



2018 Open Enrollment

Plans for a healthier you

Medical plan
Extra support

3

8



At HealthPartners, our 23,000 employees work together to support your health every day. We're dedicated to caring for you the way we care for our closest friends and family. This commitment has helped us give our members healthier results for more than 10 years running.*

Our team is ready to help with your care and coverage. We'll answer your questions and be there for you at every step. We're not just a health plan, we're your health partner.

Let's make good happen together.



HIGHEST MEMBER SATISFACTION

We promise to give you an outstanding experience. Thanks to our members, HealthPartners has earned the highest overall member plan rating among Minnesota health plans for 10 years in a row.**

^{*}The source for data contained in this publication is Quality Compass® 2016 and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass 2016 includes certain Consumer Assessment of Healthcare Providers and Systems® (CAHPS) data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA. CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Hello!



I'm a Member Services supervisor by day and a mom 24/7. I know how important it is to have a health plan that's best for you. But I also know that understanding health insurance can be like reading a foreign language. So, I want to help."

JODI, MEMBER SERVICES

The more you know about your plan, the easier it is to make good decisions for your health and your wallet. Here are the two big ways I break it down for my friends and family:

What you might have to pay

- **Premium** (you can definitely expect this one) how much you pay for your plan. It's typically taken out of your paycheck. Best case, you pay your premium and nothing else for care all year.
- Copay a set amount you pay each time you go to the doctor or get a prescription.
- **Deductible** the amount you have to pay before your plan pitches in (not counting your premiums). If your deductible is \$1,000, your plan will help pay the bills once you've paid \$1,000.
- **Coinsurance** a percent of the cost you're in charge of paying. For example, you might be responsible for 20 percent of an X-ray's cost and your plan will cover the rest.
- Out-of-pocket maximum the most you'll pay for your care each year. Worst case, you pay your premium and hit your out-of-pocket max. Once you reach your max, your plan pays for the rest of your care.

HELPFUL TIP: You can look up your plan's specific amounts in a separate document called an SBC, or Summary of Benefits and Coverage.

Estimating your costs before you see the doctor

Just like comparing gas prices, you can compare health care costs. A myHealthPartners account can help you shop, plan and feel confident when you need care. You can:

- · Search for doctors in your network
- · Get cost estimates for care
- Find out where you're at with your deductible or out-of-pocket maximum
- Compare pharmacy costs



Create an account or log on at **healthpartners.com** or the **myHP**mobile app. If you're not a member yet or are looking at a new plan, Member Services can help too.

We're here to help. Give us a call at **952-883-5000 or 800-883-2177**. Understanding your health plan is just the first way we'll help you become your healthiest you.

Deductible plan with the Open Access network



You know the saying, 'There's no such thing as a dumb question'? I'm always reminding members of this when they call in. Any question you have is most likely one someone else has had too."

LINDA, MEMBER SERVICES

Here's what's great about this plan

You have every reason to get your preventive care to stay healthy. It's covered 100 percent. Not to mention, your favorite doctor is most likely in your network.

It works like this

It's pretty simple. This plan has a deductible. That's the amount you pay for care before your plan helps cover costs.

After that, your plan will split the bill with you. That's called coinsurance. For example, you might pay 20 percent and your plan would pay the other 80 percent.

Once you reach a limit, called an out-of-pocket maximum, you don't pay any more. All in-network care is paid for by your health plan.

What your plan helps pay for

In-network preventive care is fully paid for by your health plan, even before you hit your deductible.

Here are some of the things your plan chips in on after you hit your deductible:

- · Convenience and online care
- Specialty care (no referrals needed)
- Prescriptions

MY TOP TIP: Get your yearly recommended checkup, vaccines and screenings. It's all covered by your plan!

You pick where you want to go

This plan has one of the biggest networks of doctors and clinics. Check for your doctor or find a new one at healthpartners.com/openaccess.

See how much you'll pay and what your plan will cover in your Summary of Benefits and Coverage (SBC). And remember, we're here to help. Call us at **952-883-5000** or **800-883-2177**.

Copay plan with the Open Access network



Stairs vs. elevator. Fruit vs. cookies. Water vs. soda. Life is all about choices. My family relies on me to make the healthiest decisions. If you're like me, there's a lot of motivation to make the best one."

