# Benefits OVERVIEW All Occasions Event Rental





# We're here to make your life easier.

HealthEZ is an independent third-party administrator (TPA), which means we manage your employer's health benefits and process your medical claims. We work with your employer to design a custom benefits plan for your organization and we're ready to help you access the services you need. We've been providing our knowledgeable and serviceoriented approach for over 40 years.



# Crumdale Advocates

### Are you looking for a cost-sensible, high value provider for a non-urgent procedure?

Need help understanding your medical benefits?

Are you looking for an in-network specialist?

Was your medical procedure billed correctly?

# Call your Care Advocacy Center!

Monday - Friday, 7:00 am - 6:00 pm CST

Call 855-255-7060 or email advocates@crumdalepartners.com

# healthEZ

# Manage your health benefits without all the headaches

Download the free myHealthEZ app to view your benefits, manage and pay bills, locate care providers near you, and access your digital insurance card right from your phone.

### Tap. Pay. Done.

Pay bills, schedule automated payments, and view past statements in one simple, secure location.

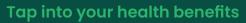
### 🗘, Find a provider

Search local healthcare professionals and filter results by location and specialty to find the right care provider for you and your family.

### EZchoice

EZchoice makes provider choice easy and medical costs transparent so you can be confident that you are not overspending on your medical care.





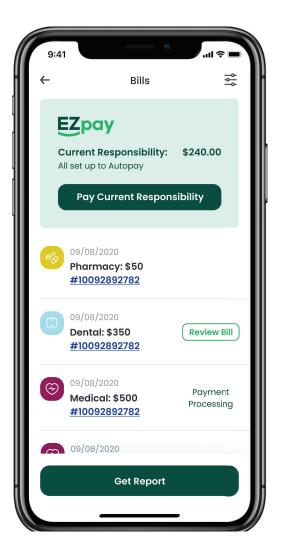
Scan the QR code with your device's camera to download the myHealthEZ app and put the power of hassle-free health benefits management at your fingertips.











# EZpay

### Seamless online payments

EZpay is HealthEZ's online payment system that allows you to easily and quickly pay your portion of medical bills with your payment of choice, including credit and debit cards, and HSA accounts.

After you set up EZpay, we will notify you via email each time we process a bill of yours. Your options are:

- Approve Payment
- Decline Payment
- Do not respond

If you do not respond and have a card on file, EZpay will pay your portion automatically. The automatic payment is processed:

> healthEz 2201 West 78th Street, Suite 100 Bloomington, MN 55439

- Two days for bills under \$250
- Five days for bills over \$250

### One simple statement

We consolidate all of your monthly healthcare expenses into one simple statement. This statement eliminates confusion and provides information about year-to-date deductible and out-of-pocket maximums, and itemized transactions during the current billing period.

					ora	tement Sumn	Dam	ILL. DO NOT P
					Memi	ber ID	- y	
					States	ment Date		
					Pad	ment Date ransactions Ti by your health by your Health by your Health me providers	plan	\$441.4
					Paid by Medici	Your Employe	W YTD:	\$0.00
Information & Resources Your Resources for His	rces He	althEZpay	Account Summa		Pharm	acy		\$441.49 \$117.30 \$ 65.24
coustom phone m	-	aller opende	ng Account (FSA)		Your Ye	ar-to-Date S	Imme	00.24
customsite.com>	Av	allable Amou	Par-to-date	\$0.00	THE REAL PROPERTY IN	P-Network Deut-	and the second s	
	Heal	th Savines		\$500.00	MUCTO:	ar-to-Date		
EOBs Available Online The Explanation of	Cla	Health Savings Account (HSA) Claims Paid This Period			Medical In	Network Cut		\$301.84
	Cur	Current Balance NA Claims Paid This Period \$223.93 Health Reinbursement Account (HRA) Claims Paid This Period NA Current Balance NA			Met Yea	r-to-Date	Pocket	
	Heats							\$301.84
his statement is	Clair				Used Yes	w-to-Date		
alfable by logging in at ustomwabsite.com. at u have questions, call ustom phonete.	Claim		Period		4p-to-date in	ourrent as of stas formation, go to -	customaite.co	detailed and m.>
	rransa	tions for	the Current D.					
		inons for	r the Current Pe	riod				
	Service Date	Patient	r the Current Pe	Biller	Network			
	Service	Patient	Provider Care Clinic	Billed Amount \$248.00	Network Discount \$24,07	Employer Payment	You Have Paid	You One Provide
	Service Date 01/15/2011 01/15/2011 DENTAL	Patient Jane	Provider	Billed Amount	Network Discount \$24.07 \$391.60	Employer Payment \$0.00 \$441,49	You Have Paid* \$223.93 \$77.91	You Date Provider \$0.00 \$0.00
	Service Date 01/15/2011 01/15/2011 DENTAL Service Date	Patient Jane Alax Patient	Provider Care Clinic County Hospital	Billed Amount \$248.00 \$911.00 Billed	Discount \$24.07 \$391.60	Payment \$0.00 \$441,49	Paid* \$223.93	Provider \$0.00
	Service Date 01/15/2011 01/15/2011 01/15/2011 DENTAL Service Date 01/12/2011	Patient Jane Alax	Provider Care Clinic	Billed Amount \$248.00 \$911.00	S24.07 S391.60 Network Discount	Payment \$0.00 \$441,49 Employer Payment	Paid* \$223.93	Provider \$0.00 \$0.00
	Service Date 01/15/2011 01/15/2011 DENTAL Service Date	Patient Jane Alax Patient	Provider Care Clinic County Hospital Provider	Billed Amount \$248.00 \$911.00 Billed Amount	Discount \$24.07 \$391.60	Payment \$0.00 \$441,49 Employer	Paid \$223.93 \$77.91 You Have	\$0.00 \$0.00



