



2024 Open Enrollment

Pierz ISD 484 November 2023



300 North Corporate Drive, Suite 300, Brookfield, WI 53045 800.627.3660

NISBenefits.com

First Things, First.

- Introductions
 - Health Insurance
- Health Savings Account
- Flexible Spending Account
- Dental Insurance
- Vision Insurance
- Life Insurance
- Disability Insurance
- Additional Services
- Open Enrollment
- Questions







NIS: Who We Are

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com



Meet Your Team



Aaron Casper Employee Benefits Consultant

Your full benefit expert: Responsible for overall assessment and management of all your benefit plans.



Adam Kuck Account Manager

Your main point of contact for all your benefit plans. Resolves employee claim issues with carriers, takes policy-related questions, and assists the Consultant with the medical carrier during renewal.



Ashley Veenendaal Senior Client Relations

Your medical and ancillary benefit resource for assistance with policy changes, renewals, claim reconciliation, and Benefit Bridge implementation.



Pierre Guilfoile Director of Health Plan Analytics

Your medical and dental utilization specialist: Runs utilization analytics and presents solutions based on your data. Handles medical and dental renewals, policy changes and claim reconciliation.





Heath Insurance Definitions

Definitions

Deductible

The amount of money you're required to pay out-of-pocket before your plan starts paying benefits. Once you
reach your deductible, your insurance will cover the rest for the duration of your plan year if your plan
includes 100% coinsurance.

Coinsurance

• The percentage of claims charged by your health care provider that you're responsible for paying until you reach your out-of-pocket maximum.

Out-of-Pocket Maximum

 The dead-stop total amount of money you have to pay out of your own pocket for claims costs after your deductible and coinsurance are both satisfied.

Co-Pay

 The payment you're responsible for in addition to an amount paid by your insurance. For example, if you have a \$50 copay for a \$250 in-network doctor's visit, that means you pay \$50 for the visit. Your health insurance would pay the rest.



Definitions Continued

Network

- A network is a group of health care providers who've agreed to provide you with discounted, pre-negotiated rates.
- When you visit providers outside of your network (called out-of-network providers), they can charge you whatever they want and can balance bill you after the insurance company pays their portion.

Embedded Deductible

On a family contract, each family member has an individual deductible in addition to the overall family deductible. This means that if one member of the family reaches the individual deductible before the family deductible is reached, his/her services will be paid by the insurance company. The other members on the plan would then have to satisfy the remaining family deductible/out of pocket maximum.

Non-Embedded Deductible

• There is no individual deductible. On a family contract, the overall family deductible must be reached, either by an individual or by the family in order for the insurance company to pay for services.





Heath Insurance Options

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com

Your Insurance Carrier

• Your insurance carrier is Sourcewell / HealthPartners

HealthPartners[®]



Plan Options

Your plan offering includes 3 plan options

- \$1,600 Deductible Plan
- \$3,200 Deductible Plan
- \$4,150 Deductible Plan

*These are the same three plans we offered last year, other than the deductibles indexing up slightly due to IRS minimum deductible levels changing for HSA-eligible plans in 2024.





Plan Design Layout

Deductible (Non-Embedded)\$1,600 Individual \$3,200 Family\$3,200 Individual \$6,400 FamilyOut-Of-Pocket Maximum\$1,600 Individual \$3,200 Family\$4,800 Individual \$9,600 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceOffice Visits0% Coinsurance0% CoinsuranceIvrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance0% CoinsurancePreventative: \$0 0% Coinsurance0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: Not CoveredRetail Formulary or Preventative: 20% Coinsurance Non-Formulary: Not Covered	\$1,600 HSA/VEBA Deductible Plan	In-network	Out-of-network
Maximum\$3,200 Family\$9,600 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary or Mail: Not CoveredRetail Formulary or Mail: Not Covered	Deductible (Non-Embedded)		
Office VisitsO% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance			
Urgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance	Preventive Care	100% Coverage	20% Coinsurance
Hospital VisitsO% Coinsurance20% CoinsuranceEmergency RoomO% CoinsuranceO% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Office Visits	0% Coinsurance	20% Coinsurance
Emergency Room 0% Coinsurance 0% Coinsurance Prescription Coverage Preventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance Retail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Urgent Care	0% Coinsurance	0% Coinsurance
Prescription Coverage Preventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Retail Formulary or Preventative: 20% Coinsurance Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Hospital Visits	0% Coinsurance	20% Coinsurance
Prescription CoveragePreventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Emergency Room	0% Coinsurance	0% Coinsurance
	Prescription Coverage	Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance	Retail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered



