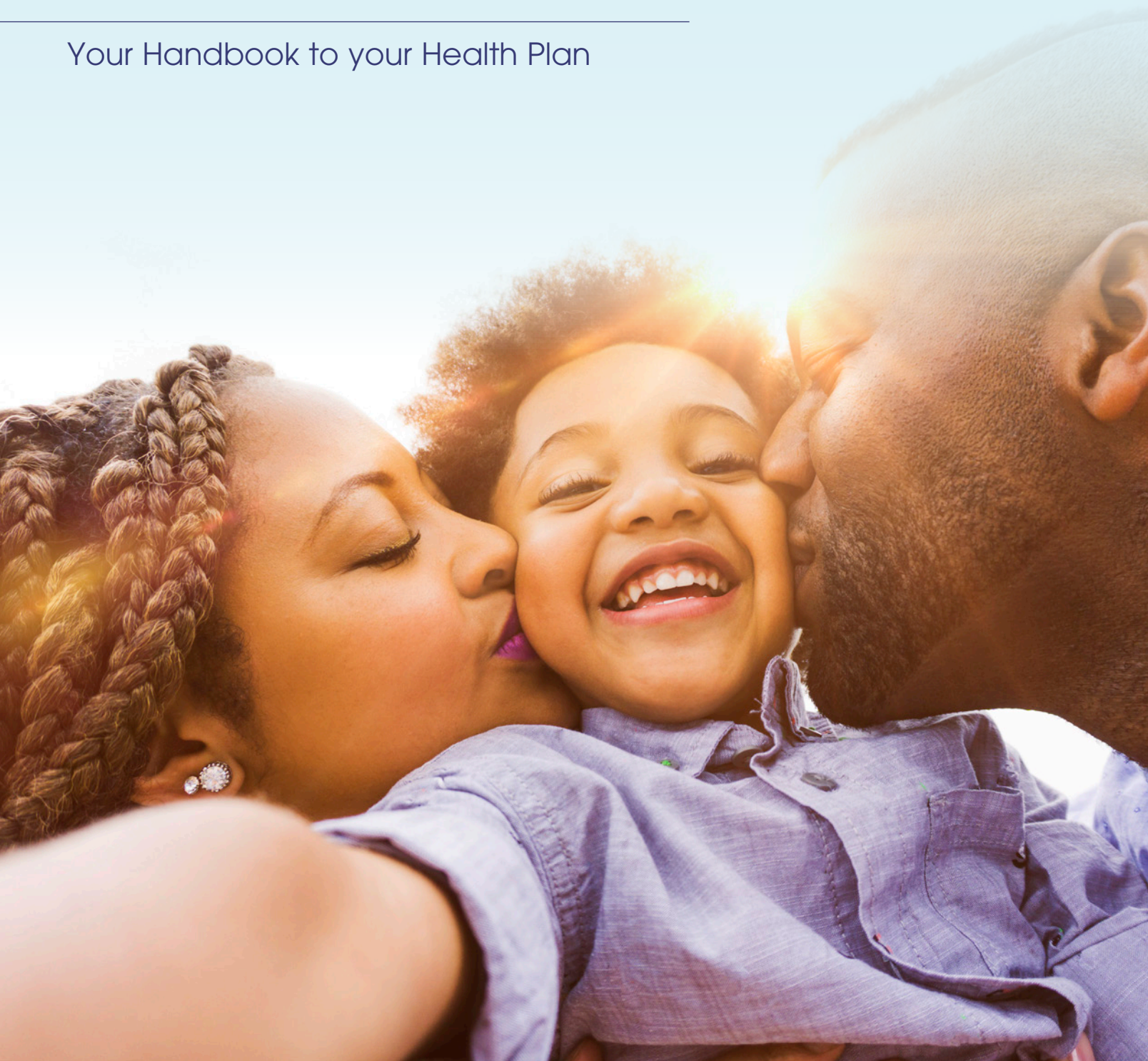


Member Guide

Your Handbook to your Health Plan



1

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We're so happy you chose Prevea360 Health Plan!

Count on Prevea360 Health Plan to have your back so you can stay healthy and get the most out of your plan. As a member, you now have access to valuable resources to manage your health and empower you to take control of your care. That means benefits you can understand, tools that save you time and most importantly, support from our friendly staff whenever you need us.



Find exceptional care, exceptionally close.

You have full access to a comprehensive network of hospitals, providers and specialty physicians throughout northeastern and western Wisconsin. In western Wisconsin, we serve Barron, Buffalo, Chippewa, Dunn, Eau Claire and Pepin counties. Our northeastern service area includes these counties: Door, Marinette, Menominee, Shawano, Outagamie, Brown, Kewaunee, Manitowoc, Sheboygan, Oconto and Calumet.



You're in the right place for quality.

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.

For more information visit prevea360.com/quality.

Go online, click and voilà – information at your fingertips. Find a wealth of health insurance information, benefit details and so much more when you visit

prevea360.com

Starting a new health plan can be complicated. We make it easy.

Complete these steps to unlock resources and take important actions so you can get the most out of being a member. Check out prevea360.com/newmember for other helpful tips.

1

Activate your FREE accounts.