ALEC, MEMBER SERVICES

Here's what's great about this plan

This plan gives you the freedom to pick the doctor that works best for you. Plus, you get the predictability of a copay.

It works like this

You'll know when you'll pay and how much it'll cost. A copay is a set amount you pay when you visit the doctor or pick up a prescription. The amount depends on where you get care – like at your regular clinic, an urgent care or the ER.

You might have extra costs for services that your copay doesn't cover (like an MRI). For those, your plan will split the bill with you. That's called coinsurance. For example, you might pay 20 percent and your plan would cover the rest.

An out-of-pocket maximum puts a cap on what you have to pay during the year. Once you reach that limit, all in-network care is paid for by your health plan.

Some of what your plan helps pay for:

- Preventive care (no cost to you)
- · Convenience and online care
- Specialty care (no referrals needed)
- Prescriptions

HERE'S AN EASY DECISION: Get your yearly recommended checkup, vaccines and screenings. You don't ever have to worry about paying out of pocket for in-network preventive care.

You pick where you want to go

This plan has one of the biggest networks of doctors and clinics. Check for your doctor or find a new one at healthpartners.com/openaccess.

See how much you'll pay and what your plan will cover in your Summary of Benefits and Coverage (SBC). And remember, we're here to help. Call us at **952-883-5000** or **800-883-2177**.

Is my medicine covered?



You're not the only one wondering. Knowing if your health plan will cover your medicine and how much you'll pay is important. Have no fear – I'm here to help.'

ANNIE, PHARMACY NAVIGATOR

Start by checking your drug list

Step one is looking at your formulary. That's just a fancy word for a list of covered drugs. Your drug list is called **PreferredRx**. Searching the list is pretty easy.

- 1. Go to healthpartners.com/preferredrx
- 2. Search by the name or type of medicine

HELPFUL HINT: If you can't find your medicine on the list, give us a call. We'll help you find it or an alternative that is.

So, you've got the list. Now what?

We've got an easy-to-follow guide to help you read your drug list. When you search the list, there's an icon next to each medicine. These are the icons you might see:

- F (formulary) medicines covered by your plan
- NF (non-formulary) medicines that might be covered but will cost you more
- (excluded) medicines that aren't covered

Save money on your meds

Try generics

Generics are the same as a brand name medicine, but cost a lot less. Here's how to tell:

- generics will be all lowercase italics
- BRAND, oral contraceptives and Accutane generics will be in all CAPS
- Specialty drugs will be shown as



Shop around

Medicine prices vary just like gas prices. So make sure you shop around. See how much your medicine will cost at different pharmacies. Visit healthpartners.com/pharmacy.

Members can log on to their myHealthPartners account and:

- Transfer a prescription from one pharmacy to another
- · See how much they've spent on medicine so far this year
- · Learn about other ways to save, like generic medicine

Always remember – we're here to help. Give Member Services a call at 952-883-5000 or 800-883-2177. And, of course, you can check your Summary of Benefits and Coverage (SBC), too.

Skip the clinic trip



Who has time to be sick? I know I don't. That's why I love telling people there's a faster, easier way to get better, without squeezing in a trip to the doctor."

JULIE, NURSE NAVIGATOR

Get treated online

Save time and money. Get care right from your smartphone, tablet or computer. Here are two options your HealthPartners plan offers. Take it from me, I've used them myself.

virtuwell.com

24/7 care from home, work or even in line for coffee

- Easy. Visit virtuwell.com. Answer a few questions anytime, anywhere.
- Fast. In 30 minutes or less, a board-certified nurse practitioner emails and texts your treatment plan, including any prescriptions.
- **Guaranteed**. You're only charged if we can treat you. Have questions about your treatment plan? Unlimited follow-up calls are free. In the end, you'll never pay more than \$45.

Doctor On Demand

Video chat

- Convenient. Get started when and where it works for you at doctorondemand.com. Video capabilities required.
- Quick. See a doctor in minutes. Live video visits include assessment, diagnosis and prescriptions when necessary.
- **Affordable**. \$49 for the first 15 minutes. And \$49 for each additional 15 minutes.

