



2024
Individual &
Family Coverage

Have questions?
We are here to help.

CALL

By Phone

Contact our sales team for questions about your plan options, benefits and more.
800-918-2406 (TTY: 711)

CLICK

Visit prevea360.com/get-help

ENROLL

Find the best plan for you!

Visit Prevea360.com/ShopPlans
For more ways to enroll, see page 8.



Prevea360 Health Plan — Health Coverage Focused on Health Care

Traditionally, insurance companies and physicians measure success quite differently. This dynamic has led to a health care system that focuses more on illness than wellness. Prevea360 Health Plan changes that focus.



Understanding health insurance

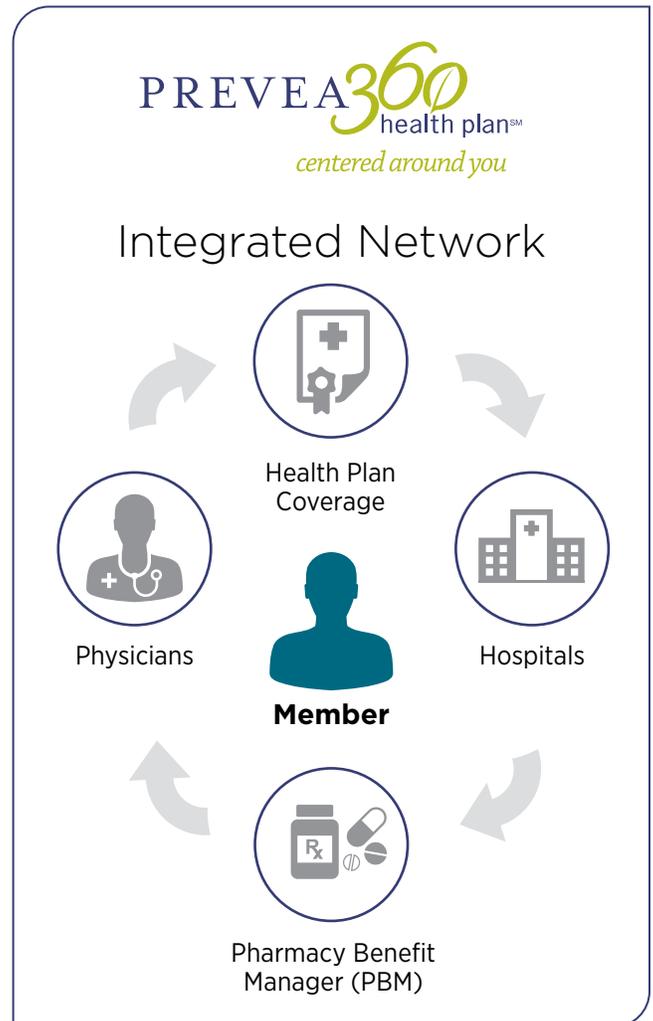
Health insurance protects you against unexpected and potentially high costs of medical care. With a health plan, your insurer, Prevea360 Health Plan, pays for certain covered services for you, with providers who are in-network. Find out more information about how health insurance works, how to choose a health plan and what happens once you enroll: Prevea360.com/HealthPlan101.

Quality Matters

You want access to superior care and service. And we work hard to provide that. We are thrilled to be recognized for our quality efforts.

Accreditation status is one of the most important indicators of how a health plan stacks up for quality. The National Committee for Quality Assurance (NCQA)—an independent, not-for-profit organization—evaluates health plans based on 50+ care and service standards.

Learn more about our quality scores at prevea360.com/quality



Health coverage with YOU in mind

Questions about plans in your area?

Learn more at
Prevea360.com/ShopPlans

Prevea360 Health Plan is dedicated to our members' well-being.

Prevea360 Health Plan is dedicated to our members' complete and lasting well-being. It gives members peace of mind financially and the confidence that their health care is of the utmost quality. We offer preventive care and wellness education through early diagnosis, groundbreaking treatment and rapid recovery.

Access benefits like free virtual care visits on most plans, urgent care visits that cost no more than your primary care physician visit, free digital wellness programs and more.