- Schedule appointments, send secure messages to your physician and more through your **MyPrevea** account. Start achieving your goals for a healthy lifestyle and earn rewards along the way through your **Living Healthy** account.
- These online accounts were designed to have a healthy impact on your wellbeing and your wallet. *See pages 6–9 for details.*
- Access your insurance details, print insurance cards and more through your member portal account. View and pay your premium bill and more through your **MyPrevea** account.

2

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

- Doing this makes it easier to schedule a visit when the time comes that you need one. Just visit prevea360.com/locations to find a primary care clinic near you.



See page 24 for a helpful decision-making worksheet to help you choose a Primary Care Provider.

3

Schedule a visit when you need one.

- If you need care before your Annual Preventive Office Visit, just call your preferred primary care clinic for immediate assistance.
- A few months before you're due for your Annual Preventive Office Visit, call your preferred primary care clinic for an appointment. This is a good time to tell the clinic which Primary Care Provider (PCP) you'd like to see.

Before you come in for your first visit, it's a good idea to have your medical records transferred from your previous primary care clinic to your new one. Contact your previous clinic to obtain and complete an Authorization to Release Protected Health Information Form. The form allows your previous clinic to send your medical records to your new clinic so your medical team can best continue your care.



We're sharing helpful insurance tips, informative videos and much more. Go to facebook.com/prevea360 to join the conversation all year long.

PREVEA360
health planSM

Additional Member Info

Review important member documents.

- Visit **prevea360.com/benefit-center** for links to important member documents.*
- Your Member Certificate has information about your insurance benefits and coverage. It also lists general limitations and exclusions to your plan.
- Your Summary of Benefits and Coverage (SBC) is an 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.**
- Take a moment to review common health insurance terms on page 18 so you better understand your coverage.
- The Pharmacy Drug Formulary is a list of prescription drugs that help you understand what is and isn't covered by your insurance.

I have other insurance coverage besides Prevea360 Health Plan.

- Your Prevea360 Health Plan policy has a Coordination of Benefits (COB) provision – a fancy way of saying we'll need to sort through situations where you are covered by another health insurance company (such as through an employer or Medicare).
- Please let us know by contacting the Customer Care Center. *See page 6 for contact details.*

I have a chronic condition or a health concern.

- We're here to support you if you have a serious condition or have a complex health care need.
- Visit **prevea360.com/livinghealthy** and click on "Complex Case Management" to learn how we can help or contact the Customer Care Center.
See page 6 for contact details.

* These documents are also available through your Member Profile account or you may contact the Customer Care Center to request copies be mailed to you. *See page 6 for contact details.* If you receive health insurance through your employer, you can ask your company's plan administrator or benefits specialist for your specific benefits and coverage information.

** Your financial responsibilities may come in the form of a copay, coinsurance or deductible. The terms stated in these documents may change at your annual policy renewal, and we would send you an outline of any changes at that time.



LIKE
US? | JOIN
US!

Health insurance support Is just a tap or click away.

You shouldn't have to be a rocket scientist to figure out health insurance. We offer innovative tools to help you sort through all your information. And if you need a little help along the way, we're standing by.



Member Profile

Manage your member profile information with your secure and convenient member portal account.

- View your insurance plan details
- Request member ID cards or download a digital copy
- Change your primary care clinic
- Review past claim details and more
- View and pay your premium bill

Visit prevea360.com/member-profile and use your member number from your ID card to activate your account.



Customer Care Center

Our friendly Customer Care Specialists are here to turn health insurance confusion into clarity.

- Get answers to benefit and coverage questions
- Figure out what your financial responsibility is for a bill
- Learn the details about a physician

877.230.7555 (TTY: 711)

M – Th, 7:30 a.m. – 5:00 p.m.

F, 8:00 a.m. – 4:30 p.m.

CALL

CLICK

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

Health care support is always At your beck and call.

Time is precious. That's why we offer technology so you can keep tabs on what's most important – your health. And when health concerns come up, call our nurses instead of relying on random internet sites.



MyPrevea

Manage your medical world – all from a computer or smart phone. MyPrevea is designed for the way you live today.

- Send and receive secure messages with your Primary Care Provider
- Schedule appointments
- Get lab results
- Request prescription refills and more

Visit prevea360.com/myprevea to activate your account.

Some features of MyPrevea may not be available at all primary care clinic locations.



Prevea Care After Hours

Take the guesswork out of getting the health care you deserve. A nurse is ready to help 24/7/365.

- Talk with an experienced registered nurse from Prevea Health
- Get help figuring out where to go for care
- Get answers to your health-related questions or concerns

Call **888.277.3832**

Save our number in your phone so you can call us anytime.

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



Save our number in your phone!
888.277.3832
Prevea Care After Hours

Achieve your goals & Earn up to \$150 along the way.

We believe that with the right tools, information and motivation, you can achieve your goals for a healthier lifestyle on your own terms. That's what Living Healthy is all about.

Your Comprehensive Wellness Program

Living Healthy is centered on you so you can get involved and informed on your own terms.

- Get up to \$150 for your healthy activities (see right for details)
- Set health goals and track your progress
- Take advantage of resources to end your tobacco use
- Receive extra support if you have complex or chronic health conditions

Living Healthy Portal

Your online portal is interactive and personalized to your unique needs and goals.

