

2019

Group Plans



Need some answers? ▼



Call our Customer Care Center for questions about your benefits and more.

CALL

877.230.7555 (TTY: 711)
Monday – Thursday, 7:30 am – 5:00 pm
Friday, 8:00 am – 4:30 pm

CLICK

Visit prevea360.com/contact-us and select "Send a Message to Prevea360."

What's in your pocket?

Check out the folder pocket for more details about your membership.



Look inside this book for:

How we make you our top priority.

3–5

We'd like to introduce ourselves and share some of the services you get with Prevea360 Health Plan.

Your workplace offers health insurance. Now what?

6–7

See how Prevea360 Health Plan provides support to make your onboarding experience as seamless as possible.

Additional details about your care and coverage.

8–11

Learn about what your plan covers, how it works and details about plan limitations and exclusions.

Meet a Health Plan with a Personal Touch

Prevea360 Health Plan believes that health insurance companies should put people first. That's why we work so hard to help you prevent sickness in the first place and enhance your overall wellbeing. And if you should face an illness or injury, we'll be there to help you effectively manage your health conditions.

When you choose Prevea360 Health Plan, you benefit from having insurance that's integrated with your medical care. It's a different kind of health care model that combines physicians and coverage to better care for you.

Welcome to Prevea360 Health Plan, where our top interest is serving your best interest.



Local Roots with an Expansive Reach

The Prevea360 network is filled with local health care professionals who are here to help you and your loved ones remain as healthy as possible. With Prevea Health's clinics and physicians, along with its partner hospitals, we provide you with many choices for accessing care, near your home or workplace.

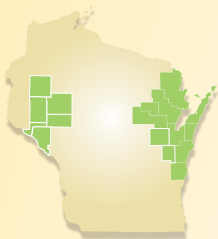


High Quality Coverage Stamped with Approval

We're proud to be recognized for high-quality care. Prevea360 Health Plan receives accreditation from the National Committee for Quality Assurance (NCQA). NCQA is an independent, not-for-profit organization that evaluates health plans based on more than 50 standards of care and service to determine health plan accreditation.

Insurance Designed With You In Mind

We provide you with valuable resources to manage your coverage and empower you to take control of your care. That means benefits you can understand, tools that save you time, and access to exceptional physicians and hospitals.



Convenient Access

Prevea360 Health Plan offers a comprehensive network of hospitals, physicians and specialists throughout northeastern and western Wisconsin. Our HMO service area includes these northeastern counties: Door, Marinette, Menominee, Shawano, Outagamie, Brown, Kewaunee, Manitowoc, Sheboygan, Oconto and Calumet. As well as these western counties: Barron, Buffalo, Chippewa, Dunn, Eau Claire and Pepin.



Physicians Ready to Care for You

Take advantage of exceptional medical care located in northeastern Wisconsin—all available through Prevea360 Health Plan. This includes:

- **650+** physicians
- **60+** primary care clinic locations
- **200 +** specialty care clinics

What's more, you're still covered for emergency services worldwide for those times you travel.



Trusted Hospitals

Prevea360 Health Plan gives you access to high-quality care and an exceptional patient experience at the following HSHS hospitals:

- **St. Vincent in Green Bay**
- **St. Mary's in Green Bay**
- **St. Nicholas in Sheboygan**
- **St. Clare Memorial in Oconto Falls**
- **St Joseph's Hospital in Chippewa Falls**
- **Sacred Heart Hospital in Eau Claire**

Plus, additional medical facilities in your network throughout northeastern and western Wisconsin.

Earn up to
\$150
in rewards!



LivingHealthy
POWERED BY WebMD | health services

Member Rewards

Living Healthy, powered by WebMD, is our comprehensive wellness program, offering a wide-range of wellness tools and programs. Plus, Prevea360 Health Plan members can earn up to **\$150** in wellness rewards per calendar year.*



Health Care Support

Prevea Care After Hours is available 24/7/365 whenever you need a little health advice. If you have a serious health condition or have complex health care needs, we offer our **Complex Case Management** program to give you the support you need.