Preventive Services

We do more than help pay the medical bill. At the heart of our philosophy is a promise to help you get the support needed to help you maintain, or improve, your state of health.



Powerful Tools

Get access to online accounts, like MyPrevea, designed to assist you with communicating with your physician, viewing claims and accessing prescription history.



Online health program with reward opportunities

As a member, you'll get access to programs to motivate and support a healthy lifestyle at no additional cost. Participate and earn a reward valued at \$50 for completing your annual preventive visit.



Prevea Health Care After Hours*

As a member, this service is available any time you need a little health advice. Prevea Health staff is available **365 days of the year**.



Out-of-Area Care

Both urgent and emergency care are covered by Prevea360 Health Plan when you are traveling and unable to return to the service area.



Free Transportation

Prevea360 Health Plan members can get unlimited rides to and from their medical appointments free of charge. Learn more at prevea360.com/lyft



Care from Anywhere

Prevea Health's Virtual Care is available to all our individual and family plan members, free of charge for certain plans. **See the plan options for more details.**



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.

Note: If there is a discrepancy between this document and the plan's Policy of Coverage (POC), the POC will govern.



\$0 Cost Preventive Drugs

Prevea360 Health Plan makes it easier for you and your family to stay on top of your health. We offer a list of preventive drugs available to members for \$0. To see the most up-to-date list of \$0 preventive drugs, just visit prevea360.com/pharmacy or check out the Member Document Center on prevea360.com



Preferred Diabetic Supply Savings

\$0 member cost share on preferred diabetic supplies (for example, preferred test strips, lancets, syringes, needles, etc).



Preferred Insulin Savings

\$35 maximum member cost share^{††} on preferred insulin (tier 2) per one-month supply as part of your standard pharmacy benefit.



Pharmacy Drug Formulary

We use a drug formulary, which is a list of prescription drugs that help you understand what is and isn't covered. The drug formulary is reviewed 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:

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

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

† This benefit only applies to traditional copay plans. High Deductible Health Plans are excluded.

†† High-Deductible Health Plan (HDHP) members do not have to meet their deductible first.

Health Coverage Affordability Programs

Financial help is available!

Learn more at
Prevea360.com/ShopPlans

Depending on your income and personal situation, you may be eligible for a variety of financial help.

Visit Prevea360.com/ShopPlans for more information and to find out if you are eligible.

■ Tax Credits*

Tax credits lower the monthly premium you pay for health coverage. Depending on your household income level, these credits can pay for a considerable amount of your premium.



You can use your tax credit on Marketplace plans. When you visit Prevea360.com/ShopPlans and begin shopping plans, your tax credit allowance will be calculated for you.

■ Cost Share Reduction (CSR) Plans*

These plans are only available on **silver plans** for those who make **\$36,450 or less** for a single person. These plans can lower the amount you pay on services. We offer a variety of options for silver plans that are eligible for cost-sharing reduction plans.



- Lower the amount you pay on services
- Many members who applied last year qualified

■ Lower Out-of-Pocket Costs

There are three levels of cost sharing reduction based on Federal Poverty Level (FPL) income brackets:

- 1 100-150 percent of FPL
- 2 151-200 percent of FPL
- 3 201-250 percent of FPL

■ Cost-sharing Maximums

The plan you purchase will include a limit on the out-of-pocket expenses you have to pay for health care per year. Once this limit is reached, your health coverage plan begins to pay 100 percent of the cost.





■ Metal Tiers

All Individual & family plans are divided into metal categories. These categories show how you and your plan share costs. No matter which category your plan falls in, the quality of care does not change.



Bronze **LOWER PREMIUMS**

Bronze plans are best if you do not typically need to see your doctor or use your prescription coverage very often. The monthly premium payment will be lower, but when you do need care, your out-of-pocket costs will be higher.



Silver **MODERATE PREMIUMS**

Silver plans have your out-of-pocket costs and your monthly premiums more evenly balanced. These plans are beneficial if you may use your health care for more than just preventive care.