HELPFUL HINT: Member Services can tell you if your plan will pay for some or all of your visit. Call them at 952-883-5000 or 800-883-2177.

Next time you get sick, turn to your computer or mobile device to get better, faster. Try virtuwell® or Doctor On Demand.

Here for you, 24/7



One thing I love about my job is how my team helps people all day, every day."

RACHEL, REGISTERED NURSE

Help is a phone call away

Like this: a man called because his chest felt heavy, his skin felt clammy, and he wasn't sure what to do. Scary, right?

The CareLineSM service nurse told him to hang up and call 911 right away – he was having a heart attack. An ambulance rushed him to the hospital for emergency surgery. Afterward, he called us to say thanks. He didn't realize how serious the situation was and was so grateful that we were there to give him advice.

Call us at one of the numbers below if you have questions about your health or what your plan covers. We have teams of people here to help.

CARELINE SM SERVICE NURSE LINE	MEMBER SERVICES	BABYLINE PHONE SERVICE		
For questions about: • Whether you should see a doctor • Home remedies • A medicine you're taking	For questions about: Your coverage, claims or account balances Finding a doctor, dentist or specialist in your network Finding care when you're away from home Health plan services, programs and discounts	For questions about: • Your pregnancy • The contractions you're having • Your new baby		
24/7, 365 days a year 612-339-3663 or 800-551-0859	Monday – Friday, 7 a.m. – 7 p.m., CT Call the number on the back of your member ID card, 952-883-5000 or 800-883-2177. Interpreters are available if you need one. Español: 866-398-9119 healthpartners.com	24/7, 365 days a year 612-333-2229 or 800-845-9297		
MEMBER SERVICES CAN HELP YOU REACH:				
NURSE NAVIGATOR SM PROGRAM	PHARMACY NAVIGATORS	BEHAVIORAL HEALTH NAVIGATORS		
 For questions about: Understanding your health care and benefits How to choose a treatment 	For questions about: Your medicines or how much they cost Doctor approvals to take a medicine (prior authorization) Your pharmacy benefits Transferring medicine to a mail order pharmacy	For questions about: • Finding a mental or chemical health care professional in your network • Your behavioral health benefits		
Monday – Friday, 8 a.m. – 5 p.m., CT	Monday – Friday, 8 a.m. – 5 p.m., CT	Monday – Friday, 8 a.m. – 5 p.m., CT		

Manage your health on the go



Life doesn't always happen during business hours. Sometimes you have a question at 9 p.m. on a Friday when you can't reach my team. That's where your *my*HealthPartners account and myHP mobile app come in."

LAUREN, MEMBER SERVICES

Your plan at your fingertips

Want to check on a claim? Need to find an urgent care near your house?

These are just a couple of the things we help with every day. We love directing members like you to your online account and mobile app, especially since it means you can get help even when we're not in the office.



Top 5 ways to use your online account and mobile app

- 1. See recent claims and how much you owe.
- 2. Search for doctors in your network or near you.
- 3. Get cost estimates for treatments and procedures specific to your plan.
- 4. 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).
- 5. View your HealthPartners member ID card and fax it to your doctor's office.

There's so much more you can do. Signing up is easy! Learn more at **healthpartners.com/signupnow**.

Get help with your medicine



I like to think of managing medicines like creating a great meal. Just like there are many recipes, there are lots of ways to stay on track with your medicine. We can help you find the recipe that works best for you."

MADELYN, PHARMACIST

Get the most from your meds

You don't have to be a pharmacist to know when a medicine isn't working right. I had a patient on high cholesterol meds who then added a new blood pressure medicine. He started having terrible pain, so he stopped taking the new medicine.

That's where I came in. Turns out, it was a bad interaction. I got him on a different blood pressure medicine, and he was feeling better in no time.

Talk with a pharmacist

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

Even if you feel fine, you might have questions about your medicines, like:

- Am I taking the right medicines for the best results?
- Are my medicines working together correctly?
- How can I stop side effects between my medicines and with the things I eat and drink?
- · Can I save money?