Plan Design Layout

Deductible (Embedded)\$3,200 Individual \$6,400 Family\$6,400 Individual \$12,800 FamilyOut-Of-Pocket Maximum\$3,200 Individual \$6,400 Family\$9,600 Individual \$19,200 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceOffice Visits0% Coinsurance0% CoinsuranceIvrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance0% CoinsuranceFerergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered Non-Formulary: Not Covered	\$3,200 HSA/VEBA Deductible Plan	In-network	Out-of-network
Maximum\$6,400 Family\$19,200 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance0% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary or Preventative: 20% Coinsurance	Deductible (Embedded)		
Office VisitsO% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered			
Urgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Preventive Care	100% Coverage	20% Coinsurance
Hospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Office Visits	0% Coinsurance	20% Coinsurance
Emergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Urgent Care	0% Coinsurance	0% Coinsurance
Prescription Coverage Preventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Retail Formulary or Preventative: 20% Coinsurance Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Hospital Visits	0% Coinsurance	20% Coinsurance
Prescription CoveragePreventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Emergency Room	0% Coinsurance	0% Coinsurance
	Prescription Coverage	Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance	Retail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered



Plan Design Layout

Deductible (Embedded)\$4,150 Individual \$8,300 Family\$8,300 Individual \$16,600 FamilyOut-Of-Pocket Maximum\$4,150 Individual \$8,300 Family\$12,450 Individual \$24,900 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance0% CoinsurancePreventive: \$0<000 (Generic) Preventative: \$0.50 (Generic) Preventative: \$0.50 (Generic) Non-Formulary: Not Covered Non-Formulary: Not CoveredRetail Formulary or Preventative: 20% Coinsurance Non-Formulary: Not Covered	\$4,150 HSA/VEBA Deductible Plan	In-network	Out-of-network
Maximum\$8,300 Family\$24,900 FamilyPreventive Care100% Coverage20% CoinsuranceOffice Visits0% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Formulary: 0% CoinsurancePreventative: 20% Coinsurance	Deductible (Embedded)		
Office VisitsO% Coinsurance20% CoinsuranceUrgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand)Retail Formulary or Preventative: 20% Coinsurance			
Urgent Care0% Coinsurance0% CoinsuranceHospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance	Preventive Care	100% Coverage	20% Coinsurance
Hospital Visits0% Coinsurance20% CoinsuranceEmergency Room0% Coinsurance0% CoinsurancePrescription CoveragePreventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Bromulary: 0% CoinsuranceRetail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Coverage	Office Visits	0% Coinsurance	20% Coinsurance
Emergency Room 0% Coinsurance 0% Coinsurance Prescription Coverage Preventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance Retail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered	Urgent Care	0% Coinsurance	0% Coinsurance
Prescription Coverage Preventative: \$0 Copay (Generic) Preventative: \$50-\$100 Copay (Brand) Retail Formulary or Preventative: 20% Coinsurance Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Hospital Visits	0% Coinsurance	20% Coinsurance
Prescription Coverage Preventative: \$50-\$100 Copay (Brand) Retail Formulary or Preventative: 20% Coinsurance Formulary: 0% Coinsurance Non-Formulary or Mail: Not Covered	Emergency Room	0% Coinsurance	0% Coinsurance
	Prescription Coverage	Preventative: \$50-\$100 Copay (Brand) Formulary: 0% Coinsurance	Retail Formulary or Preventative: 20% Coinsurance Non-Formulary or Mail: Not Covered





\$1,600 Deductible Plan	1/1/24 Rates
Employee	\$822.95
Employee + Spouse	\$1,759.36
Employee + Child(ren)	\$1,534.46
Family	\$2,284.19

\$3,200 Deductible Plan	1/1/24 Rates
Employee	\$749.66
Employee + Spouse	\$1,602.67
Employee + Child(ren)	\$1,397.80
Family	\$2,080.76

\$4,150 Deductible Plan	1/1/24 Rates
Employee	\$712.41
Employee + Spouse	\$1,523.04
Employee + Child(ren)	\$1,328.35
Family	\$1,977.37





Open Access network



Get the most choices of doctors and clinics.





Search the network for your doctor or find a new one at healthpartners.com/openaccess



Your member ID card





What is the Top Value Rewards program?

- Facing surgery or a medical procedure?
 - Choosing a top value provider ensures you receive the best care at the best value.
 - Your coinsurance will be waived and, if traveling more than 50 miles from home, you can be reimbursed for travel and lodging expenses.
 - You will also become eligible to receive a gift card for choosing a top value provider for eligible procedures.
- End result: you get the best care and you pay less.