- Take a health assessment and begin your journey toward improved health
- Access resources and interactive tools to help you live a healthy lifestyle
- Access \$150 in Living Healthy rewards

Visit prevea360.com/livinghealthy to create your personalized Living Healthy portal account today.





LivingHealthy
POWERED BY **WebMD** health services

Living Healthy Rewards*

Get up to \$150 per calendar year by completing and logging healthy activities:

- Take a 10-minute health assessment within your Living Healthy portal
- Activate your MyPrevea account
- Have an Annual Preventive Office Visit
- Get your annual flu vaccine
- And more – visit prevea360.com/livinghealthy for a list of healthy activity reward options

Here's how it works:

- Choose the healthy activities you want to complete
- Each completed activity is worth reward points
- Earn up to 1,500 points for a maximum of \$150 per calendar year
- Get your reward in the form of gift cards to your choice of many national retailers, restaurants and other popular merchants
- All rewards must be redeemed before December 31, 2020

* You must complete the online health assessment in order to earn reward points for other healthy activities. Check with your plan administrator for reward offerings specific to your plan. Only Prevea360 Health Plan members, ages 18 and older, are eligible for Living Healthy rewards. Covered adult children may earn up to \$100 per year for completing healthy activities. Your employer may be required to report health plan-issued incentives as taxable income. We may be required to report incentive payment information to your employer. Your health information is protected by federal law and will not be shared with your employer. Living Healthy rewards are not available to Federal Employee Health Benefits (FEHB) Program members.

Employee Trust Fund members should visit prevea360.com/wi-employees for details.



prevea360.com/livinghealthy

Get the right care, in the right place At the right cost.



Primary Care

Whenever you need care (except emergencies), start by calling your primary care clinic for the soonest available appointment. Don't wait for your health conditions to get worse. Same-day appointments are usually available even for urgent medical needs.

Common reasons to visit include: _____



The lower-cost option.



Urgent Care

If a same-day appointment is not available to treat your illness or injury at your primary care clinic, you may be directed to Urgent Care.



Possible higher copay option.



Emergency Care

For a life-threatening illness or injury, go to the nearest emergency room or call 911. Make sure to tell your Primary Care Provider (PCP) that you went to the emergency room.* Your PCP might determine that you need follow-up services.

Common reasons to visit include: _____



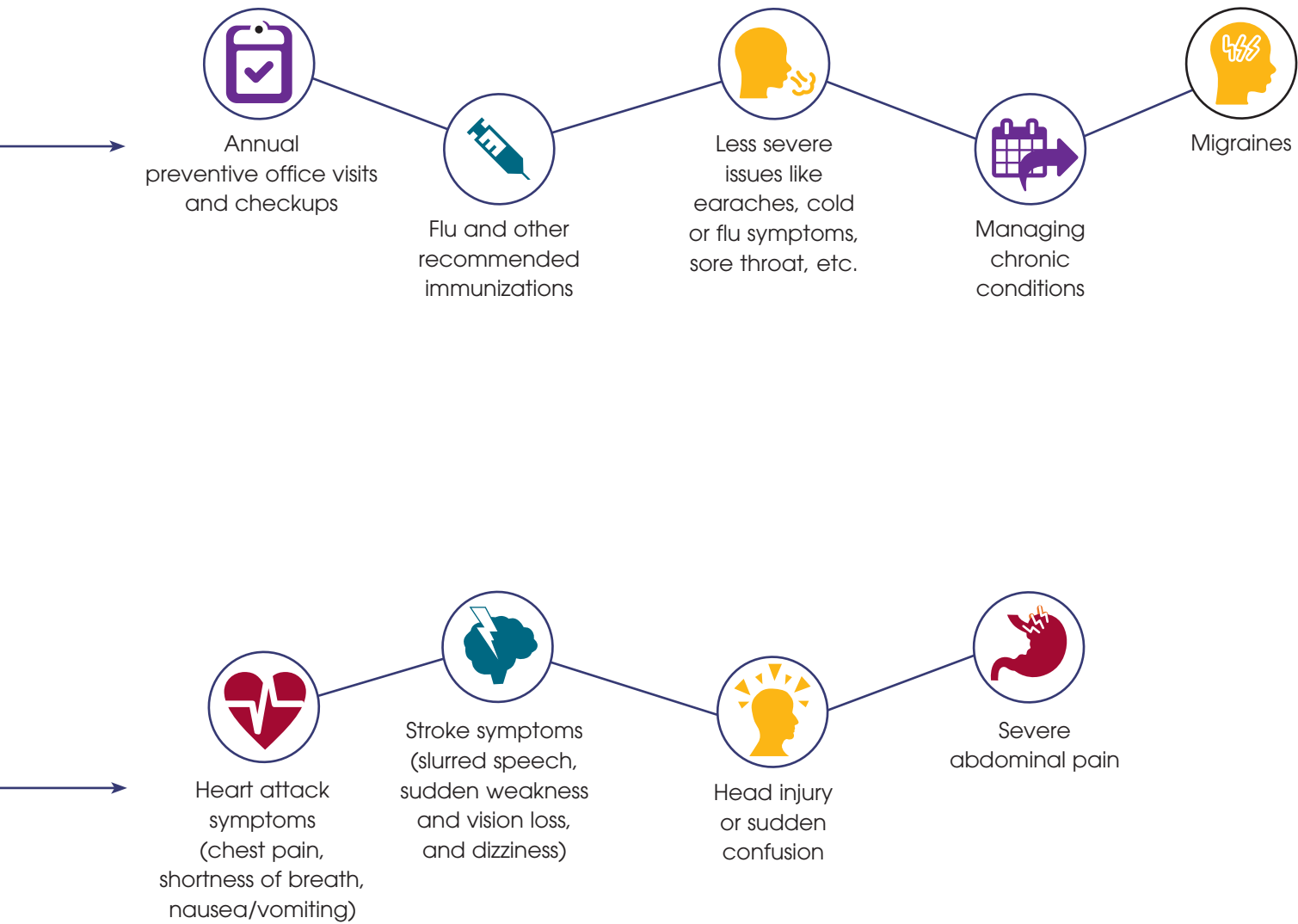
The high-cost option.