Gold **HIGHER PREMIUMS**

Gold plans are ideal and cost-efficient if you anticipate going to your provider or pharmacy frequently. These plans will have a higher monthly premium payment, but your out-of-pocket costs will be lower.

■ Federal Poverty Level (FPL)

You may qualify for help to pay for your 2024 health insurance based off of your 2023 household income.

Here are some quick guidelines on whether or not you may qualify for financial assistance. To see exactly how much financial help you qualify for, visit Prevea360.com/ShopPlans.

1 	You're an individual making \$14,580 - \$58,320 or more.**
2 	You're a family of two making \$19,720 - \$78,880 or more.**
3 	You're a family of three making \$24,860 - \$99,440 or more.**
4 	You're a family of four making \$30,000 - \$120,000 or more.**

* An individual's eligibility for tax credits and CSR plans can be determined on Healthcare.gov.

** Based on the 2023 federal poverty guidelines. Visit Prevea360.com/ShopPlans to enter your information to verify your eligibility.

Enrolling in Individual and Family Coverage

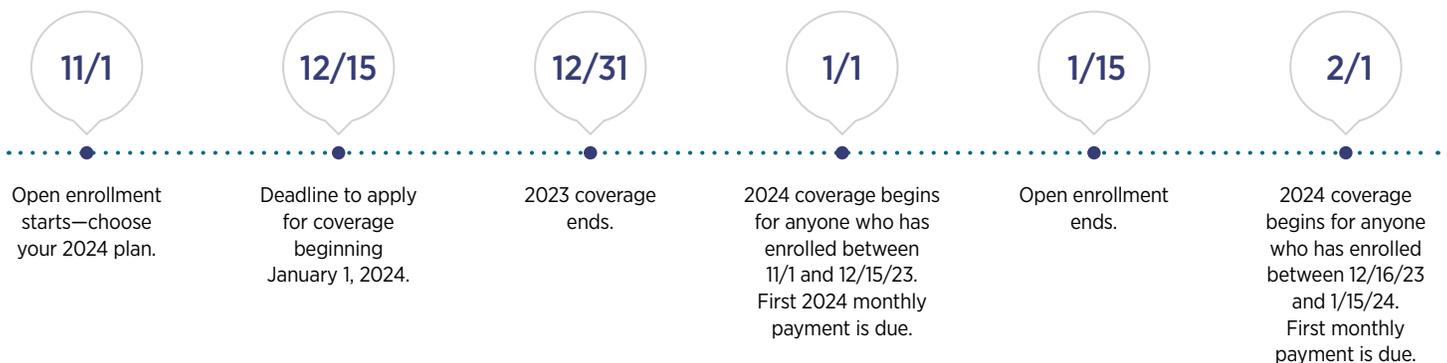
We have health insurance plans to fit your lifestyle and budget. Whether you're looking for a lower-premium plan, to limit your overall out-of-pocket expenses, or even just for a catastrophic safety net plan, we're here for you.



Open Enrollment vs. Special Enrollment

You can enroll for individual and family coverage during open enrollment that begins on November 1, 2023. After that, you will need to wait for the next open enrollment period in November 2024, unless a qualifying event occurs and you are eligible for special enrollment (such as, job loss, marriage, divorce, a baby or a move to a new coverage area).

Learn more at prevea360.com/specialenrollment



What are my next steps?

The process to make changes to your plan depends on where you purchase your health insurance.

Prevea360 Health Plan Marketplace Plan Enrollment

- Enroll online:
Visit Prevea360.com/ShopPlans
- Enroll over the phone:
Call a Prevea360 Health Plan Sales Team Member at 1 (800) 918-2406 (TTY: 711)
- Enroll in-person:
Visit a licensed Health Insurance Agent

Prevea360 Health Plan is Here For You

Enroll today at

Prevea360.com/ShopPlans

Once you become a member, we make things simple to help you take control of your health.

As a member, you will receive a member ID card and a member guide after enrollment to walk you through your health plan.