Shop around for the lowest cost

Medicine prices can change from pharmacy to pharmacy. Shop around. See what your costs are at different pharmacies. Visit

healthpartners.com/pharmacy to get started.

Log on to your myHealthPartners account to:

- Transfer your prescription from one pharmacy to another
- Learn about other ways to save, like generic medicines
- See how much you've spent on medicine this year

Don't have an account yet? Visit healthpartners.com/signupnow.

Your health plan can do more than just help pay for visits to your doctor. Call Member Services at **952-883-5000 or 800-883-2177** for help with your prescription benefits.

Medicine delivered to your door



Many of my patients tell me they're busy and it's hard to get to the pharmacy every month. You might feel that way too. I have a solution: mail order pharmacy."

KARAN, PHARMACIST

Here's what's great about mail order pharmacy

- Your medicine gets shipped right to your mailbox within five days.
- · You'll never pay for shipping. It's free.
- Refilling your medicine is easy with our online refill tool.
 You can easily change your address if you're going to be out of town too.



- There's no need to worry about your privacy. All orders are sent in a plain package.
- Safety is important to us. You'll get the best quality medicine.

ADDED BONUS: If you're on a copay plan, you get three months of your medicine for the price of two months - that's a 33 percent savings.

Take it one step further

Do you and your family have more than one medicine? Get everyone on the same schedule. Have all your medicines refilled and delivered on the same day with HealthPartners® Sync My Meds.

Plus, you can pay for everything at once. A pharmacist on my team will work with you to pick the day that works best.

Have questions about your mail order pharmacy benefits? Give us a call at **800-591-0011**. We'll be happy to help.

Know where to go



It's tempting to rush to the hospital when you need care now. But I've learned the hard way how much time and money that can cost. Use my notes below for help on where to go when it's between 'ouch' and 'OMG."

BALQISA, REGISTERED NURSE

WHEN YOU NEED	GO TO	AVERAGE COST	AVERAGE TIME SPENT
Health advice from a nurse for: • Where to go for care • At-home remedies	CareLine SM service Call 24/7 at 612-339-3663 or 800-551-0859	Free	
Treatment and prescriptions for minor medical issues, like: • Bladder infection • Pink eye • Upper respiratory infections	virtuwell® or Doctor On Demand* 24/7 online care Convenience clinics (found in retail and	\$	
A regular checkup or special care during the day for things like: Diabetes management Vaccines	grocery stores) Primary care clinics	\$\$	
Care for urgent problems when your doctor's office is closed, like: Cuts that need stitches Joint or muscle pain	Urgent care clinics	\$\$\$	
Help in an emergency, such as: Chest pain or shortness of breath Head injury	Emergency room	\$\$\$\$	

PS: If you're still not sure where to go, a CareLine service nurse can help. Just give us a call.

Healthy choices = hefty savings



I'm a health coach with a home mortgage. I know what a difference being healthy can make in your life and how a little support – and savings – can be a big help."

SARA, HEALTH COACH

Save money at your favorite gym

Work out 12 days or more each month and you'll save up to \$20 per person on your monthly membership.

Participating gyms include:

- Anytime Fitness*
- Curves
- LA Fitness
- · Life Time Fitness
- Snap Fitness
- · And more!

Get discounts at other places too

Just show your member ID card to save money at loads of places to help you live a little healthier.

You can save money on:

- Eyewear
- Fitness and wellness classes
- · Healthy eating programs and delivery services
- · Healthy mom and baby products
- Orthodontics
- Pet insurance
- · Recreational equipment
- · Spa services
- Swim lessons
- And more!

Saving money is one more way we can help you live a healthier life. Visit **healthpartners.com/discounts** to see all the places where you can get big savings.



NEW! Take care of your furry family too

We treat our pets like family, so why not cover their health care costs? Save up to 15 percent on pet insurance. There are many coverage and cost levels to choose from, so pick the one that works best for your family.

*Not all club locations apply. Some national clubs are owned by individual franchise owners and may not participate in the program. Frequent Fitness is limited to members, age 18 years or older, of certain HealthPartners medical plans and members of participating employer groups. Some restrictions apply. Fermination of club membership may result in forfeiture of any unpaid incentive. See participating club locations for program details. Workout requirements and program eligibility rand visits requirements.