## Care Advocacy Helping you when you need it the most.

If you require services like a surgery, hospital stay or you are diagnosed with a complex medical condition, **you may receive a call, text or email from someone on the HealthEZ care management team.** 

### The advocate is there to help you:

- Understand your treatment options
- Coordinate services among your doctors
- Make sure you have everything you need for a quick recovery with the right care

# **Boost Your Baby** Promoting healthy pregnancies and happy moms.

HealthEZ offers maternity support by providing education and resources to promote a healthy pregnancy through postpartum.

- Expectant mothers and fathers will have a dedicated one point of a contact throughout their pregnancy journey.
- Providing tips on how to stay happy and healthy during and post pregnancy
- Maternity support offered through pregnancy until 6 months postpartum

#### **Care Services**

# Virtual Urgent Care

# Getting Started

#### INTRODUCTION

Access board-certified physicians 24/7, 365 days a year for urgent medical needs. Doctors will discuss your symptoms, confirm a diagnosis, and prescribe any needed medication. Video and telephone-based visits are available, with an average wait time of just ten minutes.

#### HOW TO ACCESS

A RECURO HEALTH COMPANY 🗒

01	Sign up with the Recuro Care app or visit the webpage below to access: " <u>member.recurohealth.com</u> "
02	Enter your employer member ID
03	Create your username and password
04	Complete your medical history
05	Schedule your consult

\*Registering your account is not required to use the service, you can call 855.6RECURO anytime for 24/7 access to doctors.



# Example Conditions Treated

- Acne / Rash
- Allergies
- Cold / Flu
- GI Issues
- Ear Problems
- Fever

- Insect Bites
- Nausea
- Pink Eye
- Respiratory
- UTI's
- And More...







### **Medical ID cards**

If you are new to the HealthEZ plan, keep an eye out for your medical ID card. Once you recieve that, you can setup your myHealthEZ account.

If you need a replacement card, log into to your myHealthEZ account and request a new card be printed and mailed, or access a digital copy directly to your device!

Dependents over the age of 19 can create their own myHealthEZ account to manage their plan and request a replacement ID card or access their ID card directly to their own devices.

### Your medical network is Cigna.



### What is a medical network?

Your medical network is a group of healthcare providers. It includes doctors, hospitals, surgical centers and other facilities. These healthcare providers offer services at a lower rate than out-of-network providers, which you will see reflected on your statements as a discount.

### What if I go outside of my medical network?

There may be times when you decide to visit a doctor or clinic that is out-of-network. The costs for these visits and services are often higher than seeing doctors that are in-network. You will be responsible for paying the difference between the provider's full charge and the amount your health plan pays. This is called balance billing.

### How do I know if my provider is in-network?

Please visit your dedicated Benefits Website and click "Find Care."



### Your Pharmacy Benefit Manager is Welldyne.



### What is a Pharmacy Benefit Manager?

Pharmacy Benefit Managers (PBMs) reduce prescription drug costs and improve convenience and safety for consumers. Your PBM administers your prescription drug plan and offers a network of pharmacies that offer more affordable medications.

### What is mail order?

If you take maintenance medications for long-term conditions like arthritis, asthma, diabetes, high blood pressure or high cholesterol you could save money with Welldyne's mail order service.