* Please notify the Customer Care Center as soon as possible when you receive ER care at an out-of-network provider.

Still not sure where to go? We'll guide you!
Call Prevea Care After Hours to speak
with an experienced, 24-hour nurse.

888.277.3832

We understand that it can be confusing to navigate through the health care system. Knowing your care options in advance is not just good for your health, but it's also better for your budget.



Find a care location near you:
prevea360.com

The best relationships Include a healthy dose of trust.

We know that health care is a very personal – and at times, intimidating experience. That’s why our Primary Care Providers work so hard to earn and keep your trust. No judgments. Just compassion.



Primary Care Physician (PCP)

Your PCP is committed to working with you to build a relationship of trust. Trust — combined with his or her training and experience — means you have a true health advocate who cares.

- Provides care for a wide range of preventive and long-term health care
- Helps you stay healthier with regular visits, immunizations and screenings
- Handles your immediate care needs
- Provides medical referrals to see specialists
- Coordinates your health care with other medical experts



See [page 23](#) for a helpful decision-making worksheet to help you choose a PCP.



Types of PCPs

Your PCP will be a medical doctor who is trained to provide you with the best personal medical care:

- Physician – Medical Doctor (MD)

Visit prevea360.com/doctors to search our online provider directory for an available Primary Care Physician. You can filter your search so you only see providers in your network. Then select a provider to learn about his or her education, specialty, certification and more.

→ Visit prevea360.com/vaccine-visit for child appointment tips and a vaccine tracker.



Traveling? Here's what you need to know.

You don't need to take insurance coverage worries with you on your vacation. We have you covered for urgent and emergency care worldwide.

- We'll cover services provided in an urgent care facility and/or emergency room while you're out of the Prevea360 Health Plan service area, subject to policy copays, coinsurance, deductibles and maximum allowable fees. No referral or prior authorization needed. If you are unable to get to an in-network plan provider, please go to the nearest urgent care or emergency center for treatment. Please notify us as soon as possible by calling the Customer Care Center at **877.230.7555 (TTY: 711)**.
- An in-network provider should resume all follow-up care. If that's not possible, call your PCP to discuss the urgent/emergent services you received and the recommended follow-up care. Prevea360 Health Plan must approve these services. Your PCP will submit a request for medically-necessary services with the out-of-network provider.

Getting sick is easy. Staying healthy?

Yeah, we make that easy too!

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 as healthy as possible and help prevent disease.



Annual Preventive Office Visit

This type of visit can bring to light health concerns so they can be addressed before they get worse. That's what preventive care is all about.

- Allows your Primary Care Provider to get to know you and your health care needs
- Helps you prevent or manage illnesses, diseases or other health problems
- Includes important preventive services, such as immunizations, cancer screenings and patient counseling (see below for examples)



Preventive Care*

In addition to an Annual Preventive Office Visit for all ages, we encourage and cover:

- Immunizations - doses and age-specific vaccines vary
- Screenings for Breast, Cervical and Colon Cancer
- Annual Sexually Transmitted Infection (STI) Counseling for adults and adolescents
- Cholesterol Screening for all ages and more

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

* Information presented here is meant to supplement - not replace - the advice and care of health care professionals. To see your specific preventive care coverage details, please review your Member Certificate and your Summary of Benefits and Coverage (SBC) documents. Details for covered preventive services may change. For coverage questions, contact the Customer Care Center. See page 6 for contact details.

Your Covered College Student Lives Outside the Service Area?

Students who attend college outside of our service area and children living in another community are common examples of out-of-area dependents. Please notify us if you have an out-of-area dependent (up to age 26). Visit prevea360.com/out-of-area and click on Out-of-Area-Dependent form. Then fill in the blanks and click Submit. You may also contact the Customer Care Center. *See page 6 for contact details.*

- We offer a nationwide network of providers for out-of-area dependents so they can get the health care they need, when they need it. If care is received by these in-network providers, claims will be paid at the in-plan level, which means lower out-of-pocket costs.
- Visit prevea360.com to use our online provider directory and select "Out-of-Area Coverage" to display in-network providers.

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 if you have questions.

Specialty care is everywhere When you need it.

In addition to Primary Care Physician, our network includes a variety of medical specialists. Your doctor can help you find the specialist who is right for you.



Specialty Care 101

Talk with your Primary Care Physician if you think you need to be seen by a specialist. He or she may even recommend you seek specialty care.