Top Value Reward Program-Gift Cards

Top Value Providers: Eligible procedures	Gift Card Amount Smart Plans 1, 3, 5, 7, 8 100/0 Plans	Gift Card Amount Smart Plans 2, 4, 6 80/20 Plans
Spine Surgery	\$1,000	\$500
(Arthroscopic) Shoulder Surgery	\$1,000	\$500
Hip Replacement & Revision	\$1,000	\$500
Knee Replacement & Revisions	\$1,000	\$500
Cardiac Ablation	\$1,000	\$500
(Arthroscopic) Knee Surgery	\$500	-
Gallbladder Surgery	\$500	-
Hernia Surgery, Inguinal	\$500	-
Cataract Surgery	\$500	-
Carpal Tunnel Surgery	\$200	-
Rotator Cuff Surgery	\$200	-
Cardiac Catheterization/Angioplasty	\$200	-
Tonsil/Adenoid Surgery	\$200	-
Ear Tubes	\$200	-



Find the best plan with Plan for Me^{s™}

Compare your plan options and potential costs – all based on your unique situation.

Enter the age and gender for you and anyone else you want your plan to cover. Pick from a list of common health conditions, medical events, care visits and medicines.

• Check if your doctor is in-network

- See how your meds are covered
- Estimate your health care costs
- Compare your plan options



Get started at **healthpartners.com/planforme**

Formity Medical Confirm Fittsh Review your health care needs info Well done - you've completed the health care needs section. Take a look at your info and check to see if it's correct. If not, you can make changes now. Name Health conditions Medical events Visits Activity Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits P East Seth Depression Broken bone (lower arm or leg) – 2 events Primary care doctor's office – 3 visits P East Urgent care – 1 visit Urgent care – 2 visits Visits P East	Family Medical Confirm Finish Active Brown you've completed the health care needs info Finish Well done - you've completed the health care needs section. Take a look at your info and check to see if it's correct. If not, you can make changes now. Mane Health conditions Medical events Visits Active Sue Arthritis Pregnancy - vaginal delivery - 1 event Primary care doctor's office - 2 visits Peer Seth Depression Broken bone (lower arm or leg) - 2 events Primary care doctor's office - 3 visits Peer Cecella None selected Ear tubes - 1 event Primary care doctor's office - 3 visits Peer	1	0 0 0	0	
New your health care needs section. Take a look at your info and check to see if it's correct. If not, you can make changes now. Name Health conditions Medical events Visits Activity Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits et e	Mame Health conditions Medical events Visits Activity Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits E Edition Seth Depression Broken bone (lower arm or leg) – 2 events Dirimary care doctor's office – 3 visits E Edition Cecella None selected Ear tubes – 1 event Primary care doctor's office – 3 visits E Edition			4	
Name Health conditions Medical events Visits Activity Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits / Ex Seth Depression Broken bone flower arm or legi – 2 events Primary care doctor's office – 3 visits / Ex Cecelia None selected Ear tubes – 1 event Primary care doctor's office – 3 visits / Ex	Well done - you've completed the health care needs section. Take a look at your info and check to see if it's correct. If not, you can make changes now. Name Health conditions Medical events Visits Activ Sue Arthritis Pregnancy - vaginal delivery - 1 event Primary care doctor's office - 2 visits PEG Seth Depression Broken bone (lower arm or leg) - 2 events Primary care doctor's office - 3 visits PEG Cecelia None selected Ear tubes - 1 event Primary care doctor's office - 3 visits PEG		Family Medical Confirm	Finish	
Name Health conditions Medical events Visits Activity Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits E avents Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits E avents Seth Depression Broken bone (lower arm or leg) – 2 events Primary care doctor's office – 3 visits E avents Cecelia None selected Ear tubes – 1 event Primary care doctor's office – 3 visits E avents	Well done - you've completed the health care needs section. Take a look at your info and check to see if it's correct. If not, you can make changes now. Name Health conditions Medical events Visits Activ Sue Arthritis Pregnancy - vaginal delivery - 1 event Primary care doctor's office - 2 visits PEG Seth Depression Broken bone (lower arm or leg) - 2 events Primary care doctor's office - 3 visits PEG Cecelia None selected Ear tubes - 1 event Primary care doctor's office - 3 visits PEG	ew your he	ealth care needs info		
Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits Primary care doctor's office – 2 visits Primary care doctor's office – 2 visits Seth Depression Broken bone (lower arm or leg) – 2 events Primary care doctor's office – 3 visits Primary care doctor's office – 3 vi	Sue Arthritis Pregnancy – vaginal delivery – 1 event Primary care doctor's office – 2 visits Image: Care - 1 visit Seth Depression Broken bone (lower arm or leg) – 2 events Primary care doctor's office – 3 visits Image: Care - 2 visits Image: Care -	•		see if it's correct. If not, you can make changes now.	
Seth Depression Broken bone (lower arm or leg) – 2 events Lower back pain – without surgery – 5 events Primary care doctor's office – 3 visits P Example in the surgery – 5 events Cecella None selected Ear tubes – 1 event Primary care doctor's office – 3 visits P Example in the surgery – 5 events	Seth Depression Broken bone (lower arm or leg) – 2 events Lower back pain – without surgery – 5 events Primary care doctor's office – 3 visits P Ed Cecella None selected Ear tubes – 1 event Primary care doctor's office – 3 visits P Ed Urgent care – 2 visits virtuwell® – 1 visit Virtuwell® – 1 visit P Ed Cecella None selected Ear tubes – 1 event P rimary care doctor's office – 3 visits P Ed Urgent care – 2 visits virtuwell® – 2 visits Virtuwell® – 2 visits P Ed	Health conditions	Medical events	Visits	Actio
Lower back pain – without surgery – 5 events Urgent care – 2 visits virtuwell® – 1 visit Cecella None selected Ear tubes – 1 event Primary care doctor's office – 3 visits V Execution Urgent care – 2 visits V Execution	Lower back pain – without surgery – 5 events Urgent care – 2 visits virtuwell® – 1 visit Cecella None selected Ear tubes – 1 event Primary care doctor's office – 3 visits ✓ Ee Urgent care – 2 visits virtuwell® – 2 visits	Arthritis	Pregnancy – vaginal delivery – 1 event	Urgent care - 1 visit	₽ Edi
Urgent care – 2 visits	Urgent care — 2 visits virtuweli® — 2 visits	Depression		Urgent care - 2 visits	Sec.
	Go back Save and continu	None selected	Ear tubes — 1 event	Urgent care - 2 visits	✓ Edit
			ew your he - you've completed the he Health conditions Arthritis Depression	Furthy Image: Confirm Furthy Image: Confirm Health completed the health care needs section. Take a look at your info and check to Medical events Arthritis Pregnancy – vaginal delivery – 1 event Depression Broken bone (lower arm or leg) – 2 events Lower back pain – without surgery – 5 events	Image: Note selected Image: Note selected <th< td=""></th<>