Powerful Tools

You can conveniently manage your health information anytime and anywhere using **MyPrevea**. This online account allows you to send secure messages to your physician's office and to view your health records from the comfort of your home or even your mobile device. Plus, when you create your **Member Profile**, you'll have access to your insurance claims, cost estimates and documentation anytime.

*Only Prevea360 Health Plan members age 18 and older are eligible for Living Healthy rewards. Check with your plan administrator for reward offerings specific to your plan. Covered adult children (ages 18 and older) can earn up to \$100 per year. Visit prevea360.com/livinghealthy for full details.

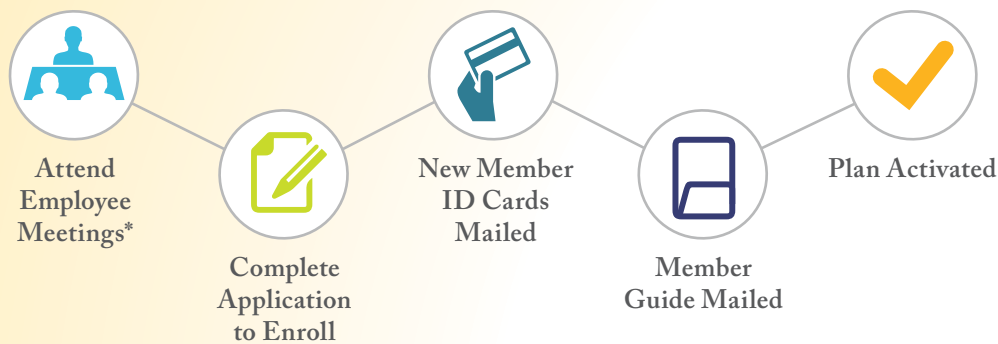
Prevea Care After Hours are only available to residents of Wisconsin due to licensing regulations.

First Impressions Matter

We understand that switching insurance can be overwhelming. That's why we go to great lengths to ensure your interactions with Prevea360 Health Plan go as seamlessly as possible, from start to finish.

Onboarding Process

Here's what you can expect as you join Prevea360 Health Plan:



Ambassador Program

Think of our Ambassador Program as your personal concierge, designed to help you transition to Prevea360 Health Plan as easily as possible.

- **Green Bay** – Call 920.272.1113 or email GB.Ambassador@prevea.com
- **Sheboygan** – Call 920.892.8590 or email Sheb.Ambassador@prevea.com
- **Eau Claire** – Call 715.717.4340 or email EC.Ambassador@prevea.com

Member Guide

We mail you a Member Guide at enrollment that introduces you to your new plan and health partner, Prevea360 Health Plan.

Your guide will:

- Provide details about where to find important member documents
- Explain where to go for primary, urgent and emergency care
- Define common insurance terms and more

You can also visit prevea360.com/newmember for helpful information.

*These meetings may or not be arranged by your individual employer. Your employer may request Prevea360 Health Plan to attend as well.

Prevea360 Makes Change Easy

After enrolling with Prevea360 Health Plan, we encourage you to follow these suggested steps. And in case you need us, our Customer Care Center is here to help answer your questions along the way.



1

Decide where you'd prefer to receive your primary care.

Doing this makes it easier to schedule a visit when you need one. Go to prevea360.com/locations to find a primary care clinic near you.

See the next page for information about locations available to you in our network.



2

Find a primary care physician. Our network has exceptional primary care physicians that will work hard to earn and keep your trust. We encourage you to form a relationship with a primary care physician so they can help keep you at your healthiest. Visit prevea360.com/doctors to search our online directory.



3

Transfer medical records. Once you're established with a new primary care clinic and physician, you may wish to have your medical records sent from your previous clinic to your new clinic. Contact your previous clinic to fill out an "Authorization to Release Protected Health Information" form.



See the pocket folder of this book for a provider network map or visit prevea360.com to search for network locations.

Accessing and Getting Care

Your primary care physician is here to help you with general medical needs. Plus, you have options for specialty and other types of care.

Get the Right Care, In the Right Place

Knowing your care options in advance is not only good for your health—it's also better for your budget.