- Examples of specialty care include physical therapy, podiatry, chiropractic services and dermatology.
- There are many specialists affiliated with Prevea360 Health Plan, including but not limited to those found at Prevea Health.
- You should be seen by a specialist within the Prevea360 Health Plan network of providers.

Visit prevea360.com/doctors for a comprehensive list of our specialists, behavioral health services and hospitals.



Prior Authorization

Certain medical services or specialty care services from a specialist might require you to get prior authorization.*

- 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 unless your benefit plan includes an out-of-network option.
- We require prior authorization so our medical management team can review the medical necessity of the recommended service or visit and make sure you are getting appropriate care.**

* As you navigate your health care, it's important to note there are certain medical services or provider visits that require prior authorization by Prevea360 Health Plan. If the services are covered under your plan, they are also still subject to a decision regarding medical necessity and any applicable cost sharing (e.g., copays, coinsurance or deductibles).

** If the Customer Care Center is unable to address your authorization concerns, you will be connected to the Care Management Department. If you have an urgent need outside of business hours, leave a message with the Customer Care Center and your call will be returned within one business day.



Have a Question? Contact
the Customer Care Center.**

See page 6 for contact details.

Do I need Prior Authorization?

My PCP (or other in-network provider) recommended I visit a specialist:

I have Prevea360 Network (HMO)

In-Network

You don't need to do anything. Although the service may require a prior authorization, it is up to your in-network provider to get prior authorization for you.

Out-of-Network

Yes, you need to get prior authorization to see an out-of-network provider. Discuss this with your plan provider and he or she will submit an authorization to the health plan if the services are not available with plan providers. We'll then review the request and provide a written decision to both you and the referring provider within 15 calendar days. Make sure you wait until you receive this approval before receiving the recommended services to avoid any unnecessary fees.

I have a PPO or POS Plan

Because each POS and PPO plan is different, we recommend **you check to see if a prior authorization is required** for any services outside of a normal office visit. For a plan-specific list of these services, refer to the "Prior Authorization" section of your Member Certificate available at prevea360.com/benefit-center. You may also call 877.230.7555 (TTY: 711) for help.

For plan-specific services that require a prior authorization, refer to your Member Certificate found at:

prevea360.com/benefit-center

Getting the most From your drug benefit.

Convenience and member 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.



FREE Mail-Order Delivery

In addition to filling your prescription at any of our plan pharmacies, you can receive FREE mail-order delivery service to your home.

- Refill prescriptions by phone or online
- Receive FREE mail-order delivery to your door (within the continental US)*
- Get prescriptions filled for 90 days on select medications



See page 25
for a helpful
medication
tracker.

Visit prevea360.com/pharmacy to view our drug formulary, find nearby pharmacies and learn more about mail-order delivery, tablet splitting and other pharmacy services.



You split the tablet – we'll split the copay

Tablet splitting can provide significant savings for you, depending on your prescription and dose.

- You pay up to one-half of your usual copay on select medications
- For more information, talk to your Primary Care Provider or contact the Customer Care Center.
See page 6 for contact details.

* Mail-order delivery service is not available to all members. Refer to your Summary of Benefits and Coverage (SBC) document or contact the Customer Care Center. See page 6 for contact details.



Specialty Pharmacy

Medications for many chronic and complex health conditions can be hard to manage. Our Specialty Pharmacy works with you and your Primary Care Provider to help you to manage your condition and to make sure you receive the best care possible. We offer free delivery, same-day service, refill reminders, financial assistance and more.

Drug Formulary & Management Procedures

We use a drug formulary, which is a list of prescription drugs that helps you understand what is and isn't covered. Our drug formulary breaks the list into different tiers. The tiers are organized by the level of cost sharing between you and the health plan. The drug formulary is reviewed every month and updated on a regular basis. For example, we update the drug formulary when a new generic drug is approved. There are restrictions and procedures to your coverage in order to help keep plan costs down.*

* Restrictions and management procedures to your prescription coverage mean you may only receive drugs listed on our drug formulary (closed formulary). Certain drugs may have specialist restrictions or require you to visit a specialty pharmacy. You may also be required to have prior authorization, mandatory generic substitution, step therapy and quantity level limits for certain drugs. Be familiar with your plan's specific coverage details and visit prevea360.com/pharmacy to review our drug formulary, along with general limitations and procedures.



Find a pharmacy location near you:
prevea360.com

How insurance works:

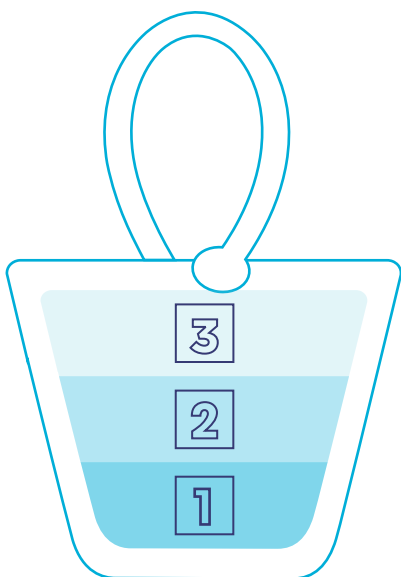
Health insurance 101.