### What are Generic drugs?

Generic drugs are copies of brand-name drugs and are the same as those brand-name drugs in dosage form, safety, strength, route of administration, quality, performance characteristics and intended use. Although generic drugs are chemically identical to their branded counterparts, they are typically sold at substantial discounts from the branded price.

To find out if there is a generic equivalent for your brand-name drug, talk to your doctor or visit <u>Welldyne.com</u>.

f Medical Benefits		
In-Network	Out of Network	
eductible		
\$3,000	\$5,000	
\$6,000	\$10,000	
ocket Maximum		
\$6,750	\$15,000	
\$13,500	\$30,000	
No Charge	50% Coinsurance	
\$20 Copay	50% Coinsurance*	
\$75 Copay	50% Coinsurance*	
25% Coinsurance*	50% Coinsurance*	
\$50 Copay	50% Coinsurance*	
\$300 Copay*	50% Coinsurance*	
0% Coinsurance* 0% Coinsurance*	50% Coinsurance* 50% Coinsurance*	
\$750 Copay* 0% Coinsurance*	50% Coinsurance* 50% Coinsurance*	
\$300 Copay*		
0% Coinsurance*		
0% Coinsurance*	50% Coinsurance*	
\$20 Copay	50% Coinsurance*	
Pharmacy Benefits		
Retail 30 Day Supply	Mail Order 90 Day Supply	
\$10 Copay	\$20 Copay	
\$25 Copay	\$50 Copay	
50% Coinsurance	50% Coinsurance	
\$200 Copay	Not Available	
uro Benefits	· ·	
	Charge	
	Image: Construction   Signal   Signal   Image: Construction   Image: Construction	

Note: Please refer to your Summary Plan Description for actual coverage, limitation, and exclusion provisions.

\*Coinsurance After deductible \*\* Covered as in-network in true-emergency

Summary	of Medical Benefits			
	HDHP 2			
Non-Embedded Deductible Non-Embedded Out-of-Pocket Maximum	In-Network	Out of Network		
	Deductible			
ndividual Coverage	\$2,000	\$4,000		
amily Coverage	\$4,000	\$8,000		
Out-of	-Pocket Maximum			
ndividual Coverage	\$5,000	\$10,000		
amily Coverage	\$10,000	\$20,000		
Preventive Care Services	No Charge	50% Coinsurance		
Primary Office Visit	\$30 Copay*	25% Coinsurance*		
Specialist Office Visit	\$75 Copay*	25% Coinsurance*		
Chiropractic Visit	\$75 Copay*	25% Coinsurance*		
Jrgent Care Services	\$50 Copay*	25% Coinsurance*		
Complex Imaging: MRI/CT/PET Scans	\$300 Copay*	25% Coinsurance*		
npatient Hospital Care Facility Fee Physician Fee	0% Coinsurance* 0% Coinsurance*	25% Coinsurance* 25% Coinsurance*		
Outpatient Procedures Facility Fee Physician Fee	0% Coinsurance* 0% Coinsurance*	25% Coinsurance* 25% Coinsurance*		
mergency Room Services	\$300	\$300 Copay*		
Emergency Medical Transportation		0% Coinsurance*		
Mental Health/Chemical Dependency - Inpatient	0% Coinsurance*	25% Coinsurance*		
Mental Health/Chemical Dependency – Office Visit	\$30 Copay*	25% Coinsurance*		
· ·	of Pharmacy Benefits			
Prescription Drug Coverage	Retail 30 Day Supply	Mail Order 90 Day Supply		
Expanded Preventive Generic	\$10 Copay	\$20 Copay		
xpanded Preventive Preferred Brand	\$25 Copay	\$50 Copay		
Generic	\$10 Copay*	\$20 Copay*		
Preferred Brand	\$25 Copay*	\$50 Copay*		
Ion-Preferred Brand	50% Coinsurance*	50% Coinsurance*		
specialty	\$150 Copay*	Not Available		
Re	ecuro Benefits	· ·		
General Consultations		Charge		
		5		

Note: Please refer to your Summary Plan Description for actual coverage, limitation, and exclusion provisions.

\* After deductible

\*\* This health plan has a non-embedded Deductible. This means that the family Deductible must be met before the Plan begins paying benefits that are subject to a Deductible. \*\*\* This health plan(s) has a non-embedded out-of-pocket maximum. This means that the family out-of-pocket maximum

must be met before the Plan begins paying in full for all individuals.