Primary Care: Whenever you need care (except emergencies), start by calling your primary care clinic for the soonest available appointment or for help figuring out where to go. Don't wait for your health conditions to get worse. Same day appointments are usually available at your primary care clinic. If a same-day appointment is not available, you may be directed to go to Urgent Care.



Emergency Care: For a life-threatening illness or injury, go to the nearest emergency room or call 911.



Out-of-Area Care: Both urgent and emergency care are covered by Prevea360 Health Plan if you or your covered family member are traveling and unable to return to the service area for immediate treatment. In addition, qualified dependent children residing outside of the Prevea360 Health Plan service area are covered for all health care services included in your plan's covered benefits.*

Prior Authorization

There are certain medical services or physician visits that must be authorized by Prevea360 Health Plan before we can provide a claims payment. A good rule to remember is that any time you seek services with an out-of-network physician, you will need to get prior authorization. We require these authorizations so our Medical Affairs team can make sure you are getting the appropriate care.

Care Decision Assistance

We can help if you have questions related to using health care services, such as prior authorization. Call our Customer Care Center at **877.230.7555** (TTY: 711) and our team will connect you to our Medical Affairs Department if he or she is unable to address your questions. We can assist members who do not speak English. The Customer Care Center is open Monday – Thursday, 7:30 a.m. to 5:00 p.m., and Friday, 8:00 a.m. to 4:30 p.m. If you have an urgent need outside those hours, leave a message with the Customer Care Center and your call will be returned within one business day.

* Out-of-area dependent coverage for non-urgent and non-emergency care applies to large group employer plans (51+ employees) only; please check with your employer's benefits administrator if you have questions.

Getting the Most From Your Drug Benefits

Convenience and affordability is the name of the game when it comes to Prevea360 Health Plan pharmacy services. We're here to help you manage your prescriptions and lower your expenses.



You Split the Tablet, We'll Split the Copay

Tablet splitting can provide significant savings for you, depending on your prescription and dose. Using this service can save you up to 50 percent on your usual copay for select medications.



Mail-Order Pharmacy

Prevea360 Health Plan provides members access to a mail-order pharmacy for long-term medications. With our mail-order pharmacy, you receive up to a three-month supply—with free shipping. Visit prevea360.com/pharmacybenefits to learn more and enroll.



Pharmacy Drug Formulary

We use a drug formulary, which is a list of prescription drugs that helps you understand what is and isn't covered. The drug formulary is reviewed every month and updated on a regular basis. Our drug formulary breaks the list into different tiers that are organized by the level of cost sharing between you and the health plan. There are several factors that determine a drug's tier, including:

- Cost of drug
- Cost of drug in comparison to other drugs used for the same type of treatment
- Availability of over-the-counter options
- Other clinical and cost factors

Health Insurance 101: Your Coverage

Health insurance can be complicated, that's why we try to make it easy to understand your coverage and your financial responsibilities. Take a moment to learn about important terms and where to find all your specific coverage details.

Sharing the Cost of Care

Your Prevea360 Health Plan policy may use a system of cost sharing that can include a copay, coinsurance, deductible or any combination of the three.*

- Cost sharing is the amount you are responsible for paying after getting covered medical care.
- Cost sharing helps keep monthly premiums low and adds flexibility to health plans.
- Be sure to check your member documents to understand if these types of cost sharing apply to your coverage.

Important Documents



Member Certificate

Details information about your insurance benefits and coverage, and it lists general limitations and exclusions to your plan.



Summary of Benefits and Coverage

Easy-to-read grid that lists the details of plan coverage, along with a basic cost estimate of your financial responsibilities for common medical services.



Summary of Employer-Specific Coverage

Typically a summary of your company's specific coverage information is included with this packet. You can also ask your plan administrator or benefits specialist for your specific benefits and coverage information.

*Your plan includes a maximum for the out-of-pocket expenses (the deductible, coinsurance and copay amounts) you have to pay for health care each year. After you have paid the maximum, your health insurance plan begins to pay 100 percent of the cost of covered services. Cost sharing maximums apply to Small Group and Large Group plans in 2019. See your plan's Schedule of Benefits for your maximum out-of-pocket level (as well as deductible, coinsurance and copays).