Group Number	5126
Site Number	AII
Effective Date (plan start date)	01/01/2024



Care today for a healthy tomorrow

Prevent problems	Alcohol, tobacco and weight screenings	Screenings for high blood pressure, diabetes and cholesterol	Breast, cervical and colorectal cancer screenings
before they start. Even if you're not sick, you can catch any issues early – when treatment is most effective. Your health plan covers in-network preventive care at 100%; you don't pay anything.	Routine pre- and post-natal care	Vaccines	Well-child visits
Visit healthpartners.com/preve	ntive to find out what care is	recommended for you.	



Virtuwell[®] – 24/7 online clinic

Save time and money by getting treated for common conditions from your smartphone, tablet or computer. Your plan covers telemedicine care.

Fast, affordable and guaranteed

0

Start your visit any time with any device – no appointments, video or downloads needed

	1	
-		

Answer a few questions online to get treatment for more than 60 common conditions



Nurse practitioners give you a diagnosis, treatment plan and prescription – all in about an hour



If for any reason you can't be treated, there's no charge. Plus follow-up care about your treatment is free



Virtuwell visits are a fraction of the cost of walk-in, urgent or primary care visits. **Plan members will receive 100% coverage for the first three visits with Virtuwell**. View FAQs and get started at <u>virtuwell.com/cost/healthpartners</u>

11:10 7	e virtuwell.	com	II LTE 🖿	
	virtuw	vell	×	
l'm her	re for:			I
Acne Continue >	•			
Allergies Continue >				
Birth Cor Continue >		© 2023	B HealthPartners	21

Doctor On Demand

Save time and money by getting treated for common conditions from your smartphone, tablet or computer. Your plan covers telemedicine care.

0

Urgent care for cold and flu, skin conditions and allergies



Live video visits with a doctor include assessment, diagnosis and prescription

C

When you create a free member account, your cost is always shown up front, without any surprise bills later

Register at doctorondemand.com



11:14 🔻		
<		
What i your v	s the reason for isit?	
Q Search	for a reason	- 1
OR CHOOSI	E FROM TOP REASONS	
	Cold	\bigcirc
	Cough	\supset
	Influenza (flu)	\sum
	Nasal congestion © 2023 HealthPart	ners 22

Prescription benefits

Prescription coverage

Check your formulary (drug list) to understand your costs and get support if your medicine isn't working for you.