■ Out-of-Area Care

From finding out-of-area care while traveling to discussing prior authorization with our Medical Affairs team, we pride ourselves on helping you make the most of your health.

For more information on coverage, benefits, and processes for your plan, please visit prevea360.com/newmember or call **877-357-3173 (TTY: 711)**.

■ Privacy

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.

For additional information please visit prevea360.com/privacy or call **877-357-3173 (TTY: 711)** to request a copy.

■ Grievances & Appeals

Your input matters, and we encourage you to reach out with any concerns you may have regarding your health coverage. Visit prevea360.com/appeals details on how to file a grievance or appeal, or for more information about these procedures.

Contact the Customer Care Center with any questions about the process by calling **877-357-3173 (TTY: 711)**.

What else you need to know

Eligibility and requirements

To qualify for a Prevea360 plan, the policy subscriber must be a Wisconsin resident, live in the Prevea360 service area, and not be enrolled in Medicare.

Understanding benefits and coverage details

This brochure is a brief overview of the plans. For more complete benefit details, limitations, and exclusions please see a Prevea360 Individual and Family insurance policy. You can find that at [Prevea360.com/ShopPlans](https://www.prevea360.com/ShopPlans), or you can get a paper copy by calling **1 (877) 357-3173** (TTY: **711**).

Prior Authorization

There are certain medical services or provider 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 from an out-of-network provider, you will need to get prior authorization.* We require these authorizations so our Medical Affairs team can make sure that the services you are getting may be eligible for benefits under your plan.

Pediatric dental is not covered

These policies do not include pediatric dental services. Pediatric dental is an essential health benefit that can be purchased as a standalone product through Healthcare.gov. For more information visit [Healthcare.gov](https://www.healthcare.gov).

Member Complex Case Management

We have services and programs designed to help members with certain health conditions manage their overall care and treatment. Find more information about the programs and services available by visiting [Prevea360.com](https://www.prevea360.com).

Deductible and out-of-pocket maximum details

The deductible and out-of-pocket maximum are subject to a “cost of living” increase on a yearly basis. This increase is tied to the Consumer Price Index and/or may result from adjustments needed to keep plans within the range for a given metal level; metal levels (e.g., Gold, Silver, Bronze) must always be in compliance with the Affordable Care Act (ACA) for Qualified Health Plans (QHPs).

Cost Share Reduction plans

You may be able to get help paying your health insurance premium or qualify for plans with reduced deductibles and copays. Plans with reduced deductibles and copays are called Cost Share Reduction (CSR) plans. You can get this assistance if you get health insurance through Healthcare.gov, your income is below a certain level, and you choose a health plan from the Silver plan category. Reduced cost sharing is not available with a Catastrophic plan. If you’re a member of a federally recognized tribe, you may qualify for additional cost-sharing benefits. To see if you’re eligible, please visit [Healthcare.gov](https://www.healthcare.gov).

Receiving care outside your network

Unless it’s an emergency, air ambulance service, or certain out-of-network care at an in-network facility or pre-approved by Prevea360, there is no coverage if you visit a provider that is not in your plan’s network. This means that your provider may require you to be responsible for the full cost of any care or supplies. Learn more at [Prevea360.com/BalanceBill](https://www.prevea360.com/BalanceBill).

Note: If there is a discrepancy between this document and the plan’s Policy of Coverage (POC), the POC will govern.

Discrimination is Against the Law

The Health Plan complies with applicable Federal civil rights laws and will not discriminate against any person based on his or her race, color, creed, religion, national origin, sex, gender, gender identity, health status including mental and physical medical conditions, marital status, familial status, status with regard to public assistance, disability, sexual orientation, age, political beliefs, membership or activity in a local commission, or any other classification protected by law. The Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: TTY communication and written information in other formats such as large print, audio, and braille.
- Provides free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages.

