindness
Category 3	Coma, Occupational HIV, Permanent Paralysis
Optional Cancer Conditions	Cancer and Carcinoma in situ

Monthly premium for \$10,000 of coverage				
Age	Without cancer coverage		With cancer coverage	
	Non-tobacco	Tobacco	Non-tobacco	Tobacco
0-24	\$2.60	\$3.60	\$4.30	\$6.30
25-29	\$2.60	\$4.00	\$4.80	\$7.50
30-34	\$3.70	\$6.00	\$6.90	\$11.20
35-39	\$4.80	\$8.50	\$9.40	\$16.40
40-44	\$6.80	\$12.60	\$13.40	\$24.00
45-49	\$9.00	\$16.70	\$18.40	\$33.20
50-54	\$11.70	\$21.20	\$24.30	\$44.30
55-59	\$15.20	\$26.40	\$32.00	\$56.40
60-64	\$19.60	\$32.80	\$40.90	\$67.60
65-69	\$23.10	\$34.80	\$46.00	\$70.50
70-99	\$44.60	\$60.70	\$82.50	\$113.50

## Cost of coverage example

**Example: The cost of \$10,000 of coverage for a 50 year old non-tobacco user including cancer coverage would be \$24.30 + \$1.60 = \$25.90.**

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.



# VOLUNTARY BENEFITS – ACCIDENT

## Group Accident

### How it can protect

- Pays a lump sum benefit based on type of injury sustained and treatment needed.
- Benefits are paid directly to the employee.
- Benefit can be used however employees choose.

### Product Features

- On/Off Job coverage.
- Includes a \$50 wellness benefit per year for each insured person
- \$50 Wellness benefit is easy to collect. You just call Unum and tell us you have had your exam. No paperwork required.

### Who is eligible

- Family coverage is available: Employee, Spouse and Children
- Children, stepchildren and legally adopted children from newborn to age 26, regardless of marital or student status.

### On/Off Job Accident

An illustrative example of how accident coverage can help you with your expenses\*

40-year-old claimant

Accident: Fall at home

Injury: Broken toe and ACL tear  
(knee ligament injury)

Out-of-pocket expenses incurred:

\$100 emergency room copay

\$500 deductible

\$750 copay for surgery (\$3,750 x 20%)

\$150 copay for 10 physical therapy visits

Total out-of-pocket expenses: \$1,500

Benefits paid:

\$150 emergency room visit

\$100 appliance (knee brace)

\$150 fractured toe

\$800 surgical ligament tear repair

\$ 75 follow-up appointment

\$150 for six physical therapy sessions

Total benefit paid under policy: \$1,425

Monthly Premium (includes Wellness)			
Employee	Employee and Spouse	Employee and Child	Employee, Spouse and Child
\$16.14	\$26.67	\$29.03	\$39.56

Refer to the carrier benefits summaries for the exact benefit levels. Should there be a discrepancy between the table and the plan documents, the plan documents will govern.

# Employee Payroll Deductions - HDHP

**Payroll Authorization:** Please note that by enrolling, you are also authorizing your employer to deduct the cost of all eligible benefits under Section 125 of the Internal Revenue Code on a pre-tax basis unless a waiver form is received.

Benefits	Monthly Contributions
	<b>HSA 2750/100%</b>
Employee	\$775.60
Employee + Spouse (including Domestic Partner)	\$1,728.53
Employee + Child	\$1,086.72
Employee + Child(ren)	\$1,490.21
Employee + Family (including Domestic Partner)	\$2,415.79
	<b>HSA 3500/100%</b>
Employee	\$713.03
Employee + Spouse (including Domestic Partner)	\$1,601.26
Employee + Child	\$1,003.99
Employee + Child(ren)	\$1,379.44
Employee + Family (including Domestic Partner)	\$2,241.03

The rates shown in this guide are illustrative only. To the extent the rates contained herein differ from those in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the rates in the underlying insurance documents will govern in all cases.

# Employee Payroll Deductions – PPO (Copay Plan)

**Payroll Authorization:** Please note that by enrolling, you are also authorizing your employer to deduct the cost of all eligible benefits under Section 125 of the Internal Revenue Code on a pre-tax basis unless a waiver form is received.

Benefits	Monthly Contributions
	<b>PPO 2500/60%</b>
Employee	\$639.39
Employee + Spouse (including Domestic Partner)	\$1,452.17
Employee + Child	\$905.81
Employee + Child(ren)	\$1,249.44
Employee + Family (including Domestic Partner)	\$2,037.61

The rates shown in this guide are illustrative only. To the extent the rates contained herein differ from those in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the rates in the underlying insurance documents will govern in all cases.

# Employee Payroll Deductions – Dental & Vision

**Payroll Authorization:** Please note that by enrolling, you are also authorizing your employer to deduct the cost of all eligible benefits under Section 125 of the Internal Revenue Code on a pre-tax basis unless a waiver form is received.

Benefits	Monthly Contributions
	<b>Dental</b>
Employee	\$48.48
Employee + Spouse (including Domestic Partner)	\$98.43
Employee + Child(ren)	\$131.78
Employee + Family (including Domestic Partner)	\$186.11
	<b>Vision</b>
Employee	\$8.22
Employee + Spouse (including Domestic Partner)	\$13.82
Employee + Child(ren)	\$14.08
Employee + Family (including Domestic Partner)	\$22.28

The rates shown in this guide are illustrative only. To the extent the rates contained herein differ from those in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the rates in the underlying insurance documents will govern in all cases.

# OPEN ENROLLMENT

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Open Enrollment is scheduled from  
**Monday, October 24 through Friday, November 4<sup>th</sup>**

All updates are to be completed in the Paylocity enrollment portal.

Remember, Open Enrollment is your only opportunity each year to make changes to your elections, unless you or your family members experience an eligible “qualifying event” — such as marriage, birth, adoption, divorce, loss of coverage or a spouse’s open enrollment period.

You must notify Human Resources (within 30 days of a qualifying event) in order to make changes to your benefit elections outside of Open Enrollment.