Formulary

Covered medications on your plan's drug list, including brand, generics, and specialty medications.



Non-Formulary

Medications not found on your plan's drug list. The plan does not cover drugs that are not on the formulary.



Search by the name or type of medicine at <u>healthpartners.com/preferredrx</u> Use your Summary of Benefits and Coverage (SBC) to find how much you'll pay.



Get the most from your medicines

Try generics



Search for the lowest cost



Talk with a pharmacy navigator



Meet with a pharmacist



They're just as safe and effective, but cost a lot less.

Talk to your doctor or pharmacist.

Our online Prescription shopping tool helps you understand your plan coverage, compare pharmacy prices, transfer prescriptions and more.

Members can get started at healthpartners.com/pharmacy

Answers to your questions around benefits, coverage, costs, formularies and more.

Call Member Services and ask to talk with a **Pharmacy Navigator**.

In a one-on-one visit, a pharmacist will review your medicines with you to make sure they're working and are right for you. Plus, it's free.

Learn more at healthpartners.com/mtminfo



Medicine delivered to your door

Skip the trip to the pharmacy. Get your prescriptions mailed to your home with WellDyne.

5 great things about mail order

- 1 You'll never pay for standard shipping.
- 2 Refilling your medicine online or with the mobile app is easy.
- 3 All orders are sent in a tamper-resistant, plain package to make it more private.
- **4** Safety is important. You'll get the best quality medicine.
- 5 You'll get your medicine delivered within seven to 10 days and can track the status of your order every step of the way.



To get started, call **800-591-0011** or visit **healthpartners.com/mailorder**





Extra support

Your Fertility Benefits

Sponsored by the Better Health Collective





Comprehensive Coverage

Bundled fertility treatment coverage for every unique path to parenthood



Personalized Guidance

Unlimited guidance and support from a dedicated Patient Care Advocate (PCA)



Premier Specialists

Convenient access to the largest national network of fertility experts

To learn more and activate your benefit, call: **833.208.8447**



Omada

Omada for Diabetes Prevention

Omada for Condition Management (Diabetes & Hypertension

• Health coaching, peer group support, connected devices







Get started at omadahealth.com/healthpartners

Personal nurse support

Living with a health condition is easier when you have a team of people to support you. Work with a nurse one on one at no cost.

We offer personalized support and resources through phone calls and other communications for **no cost.** So you can manage your condition and stay out of the hospital.

Working with a HealthPartners nurse is a great addition to your health care team. All support is confidential. A HealthPartners nurse can help:

Focus on your goals

Answer questions

Work with you and your doctor

Connect you to resources



Get started at healthpartners.com/nursesupport



Face cancer with confidence

You don't need to face a cancer diagnosis alone. Our nurses will be with you every step of the way.

Through phone calls and other communications, we'll support you in feeling your best and meeting your personal health goals. All support is confidential and at no cost to members. A HealthPartners nurse can:

Help you make decisions that fit your life and values

Connect you to resources

Collaborate with your provider and clinic team

Listen when you just need someone to talk to



Get started at **healthpartners.com/cancersupport**



Relief for your back pain

Most Americans will experience back pain at some point in their lives.

We offer personalized support and resources for **no cost** through phone calls and other communications.

A HealthPartners nurse is a great addition to your health care team. All support is confidential.

Get tips to manage pain

Learn about treatment options

Find resources to help you feel better



Learn more at <u>healthpartners.com/backhealth</u> Get started at <u>healthpartners.com/healthsupport</u>



Healthy baby, healthy you

If you're pregnant or thinking about it, we're here to help. Our support is confidential and no cost.

Start by taking the online assessment



You may get a call from a nurse to answer questions and get advice between doctor visits



You'll have access to **My Pregnancy –** a personalized, digital support written by our health experts and timed to where you're at in your pregnancy



Download our free **<u>myHealthyPregnancy app</u>** powered by YoMingo for important anytime, anywhere parent education and fun extras for every stage of pregnancy, newborn care and more





Visit healthpartners.com/healthy-pregnancy to learn more and take the assessment



Move more with Wellbeats

Wellbeats offers on-demand fitness, nutrition and mindfulness classes to help you live a healthier life.

Find opportunities for all ages, interests and ability level.

Enjoy classes like yoga, strength training, running,
meditation, nutrition and recipes, cycling, dance,
stretching and more. New classes are added regularly!