See page 22 for a worksheet to help you understand your cost sharing responsibilities

We provide you with tools to learn where your health care dollars go and we try to make it as easy as possible to understand your financial responsibilities.*

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



1

DEDUCTIBLE

Each time you receive medical services, you'll pay the bill towards these services up to a certain amount. This amount is your deductible, which is what you must pay for covered health care services each year before we begin to pay.

2

COINSURANCE[†]

Later on when you need medical services and once you've paid the deductible amount, your insurance will then start splitting the cost of medical services with you. This is known as coinsurance, where you only pay a percentage or part of the total cost of services and we'll pay the rest.

Deductible and Coinsurance Limit – there's a dollar limit to the amount you'll pay towards your deductible and coinsurance.

3

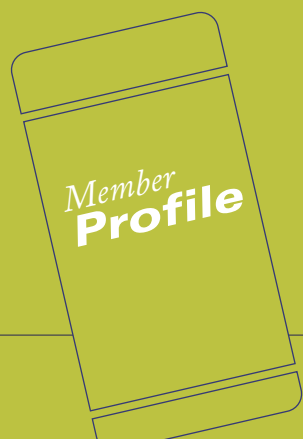
COPAYS

A copay is a fixed dollar amount, which you pay at the time you receive medical services (for things like an office visit) and prescriptions. All your copays add up toward your Maximum Out-of-Pocket total.

Maximum Out-of-Pocket – there's a dollar limit to all your cost sharing. You reach this amount by means of your deductible, plus your coinsurance, plus your copays. Once this limit is reached, you'll pay nothing on subsequent covered medical charges for the remainder of your policy year.

* Not all of the terms listed here apply to all members. Refer to your Member Policy to understand which apply to you.

† Coinsurance is your share of the costs of a covered health care service. It's calculated as a percent of the allowed amount for the service.



Get a Cost Estimate

Your Member Profile can help you get a cost estimate for services. Log in and check your Member Policy for the cost of common medical services or use the **What's My Copay?** tool to calculate out-of-pocket costs for prescription drugs.

Payments and Claims

How can I get a cost estimate for services?

Check your Summary of Benefits and Coverage (SBC) document for details about common medical services. You may also contact the Customer Care Center at **877.230.7555** and provide the following information: name of your provider, current procedural terminology (CPT) code, date of service, amount that your provider is billing,* and name of medication and dosage (if applicable).

I need to make a payment.

For insurance premiums: you can pay your insurance premiums online or by mail. Visit prevea360.com/billpay to learn more.

For medical bills: when you are seen at a clinic location for services, you may pay a copay when you check-in. Prevea Health will send you a bill for any copay charges not paid at the time of service or any deductibles and coinsurance for which you are financially responsible. You can pay your bill by mailing your payment (check or credit card info) with the enclosed payment form to Prevea Health.

* This information may be obtained by contacting your physician.

I need to submit a claim.

Claims are usually sent directly to Prevea360 Health Plan by providers or clinics. Sometimes – if you're traveling out of the area or have a college-age dependent, for example – it may be necessary for you to submit a claim for reimbursement. Be sure to follow these guidelines:

- Send an itemized bill from the provider of service. If services were received outside of the U.S., you will need to submit the original bill along with an itemized bill that has been translated into English and indicate the appropriate currency exchange rate at the time the services were received.
- Send the bill within 60 days (up to 12 months are allowed) after the services are received to:
Prevea360 Health Plan, Attn: Claims Department, P.O. Box 56099, Madison, WI 53705.
- If you have another insurance company that is the primary payer, you will need to send the Explanation of Benefits to Prevea360 Health Plan or your Primary Care Provider.

I received an Explanation of Benefits (EOB). Is this a bill?

The EOB is not a bill. You'll receive an EOB when you use your health plan for a covered service. The EOB lists the services used, amount charged by the provider and your financial responsibility to pay toward deductibles or co-insurance. Log in to MyPrevea to see your past EOBs.

prevea360.com/billpay

Need to make changes to your plan?

We can help.

Special Enrollment

We understand that sometimes big events happen in your life and it means you need to make a change to your coverage with Prevea360 Health Plan. You can make changes to your plan outside of the designated open enrollment period, but only if you have a qualifying event that would trigger a special enrollment period. If you get your coverage through your employer, please contact the HR department to make a change. In general, a qualifying event occurs when your family, health insurance or financial status changes throughout the year. Examples include birth/adoption and marriage.

Typically, consumers have a specified number of days from when a qualifying event occurs to make plan changes. Since different qualifying events have different time frames, we recommend checking with your company's human resources department or contacting us for more information.

Let us know if you have other coverage or Medicare.

Do you have health insurance coverage in addition to your coverage through Prevea360 Health Plan? When you have coverage through more than one source, we have to determine in what order claims will be paid, referred to as coordination of benefits. It is especially important that you notify us when you are eligible for Medicare. When you are eligible for Medicare, Prevea360 Health Plan processes your claims as if you are enrolled in Medicare, even if you choose not to enroll in Medicare Part A and/or B. This will result in you paying out-of-pocket for services that Medicare would have covered. For this reason, we strongly suggest that you enroll in Medicare Part A and B as soon as you are eligible.

We're here to help you sort it all out. Please call the Customer Care Center at **877.230.7555 (TTY: 711)** to notify us of any other insurance coverage you have, including Medicare. For questions related to Medicare coordination of benefits, please call **800.356.7344, ext. 4189**.