If you need these services, contact the number on the back of your identification card. If you believe that we have failed to provide these services or discriminated in another way on the basis of your race, color, creed, religion, national origin, sex, gender, gender identity, health status including mental and physical medical conditions, marital status, familial status, status with regard to public assistance, disability, sexual orientation, age, political beliefs, membership or activity in a local commission, or any other classification protected by law, you can file a grievance with: Civil Rights Coordinator, Mail Route CP250, PO Box 9310, Minneapolis, MN 55443-9310, 952-992-3422, TTY: 711, civilrightscoordinator@medica.com.

You can file a grievance in person or by mail, fax, or email. You may also contact the Civil Rights Coordinator if you need assistance with filing a complaint. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201 800-368-1019, TTY: 800-537-7697. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

If you want free help translating this document, call 1-877-317-2410 (TTY: 711).

Si desea recibir asistencia gratuita para la traducción de este documento, llame al 1-877-317-2410.

Yog koj xav tau kev pab dawb txhais daim ntawv no, hu rau 1-877-317-2410.

如果您需要我們免費幫您翻譯此文件，請致電 1-877-317-2410。

Nếu quý vị muốn giúp dịch tài liệu này miễn phí, gọi 1-877-317-2410.

Sanadnikun kaffaltiimaleeakkaisiniifhiikamuyoobarbaadd-an 1-877-317-2410 tiinbilbilaa.

إذا كنت ترغب في مساعدة مجانية لترجمة هذا المستند،

فاتصل على الرقم 1-877-317-2410

Если вы хотите получить бесплатную помощь в переводе этого документа, позвоните по телефону 1-877-317-2410.

ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອຟຣີໃນການແປເອກະສານ, ໃຫ້ໂທຫາ 1-877-317-2410.

Si desea recibir asistencia gratuita para la traducción de este documento, llame al 1-877-317-2410.

જો તમને આ લેખનું ભાષાંતર કરવામાં મફત મદદ જોઈતી હોય તો, 1-877-317-2410 નંબર પર કોલ કરો.

Kung nais mo ng libreng tulong sa pagsasalin sa dokumentong ito, tumawag sa 1-877-317-2410.

이 문서를 번역하는 데 무료로 도움을 받고 싶으시면 1-877-317-2410로 전화하십시오.

Si vous désirez obtenir gratuitement de l'aide pour traduire ce document, appelez le 1-877-317-2410.

နမူလိန်ဘဉ်တော်မၤစၢၤကလိလၢတၢ်ကွဲးကျိၢ်ထံလံာ်အံၤအယိၤ,ကိး 1-877-317-2410.

Kung nais mo ng libreng tulong sa pagsasalin ng dokumentong ito, tumawag sa 1-877-317-2410.

ይህን ሰነድ ለመተርጎም ነጻ እርዳታ ከፈለጉ በ 1-877-317-2410 ይደውሉ።

Ako želite besplatnu pomoć za prijevod ovog dokumenta, nazovite 1-877-317-2410.

T'áá jiiik'é díí naaltsoos t'áá nizaadk'ehjí bee shí ká'adoowoł ninízingo kojí' hodíílnih, 1-877-317-2410.

Wenn Sie kostenlose Hilfe zur Übersetzung dieses Dokuments wünschen, rufen Sie 1-877-317-2410 an.

“यदि आप इस दस्त-तावेज़ का अनुवाद करने में मु त सहायता चाहते हैं, तो 1-877-317-2410 पर कॉल करें।”

Se desidera ricevere assistenza gratuita per la traduzione di questo documento, chiami il numero 1-877-317-2410.

Jeśli potrzebujesz bezpłatnej pomocy w przetłumaczeniu tego dokumentu, zadzwoń pod numer 1-877-317-2410.

اگر آپ اس دستاویز کا ترجمہ 1-877-317-2410 پر کال کریں کروانے کے لئے مفت مدد چاہتے ہیں، تو

Follow us on LinkedIn and Facebook



Prevea360 Health Plan

PO Box 56099
Madison WI 53705-9399
Toll-free **(800) 918-2406 (TTY: 711)**
prevea360.com

Prevea360 is underwritten
by Dean Health Plan, Inc.

©2023 Dean Health Plan, Inc.
PHP-IFB1005982-7-00523A