Get personalized recommendations based on your well-being preferences and goals.





Sign in to your well-being program at healthpartners.com/livingwell

Living healthier just got a little less expensive

Get special savings from handpicked retailers – all designed to help you live healthy every day.

Show your member ID card to save money on:

O Eyewear	Healthy mom and baby products
O Exercise equipment	O Hearing aids
• Fitness classes	O Pet insurance
• Well-being classes	• And more!
Eating well	

Discounts on gym memberships

Husk Gym Network:

 Discounts on memberships at more than 11,000 fitness centers, weight loss programs and wellness brands

The Active&Fit Direct[™] program:

• Access more than 11,000 fitness centers nationwide for a flat monthly fee



Visit **healthpartners.com/discounts** for a list of participating retailers and discounts

A resilient you

We're here to support the whole you – including your emotional health.

Our free and confidential programs will help you build resilience and cope with life's challenges.

- Digital well-being activities to help build healthy habits, like *Healthy* Thinking and Tackle Stress
- myStrength flexible and comprehensive digital program with tools and activities for stress, depression, sleep and more



Answers to benefits-related questions from behavioral health navigators



Behavioral health navigators

Guidance to understand your mental or chemical health benefits



Visit healthpartners.com/resilience for more information and resources
Find balance with everyday support





Take charge of your health plan

You go online to research, plan and follow up on big decisions.

A HealthPartners online account makes it just as easy to stay on top of your health care and insurance. You have real-time access to your personal health plan information in one simple place.

Top 6 ways to use your online account and mobile app



See recent claims, what your plan covered and how much you could owe.



Access your Living Well dashboard to check your program progress, take the health assessment and complete activities.



Get cost estimates for treatments and procedures specific to your plan.



Check your balances, including how much you owe before your plan starts paying (deductible) and the most you'll have to pay (out-of-pocket maximum).



View your HealthPartners member ID card and fax it to your doctor's office.



Search for doctors and pharmacies covered by your plan.



Sign in at *healthpartners.com* or on the myHP mobile app





Here for you 24/7

Member Services	Help with all things related to your plan	Mon – Fri, 7 a.m. to 6 p.m., CT 800-883-2177 or 952-883-5000
Nurse Navigator sm program	Support in finding the right care	Mon – Fri, 7:30 a.m. to 5 p.m., CT 800-883-2177 or 952-883-5000
Pharmacy Navigators	Help with your medicines	Mon – Fri, 8 a.m. to 5 p.m., CT 800-883-2177 or 952-883-5000
Behavioral Health Navigators	Help with mental or chemical health benefits	Mon – Fri, 8 a.m. to 5 p.m., CT 888-638-8787
CareLine sM service nurse line	Trusted nurse advice	24/7, 365 days a year 800-551-0859
BabyLine phone service	Expert guidance on your pregnancy or new baby	24/7, 365 days a year 800-845-9297





Health Savings Account (HSA)

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com

Your Health Savings Account (HSA)



Account **you own** that works with your HSAqualified health plan Allows you to set aside Yo a portion of **pretax** the **payroll** th

You **pay no taxes** on the money you put into the account – or funds you take out to pay for qualified medical expenses

Any interest earned is

tax-free

No "use it or lose it" stipulation; unused funds rollover to the next year

The account **stays with you,** even if you change jobs or retire



How your HSA works



Enroll in your employer's HSA-qualified health plan

42 Proprietary + Confidential

Ensure

that you:

Are not claimed as a dependent on someone else's tax return

Have no other health plan coverage (including spouse's medical FSA¹)

Are not enrolled in Medicare

Set aside

portion of payroll pretax, not more than:

2023:

\$3,850 for single \$7,750 for family

2024: \$4,150 for single \$8,300 for family

\$1,000 catch-up contribution – 55 & over

Use a convenient Further debit card to pay providers

Submit bills

for reimbursement of out-of-pocket expenses



¹HSA can be combined with FSA only if FSA is limited to dental and/or vision coverage.