Member Information.

Member Rights & Responsibilities

You deserve the best service and health care possible. Rights and responsibilities help foster cooperation among members, physicians and Prevea360 Health Plan. Visit prevea360.com/member-rights to view all of your member rights and responsibilities.

Terms & Conditions

All your benefits are subject to terms and conditions as described in your Summary of Benefits and Coverage (SBC) and your Member Certificate documents. Visit prevea360.com/benefit-center and refer to these important documents for complete details.

Grievance & External Independent Review Rights

We know that at times you may have questions and concerns about benefits, claims or services you have received from Prevea360 Health Plan. When a question or concern arises, we encourage you to reach out to our Customer Care Center. Our Customer Care Specialists will make every effort to resolve your concern promptly and completely. Your input matters, and we encourage you to call with any concerns you may have regarding your health care. If after contacting us, you continue to feel a decision has adversely affected your coverage, benefits or relationship with Prevea360 Health Plan, you may file a grievance (sometimes called an appeal).

Visit prevea360.com/appeals for details on how to file or for more information about these procedures. You may also find information in your Member Certificate and your Summary of Benefits and Coverage (SBC) documents. Contact the Customer Care Center with any questions about the process. *See page 6 for contact details.*

New Medical Technology

Each year, we evaluate new and existing medical technology to determine if any updates are needed. Drugs covered under your pharmacy benefit are also reviewed by a Prevea360 Health Plan medical director and pharmacists from Prevea Health and Navitus Health Solutions. Whether a product or process is reviewed before or after implementation, Prevea360 Health Plan follows the review process set by the National Committee for Quality Assurance (NCQA). Based upon the results of the technology assessment, Prevea360 Health Plan will revise its medical policies if necessary.

Privacy & Confidentiality

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 give us a call at 877.230.7555 (TTY: 711) to request a copy.

Learn more about your health insurance at
prevea360.com

Knowing the ins and outs Of your new health insurance.

It's important to know which network you belong to because your network informs where you can go for care.

Check the box of the insurance plan you signed up for through Prevea360 Health Plan. *If you're not sure, check your member ID card.*

- ☐ Prevea360 HMO Plan ☐ Prevea360 PPO Plan
☐ Prevea360 POS Plan ☐ Other:

This is my Prevea360 Health Plan member number:

If you're not sure, check your member ID card.

Here's the name and phone number of someone who helped me get my coverage:

For example, an HR representative through work or an insurance agent.

Name:

Phone:

It's important to know the coverage details of your plan. Visit prevea360.com/benefit-center to check out your Summary of Benefits and Coverage (SBC) document and write-in the following:

My deductible #: \$

My coinsurance #: \$

My deductible and coinsurance limit: \$

My copay for a Primary Care service: \$

My copay for an Emergency Room service: \$

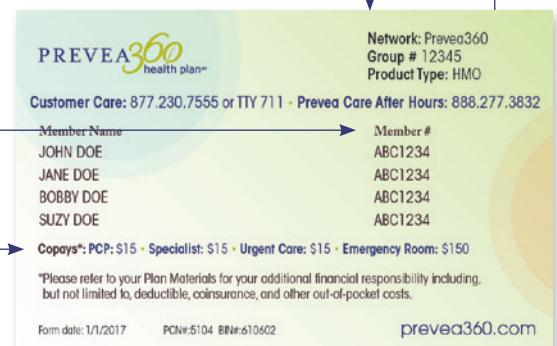
My monthly premium*: \$

* Usually paid through your work paycheck if you've enrolled in a plan through your job.

** Not all of these terms apply to every member's insurance plan. For definitions of these terms, see page 18.

This helpful worksheet is for your reference only. You are not required to complete it.

Your Member ID Card



Get the Right Care:

Your primary care physician (PCP) is the appropriate contact person for routine care needs. Your PCP can assist with preventive services, office visits and overall guidance to the right care.

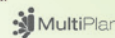
Urgent Care / Emergency Care: If you have serious medical needs, seek care at an urgent care center or emergency room. In life-threatening emergencies, dial 911 or seek immediate medical care.

24-Hour Prevea Care After Hours advice line (available to Wisconsin residents only): For care guidance outside of normal working hours, our 24-Hour Prevea Care After Hours center has registered nurses who can assist with care questions or guide you to the appropriate location for care.

Notify Prevea360 Health Plan for any emergency or out-of-state admissions. If outside of the Prevea360 network area, visit prevea360.com or call 877.230.7555 (TTY users dial 711) for a PHCS Healthy Directions or Multipian provider. Non-emergent care or routine follow-up care may not be covered outside of the Prevea360 service area.

Providers send claims to:

Prevea360 Health Plan
PO Box 56099
Madison, WI 53705



This card is for identification purposes and does not constitute proof of eligibility.

Finding and choosing your new Primary Care Provider (PCP).

Your PCP is your main contact for medical and preventive care. He or she:

- Provides care for a wide range of preventive and long-term health care
- Helps you stay healthier with regular visits, immunizations and screenings
- Handles your immediate care needs and more

For more PCP information, see page 12.