Our approach to protecting personal information

HealthPartners complies with all applicable laws regarding privacy of health and other information about our members and former members. When needed, we get consent or authorization from our members (or an authorized member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable law and standards. Our policies and practices support compliant, appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, our patients and the community, while being sensitive to privacy. For a copy of our Notice of Privacy Practices, visit healthpartners.com or call Member Services at 952-883-5000 or 800-883-2177.

Summary of utilization management programs

Our utilization management programs help ensure effective, accessible and high-quality health care. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of health services.

THESE PROGRAMS INCLUDE:

- Concurrent inpatient review and care coordination to support safe, timely care and transition from the hospital
- · Best practice care guidelines for certain kinds of care
- Outpatient case management to provide care coordination
- · CareCheck® program

We require prior approval for a small number of services and procedures. For a complete list, go to **healthpartners.com** or call Member Services. You must call CareCheck at **952-883-5800** or **800-942-4872** to receive maximum benefits when using out-of-network providers for inpatient hospital stays; same-day surgery; new or experimental or reconstructive outpatient technologies or procedures; durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. Benefits will be reduced by 20 percent if CareCheck is not notified.

Provider reimbursement information for medical plans

Our goal in reimbursing providers is to provide affordable care for our members while encouraging quality care through best care practices and rewarding providers for meeting the needs of our members. Several different types of reimbursement arrangements are used with providers. All are designed to achieve that goal. Check with your individual provider to find out how they are paid.

- Fee-for-service the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.
- Discount the provider sends us a bill, and we've already
 negotiated a reduced rate on behalf of our members. We pay a
 predetermined percentage of the total bill for services.
- Case rate the provider receives a set fee for a selected set of services, up to an agreed upon maximum amount of services, for a designated period of time. Alternatively, we may pay a case rate to a provider for all of the selected set of services needed during an agreed upon period of time.
- Withhold a portion of the provider's payment is set aside until
 the end of the year. Withholds are sometimes used to pay specialty,
 referral or hospital providers who furnish services to members. The
 provider usually receives all or a portion of the withhold based on
 performance of agreed upon criteria, which may include patient
 satisfaction levels, quality of care and/or care management measures.

- Basis of the diagnosis/per diem a set fee to treat certain kinds of conditions, sometimes based on the number of days the patient spent in the facility.
- Ambulatory Payment Classifications (APCs) for outpatient services. We have a negotiated payment level based on the resources and intensity of the services provided. Hospitals are paid a set fee for certain kinds of services which is based on the resources utilized to provide that service.
- Combination more than one of the methods described are used. For example, we may pay a case rate to a provider for a selected set of services, up to an agreed upon maximum amount of services, and pay that same provider on a fee-for-service basis for services not provided within the time period that exceed the maximum amount of services. We may also pay a provider such as a clinic using one type of reimbursement method, while that clinic may pay its employed providers using another reimbursement method.

This plan may not cover all your health care expenses. Read your plan materials carefully to determine which expenses are covered. For details about benefits and services, call Member Services at 952-883-5000 or 800-883-2177.

Appropriate use and coverage of prescription medicines

We provide coverage for medicines that are safe, high-quality and cost-effective.

TO HELP US DO THIS, WE USE:

- A formulary (drug list). These prescription medicines are continually reviewed and approved for coverage based on quality, safety, effectiveness and value.
- A free, confidential one-on-one appointment (in-person or over the phone) with an experienced clinical pharmacist. Our Medication Therapy Management (MTM) program helps members who use many different medicines get the results they need.
- An opioid management program to support members in managing their pain.
- A patient alert program that provides a seamless transition to our formulary. We allow coverage for a first-time fill of a qualifying non-preferred medicine within the first three months of becoming a member.

The formulary is available at **healthpartners.com/formulary**, along with information on how medicines are reviewed, the criteria used to determine which medicines are added to the list and more. You may also get this information from Member Services.



When you eat better, you feel better!

Check out HealthPartners yumPower - it's all about finding tasty, good-for-you foods that power your body and help you live the best life possible. Get tips, recipes and more at **yumpower.com**. Your mind, body and taste buds will thank you.