You can use your HSA to pay for:

NEW! Over-the-counter supplies,

- medications, and some feminine hygiene products
- Medical expenses not covered by your health plan, including:
 - Out-of-pocket expenses
- Prescription drugs

- Co-pays
- Co-insurance

Vision care expenses

Dental care expenses

- It's important to save all your receipts to
- validate expenses, as required by the IRS.
- Health insurance premiums
 - COBRA during a job transition or postemployment
 - Medicare upon reaching the age of 65
 - Some long-term care insurance premiums

These you can't pay for:

Expenses that aren't related to medical treatment or care as defined by the IRS

> Personal use items

- Toothpaste
- Lotions
- Makeup
- Soaps
- Shaving supplies
- > Health insurance premiums



43 | Proprietary + Confidential



Flexible Spending Account (FSA)

Your Medical Flexible Spending Account (FSA)









How your Medical FSA works



NIS National Insurance Services

46 Proprietary + Confidential

You can use your Medical FSA to pay for:



Always save your receipts to ensure proper validation of expenses, as required by the IRS. NEW! Over-the-counter supplies, medications, and some feminine hygiene
products

Expenses for you, your spouse, and any

🧹 health plan dependent

Medical expenses not covered by your health plan, including:

- Out-of-pocket medical expenses
- Copayments, coinsurance
- Prescription drugs
- Dental and vision care expenses

If you have an HSA, your FSA will be limited to vision and dental expenses until your health plan deductible has been met



These you can't pay for:

Costs that aren't considered qualified medical expenses as defined by the IRS

× Health insurance premiums





Easy to use tool that features:

- View account details and account balances
- Submit claims
- Snap a photo of a receipt and submit with a new or existing claim
- Report debit card lost or stolen
- Aviben mobile app available in Apple App Store or Google Play

(•	
F	8	•0 ▼∡ ₿
I.	Aviben Ariberta Fired States	
••••	My Accounts	
L	HSA Plan	\$597.35
L	Limited Purpose FSA	\$845.00
L	Dependent Care FSA	\$579.50
	l Want To	
	File A Claim	
L	S Make HSA Transaction	
	View HSA Investments	
	E ■ Manage Expenses	
	View Account Snapshot	
	A Q	[]⇒
	Home Profile	Log Out
	< ●	





Dental Insurance

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com



Dental Plan Highlights

BENEFIT LEVEL 1 BENEFIT LEVEL 2 OUT-OF-NETWORK Annual maximum \$1,500 \$1,000 \$750 Deductible \$25 **\$50** \$50 Per person per calendar year Family \$75 \$150 \$150 Preventive/Diagnostic care Exams, cleanings, x-rays, fluoride 100% 100% 100% Sealants, space maintainers 100% 100% 100% Basic I services No waiting period 6 month waiting period Amalgam fillings 100% 80% 50% Posterior composite fillings 80% 50% 80% Simple extractions 80% 80% 50% Non-surgical periodontics 80% 50% 50% Endodontics 80% 50% 50% **Basic II services** No waiting period 6 month waiting period Surgical periodontics 80% 50% 50% Other oral surgery 80% 50% 50% Major services No waiting period 12 month waiting period Crowns, onlays 50% 50% 0% Bridges, dentures 50% 50% 0% HealthPartners[®] **Dental implants** 50% 50% 0%



Dental Plan Rates

Monthly Dental Premiums	Current	1/1/24 Rates
Employee	\$34.79	\$36.88
Employee + 1	\$69.22	\$73.37
Family	\$104.33	\$110.59







Vision Insurance

Vision Plan Highlights

SUM	ARY OF BENEFITS	
VISION CARE SERVICES	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSEMENT
CONTACT LENS FIT AND FOLLOW-UP		
Fit and Follow-up - Standard	Up to \$40	Not covered
Fit and Follow-up - Premium	10% off retail price	Not covered
FRAME		
Frame	\$0 copay; 20% off balance over \$150 allowance	Up to \$105
LENSES		
Single Vision	\$20 copay	Up to \$30
Bifocal	\$20 copay	Up to \$50
Trifocal	\$20 copay	Up to \$70
Lenticular	\$20 copay	Up to \$70
Progressive - Standard	\$75 copay	Up to \$50
Progressive - Premium	\$105 - 195 copay	Up to \$50
LENS OPTIONS		
Anti Reflective Coating - Standard	\$45 copay	Up to \$23
Anti Reflective Coating - Premium Tier 1 - 3	\$57 - 85 copay	Up to \$23
Photochromic - Non-Glass	\$75	Not covered
Polycarbonate - Standard	\$40	Not covered
Polycarbonate - Standard < 19 years of age	\$0 copay	Up to \$20
Scratch Coating - Standard Plastic	\$15	Not covered
Tint - Solid and Gradient	\$15	Not covered
UV Treatment	\$15	Not covered
All Other Lens Options	20% off retail price	Not covered