Preventive Services

We do more than pay the medical bill. At the heart of our preventive care philosophy is a promise that you'll get the support you need to remain healthy and prevent disease. Prevea360 Health Plan provides the following preventive services with no copays, coinsurance or deductibles.*

- **Annual Preventive Office Visit, which includes important preventive services**
- **Screenings for breast, cervical and colon cancer**
- **Cholesterol screenings**
- **Routine vaccinations for adults and children and more**

Visit prevea360.com/preventivecare for a comprehensive list of covered preventive services.

*No cost share responsibilities apply when services are delivered by a network provider, and when all preventive services criteria are met.

Essential Health Benefits

There are 10 categories of common benefits that are deemed essential.* These include:

1. **Ambulatory patient services** (outpatient care without being admitted to a hospital)
2. **Emergency services**
3. **Hospitalization**
4. **Maternity and newborn care**
5. **Mental health and substance use disorder services** (includes behavioral health treatment and psychotherapy)
6. **Prescription drugs**
7. **Rehabilitative and habilitative services and devices**
Rehabilitative services include: immediate post-operative, intensive, inpatient hospital rehabilitation and outpatient rehabilitation therapies provided in a variety of settings. Habilitative services include: ongoing, medically necessary therapies provided to children with developmental disabilities and similar conditions who need habilitation therapies to achieve functions and skills never before acquired.
8. **Laboratory services**
9. **Preventive and wellness services and chronic disease management**
10. **Pediatric services, including vision and oral care****

These Essential Health Benefits cannot be subject to dollar limits, either annually or on a lifetime basis. Depending on the type of plan you purchased, services associated with Essential Health Benefits may still require cost sharing in the form of copays, coinsurance and deductibles.

*All small group plans (2–50 employees) cover Essential Health Benefits. However, if you work for a larger employer (51+ employees) your benefits may vary. Contact your human resources or benefits department for information about your specific coverage.

**Prevea360 Health Plan does not offer pediatric dental services. This coverage is available on the Health Insurance Marketplace (healthcare.gov) and can be purchased as a stand-alone product. Please contact your benefits administrator or the Marketplace if you wish to purchase pediatric dental coverage or a stand-alone dental services product.

General Limitations and Exclusions

All benefits are subject to limitations and exclusions as described in your Schedule of Benefits and in your certificate. The following list is not exhaustive and may vary based on your policy. For a complete listing refer to your certificate.

