Green Open Access Plan Overview

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Welcome to an overview of SchoolCares Green Open Access health plan. If you have any questions following this presentation, please contact one of the individuals you see on this screen. Please note that this presentation is for the standard version of the green plan. Some groups may have different copay amounts, but the other aspects of the green plan remain the same.

Let's look at the details of the green plan. First the Green plan uses CIGNA's national open access network; that means you have access to care in all 50 states. You do not need a referral from your doctor to see a specialist. You do not have a deductible on this plan. You do have coinsurance, but only for durable medical equipment and external prosthetics. The out-of-pocket maximum for medical services is \$1,000 for an individual, and the maximum of \$2,000 for a family. For prescription drugs an individual's out-of-pocket maximum is \$2,000, and for a family it's \$4,000.

Preventive care is no cost so all your annual screenings, routine physicals, etc. are at no cost to you. You do not pay anything for labs and other diagnostic tests including x-rays, MRIs, PET scans, CT scans, etc. There is no cost for you when you go to the hospital, when you see a doctor or a specialist you have a \$10 copay, you get an annual eye, exam every 12 months, and that is also a \$10 copay. You are covered anywhere in the world for emergencies with a \$50 copay, an urgent care visit is a \$25 copay, behavioral health outpatient care is also a \$10 copay. You have a 60-visit combined maximum limit per person per year for physical speech and occupational therapy. You have a 20-visit limit per person, per year for chiropractic care, and a 12-visit limit for acupuncture. Durable medical equipment is paid at 80% and the individual would pay 20% of the cost up to their individual out-of-pocket maximum.

The plan has a three-tier prescription drug plan, \$5 generics, \$15 preferred brand name, and \$35 non-preferred brand-name drugs. Let's look at an illustration of how an individual might accumulate out-of-pocket costs to their out-of-pocket individual maximum of \$1,000:

All co-pays for office visits, emergency room visits, and Urgent Care accumulate toward the total as well as any coinsurance they may incur for durable medical equipment and external prosthetics. Once the individual has met their out-of-pocket maximum for the year of \$1,000, they would have no further out-of-pocket expenses for medical co-pays or coinsurance for the rest of the year. For a family, a family's out-of-pocket maximum is \$2,000. That would consist of any individual incurring no more than \$1,000, and the family incurring no more than \$2,000 total of co-pays and durable medical equipment and external prosthetic coinsurance amounts. So, if one person is sick, the most they would have out of pocket is

\$1,000 made up of their office visit copay's etc. And the family would never incur more than \$2,000 in co-pays and coinsurance.

The green plan has a three-tier prescription drug formulary; generics preferred and non-preferred brand name drugs at your local pharmacy. Generics are \$5.00, preferred brand-name drugs are \$15, and non-preferred brand name drugs are \$35. You can also get a 90-day supply through the Cigna home delivery pharmacy for the same co-pays. You can set up the mail-order pharmacy program by calling 800-285-4812 or visiting myCigna.com.

You have several resources available to you if you have questions about your benefits. You can contact your benefit administrator or human resources department at your SAU, and they can help with enrollment and changing your coverage etc. As well as setting up a flex spending account to help pay your copays.

You can contact the SchoolCare office, their website is www.schoolcare.org. You can contact Joanne Trainer at SchoolCare or Jana Dalton as well if you have questions about your coverage. Finally, Jeff Kantorowski at NEA New Hampshire and SchoolCare can also assist you with coverage questions as well as issues related to claims or coverage that you are not able to resolve with Cigna.

Thank you.