You should establish a relationship with a PCP. After all, he or she plays a major role in your health and wellbeing. **Think about the following when choosing the right one for you:**

Thinking about my busy schedule, I would prefer that my PCP be located:

- | | | |
|--|---|---------------------------------|
| <input type="checkbox"/> Close to home | <input type="checkbox"/> Close to school | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Close to work | <input type="checkbox"/> Close to daycare | |

I have a gender preference for my PCP:

- | | | |
|-------------------------------|---------------------------------|---|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Doesn't matter |
|-------------------------------|---------------------------------|---|

What are my main health goals, and does this PCP seem like he or she could help?

- | | | |
|--|--|---------------------------------|
| <input type="checkbox"/> I want to stop smoking | <input type="checkbox"/> I want to find more enjoyment in life | <input type="checkbox"/> Other: |
| <input type="checkbox"/> I want to have children | <input type="checkbox"/> I want to lose weight | |

There are different areas of medicine for different stages in life. A PCP usually focuses on one area of medicine, so think about what kind of PCP would best fit your needs. I want a PCP who focuses on:

- | | | |
|--|--|--|
| <input type="checkbox"/> Family medicine
care for anyone, at any age (from newborns to the elderly), with any health condition | <input type="checkbox"/> Pediatrics
care for newborn and childhood (age 19 and younger) health and development | <input type="checkbox"/> Internal medicine
same care as family medicine, for anyone age 18 and older |
| <input type="checkbox"/> Family medicine with obstetrics
care for the entire family, with an emphasis on delivering babies | | |

Visit prevea360.com and search with the above preferences in mind.

Once you've established a relationship with a PCP, fill in his or her contact information here for easy reference.

My PCP's name:

Name, location and phone number of my PCP's clinic:

My clinic's office hours:

If I had to take public transportation to the clinic, this is the best bus route:

Visit prevea360.com/clinic-locations to search for clinic hours and locations.

This helpful worksheet is for your reference only. You are not required to complete it.

Getting ready for a Primary care visit.



Copy this page
and use for
multiple visits
or people in
your family.

Your Primary Care Physician (PCP) is here to help you. The more he or she knows, the better treatment you'll receive. So get ready to have an honest and trusting conversation about your health and lifestyle. Fill out this worksheet ahead of time to help you prepare and bring it with you to take notes and write answers.

Bring in bottles of your current prescriptions, over-the-counter medications and supplements.

Tip: put them in a plastic bag so you can easily carry everything.

The main reason I need a primary care visit today:

- | | | |
|---|--|---------------------------------|
| <input type="checkbox"/> I want an Annual Preventive Office Visit to make sure I'm healthy. | <input type="checkbox"/> I want to get up-to-date on my immunizations. | <input type="checkbox"/> Other: |
| <input type="checkbox"/> I need a refill on my medications: | <input type="checkbox"/> I think I might have a medical problem: | |

Write the top questions you want to ask during your visit:

Example questions: What is my main problem? What do I need to do and why is it important for me to do that? Will I need any tests or labs? What are my treatment options? What are the benefits of each option?

1.	3.	5.
2.	4.	6.

Share your top health goals with your PCP or nurse. What are your top goals?

- | | | |
|---|---|---------------------------------|
| <input type="checkbox"/> I want to stop smoking. | <input type="checkbox"/> I want to lose weight. | <input type="checkbox"/> Other: |
| <input type="checkbox"/> I want to have healthy children. | <input type="checkbox"/> I want to find more enjoyment in life. | |

Ask about preventive care that can keep you healthy:

- | | | |
|--|--|--|
| <input type="checkbox"/> Do I need a blood pressure check? | <input type="checkbox"/> What foods should I avoid? | <input type="checkbox"/> Tell me more about checkups for depression and substance abuse. |
| <input type="checkbox"/> What immunizations are recommended? | <input type="checkbox"/> Where can I learn more about resources to stop using tobacco? | <input type="checkbox"/> Do I need any recommended cancer screenings? |

If a new medication is needed:

- | | | |
|--|--|---|
| <input type="checkbox"/> What is the name of the drug? | <input type="checkbox"/> Will this medicine interact with medicines that I'm already taking? | ➔ See "Taking medications to keep you healthy" worksheet for more tips and questions. |
| <input type="checkbox"/> Are there any side effects? | | |

This helpful worksheet is for your reference only. You are not required to complete it.

Taking medications

To keep you healthy.

Used incorrectly, some medications can do more harm than good. So whether you're starting a new prescription or shopping for cold medicine, remember that details do matter.

Ask the provider prescribing your medication these questions to make sure you're using it correctly:

1. What's the name of the medication?	3. How often should I take it, at what dosage, and when?	5. What side effects are possible?
2. What's the reason to take it (how does it help me)?	4. How long should I take it?	6. What should I do if side effects happen?

When you pick up the prescription, check that it is the same one you were prescribed.

Never chew, crush, break or dilute any capsules or tablets unless the directions say that you should.

Before taking over-the-counter medicine, check with your pharmacist to make sure it's safe in combination with any other medications you are taking.

Medication Tracker				
Medication	Dosage How much to take <i>Example: one pill</i>	Frequency How often to take <i>Example: once per day</i>	Prescribed by <i>Example: Dr. Smith</i>	Notes

This helpful worksheet is for your reference only. You are not required to complete it.

[illegible]



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prevea360.com

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