Medical

- Cytotoxic testing and sublingual antigens associated to allergy testing
- Hair analysis (unless lead or arsenic poisoning is suspected)
- Preimplantation genetic testing of embryos and gametes
- Convenience items for a member or a member's family, unless stated otherwise in this policy
- Outpatient prescription drugs, except those prescriptions otherwise covered under this policy
- Oral nutrition: oral nutrition is not considered a medical item. We do not cover nutritional support that is taken orally (i.e., by mouth), unless mandated by state law or covered under our medical policy for a specific condition. Examples include, but are not limited to, over-the-counter nutritional supplements, infant formula, and donor breast milk
- Replacement of an item if the item is lost, stolen, unusable or nonfunctioning because of misuse, abuse, or neglect
- Sexual dysfunction devices and supplies, including but not limited to medications and injections
- Autopsy
- Charges or costs relating to donor sperm
- Consultation for, or procedures connected to in vitro fertilization, embryo transplantation, and/or any other assistive reproductive technique (e.g. GIFT, ZIFT)
- Cosmetic services, including cosmetic surgery
- Experimental or investigational services, treatments, or procedures, and any related complications as determined by us, unless coverage is required by state or federal law
- Fitness programs, exercise programs, health club or spa fees, aerobic and strength conditioning, functional capacity exams, physical performance testing and all material and products related to these programs, including services provided by an athletic trainer
- Infertility-related services or procedures not otherwise covered by this policy. This includes, but is not limited to the collection and storage of sperm and eggs outside the course of treatment for, and diagnosis of, infertility. It also applies to the use of non-member traditional surrogates or gestational carriers who are not covered under this policy
- Items that can be purchased over the counter and considered to be for comfort, convenience and/or personal hygiene, examples include but are not limited to: seasonal affective disorder light units, disposable undergarments, wigs and modification to a member's home such as ramps, grab bars, stair lifts and bench/ chair lifts
- Laser treatment for Port Wine Stain (PWS) lesions, except on the face and neck
- Podiatry services or routine foot care provided when there is no localized illness, injury, or symptoms. These include, but are not limited to 1) the examination, treatment, or removal of all or part of corns, calluses, hypertrophy or hyperplasia of the skin or subcutaneous tissues of the feet; 2) the cutting, trimming, or other non-operative partial removal of toenails; or 3) any treatment or services in connection with any of these
- Obesity-related services, including any weight loss method, surgical treatment or hospitalization for the treatment of obesity, unless specifically covered under this certificate
- Reversal of voluntary sterilization and related procedures
- Surrogacy services, for a non-member
- Sexual dysfunction treatment and services including but not limited to surgery
- Sterilization procedures for men
- Sterilization procedures for women and patient education and counseling related to contraception for all women with reproductive capacity. (Although these are technically excluded from your group's health plan insurance coverage, we will pay for them as preventive services, as required by federal regulations)
- Take home drugs and supplies unless a written prescription is obtained and filled at a network pharmacy
- Chelation therapy for atherosclerosis
- Coma stimulation programs
- Dry needling
- Alternative medicine, not otherwise listed in the policy
- Low level light therapy
- Massage therapy
- Prolotherapy
- Swim or pool therapy, unless prior authorization is obtained

Non-Medical

- Administrative examinations such as employment, licensing, insurance, adoption, or participation in athletics
- Court-ordered care, unless medically necessary and otherwise covered under this certificate
- Educational services, except for diabetic self-management classes
- Internet consultations, including all related charges and costs, excepts as defined by our medical policy
- Missed appointment charges
- Telephone consultation charges between providers
- Charges or costs exceeding a benefit maximum or maximum allowable fee, where applicable
- Expenses incurred before the supply or service is actually provided unless prior authorized by us
- Hospital or medical services no listed in this certificate
- Services, treatment, and supplies provided to a member while the member is held or detained in custody of law enforcement officials, or imprisoned in a local, state, or federal penal or correctional institution
- Services and supplies furnished by a government plan, hospital, or institution the law requires you to pay
- Services, treatment, and supplies provided in connection with any illness or injury caused by: a) a member engaging in an illegal occupation or b) a member committing or attempting to commit, a felony. (Note that this exclusion does not apply to the treatment of injuries that result from an act of domestic violence, if that treatment would otherwise be covered)
- Services provided by members of the subscriber's immediate family or any person living with the subscriber
- Services or supplies associated to a non-covered procedure or service, including complications, regardless of when the non-covered procedure or service is or was performed
- Services or supplies associated to a denied prior authorization
- Services or supplies associated to a denied admission
- Services or supplies not medically necessary, not recommended or approved by a provider, or not provided within the scope of the provider's license
- Services or items provided as a result of war or any act of war, insurrection, riot or terrorism
- Services or supplies provided for an injury sustained while performing military service
- Services or supplies for which a member receives or is entitled to receive any benefits, settlement, award, or damages, or following any claim under, any Workers' Compensation Act, employer's liability insurance plan, or similar law or act. "Entitled" means the member is actually insured under Workers' Compensation

Last updated August 10, 2018

Privacy & Confidentiality Statement

Prevea360 Health Plan is required by law to maintain the privacy of your personal health and financial information (collectively referred to as “nonpublic personal information”) and provide you with written notification of our legal duties and privacy practices concerning that information.

Please visit our website at prevea360.com/privacy or call **877.230.7555** to request a copy.







Prevea360 Health Plan does not discriminate on the basis of disability in the provisions of programs, services or activities. If you need this printed material interpreted or in an alternate format, or need assistance in using any of our services, please contact a Customer Care Specialist at 877.230.7555 or TTY: 711.

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