SUM	MARY OF BENEFITS	
VISION CARE SERVICES	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSEMENT
CONTACT LENSES		
Contacts - Conventional	\$0 copay; 15% off balance over \$150 allowance	• Up to \$150
Contacts - Disposable	\$0 copay; 100% of balance over \$150 allowance	Up to \$150
Contacts - Medically Necessary	\$0 copay	Up to \$300
OTHER		
Hearing Care from Amplifon Network	Up to 64% off hearing aids; cal 1.877.203.0675	Not covered
EXAM SERVICES		
LASIK or PRK from U.S. Laser Network	15% off retail or 5% off promo price; call 1.800.988.4221	Not covered
FREQUENCY	ALLOWED FREQUENCY - ADULTS	ALLOWED FREQUENCY - KIDS
Lenses	Once every plan year	Once every plan year
Frame	Once every 2 plan years	Once every 2 plan years
Contact Lenses	Once every plan year	Once every plan year
(Plan allows the member to receive either cont	tacts and frame, or frame and lens se	ervices.)





Vision Plan Rates

Monthly Vision Premiums	Current
Employee	\$5.95
Employee + Spouse	\$11.31
Employee + Child(ren)	\$11.90
Family	\$17.49





Enjoy more extras: Member-only savings & discounts

40% off

additional pair of glasses

15% off

standard LASIK prices or 5% off the promotional price



20% off

any remaining balance over the frame allowance



20% off

15% off

any balance over the conventional contact lens allowance

any non-covered items, including non-prescription sunglasses **3** up to **40% off**

hearing exams and discounted, set pricing on hearing aids

eyemed

At participating in-network providers. Some exclusions may apply. Log into Member Web for details.

How to find an eye doctor



Use the Provider Locator at eyemed.com



Download and use the EyeMed Members App (available in the App Store or Google Play)



Check the listing of the closest eye doctors from your Welcome Kit (you'll get this after you enroll)





Experience more with member tools

You'll receive an in-home Welcome Kit detailing your new vision benefits and the closest eye doctors. And using your benefits couldn't be easier with access to convenient digital tools.

EyeMed Members App

- Benefits, eligibility and claims at-a-glance
- Find an eye doctor and get door-to-door directions
- Grab special offers
- Load and save prescriptions
- Set exam and contact lens reminders
- Pull up ID card and add to your wallet (for iOS only)

Member Web

- See benefits and eligibility status*
- View Savings Dashboard
- Estimate out-of-pocket costs before your visit to the eye doctor
- Download ID cards and EOBs
- Find an eye doctor
- Check claim status
- Get special offers



*Due to HIPAA regulations, members will not be able to view dependents over the age of 18





Life Insurance & LTD

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com

Life and Accidental Death & Dismemberment

Basic Life and AD&D

• Basic life and AD&D is provided by the school district to eligible employees based on your employment contract

Supplemental Life and AD&D

- Employees can purchase \$50,000 or \$100,000 of add'l life insurance (up to 7 times your annual earnings)
- Spouses employees can purchase \$25,000 or \$50,000 of life insurance for their spouses (no more that 50% of employee's supplemental life amount)
- Dependent child(ren) employees can purchase \$10,000 of life insurance for dependent children up to age 26
- *Remember: update your beneficiaries!!*

RELIANCE STANDARD



Disability insurance is income insurance.

- Employer Paid Premiums
- Benefit is a 60% based on pre-disability earnings with a 60 consecutive calendar day elimination period
- Eligibility varies by union contract
- Reliance Standard

RELIANCE STANDARD LIFE INSURANCE COMPANY





Additional Services

Employee Assistance Program (EAP)

Take Care of Your Most Valuable Asset Mental health is an aspect of our health that is often overlooked. Utilize the EAP to find solutions to some of your more personal struggles.

- Employees have access to counselors 24-hours a day,
- Toll free: 866-451-5465
- Up to 3 in-person assessment and counseling sessions at no cost.
- Legal Assistance, Financial Assistance, Child & Eldercare Assistance, Memorial Planning, Stress Management, Relationship problems, Depression
- Claimant Assist Services
- Toll Free: 866-472-2734







Open Enrollment

300 North Corporate Drive, Suite 300, Brookfield, WI 53045 | 800.627.3660 | NISBenefits.com

Don't Miss Open Enrollment!

Your Open Enrollment Period is:

11/06 - 11/17





©National Insurance Services





Questions?



Questions

Benefits Questions:

•

•

Who can I call?

Ashley Veenendaal, NIS Sr Client Relations; 262-780-1236 or aveenendaal@nisbenefits.com

• Jennie Loidolt, Human Resources Specialist; 320-468-6458 x1901 or jloidolt@pierz.k12.mn.us

Adam Kuck, NIS Account Manager; 262-780-1326 or akuck@nisbenefits.com

Aaron Casper, NIS Consultant; 262-780-1361 or acasper@nisbenefits.com

67