



2023

Individual & Family
Coverage Book

Your local health
coverage **partner**

PREVEA **360**
health planSM

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Have questions?
We are here to help.

CALL

By Phone

Contact our Customer Care Center for questions about your benefits and more.

877-230-7555 (TTY: 711)

Monday – Thursday, 7:30 am – 5 pm

Friday, 8 am – 4:30 pm

CLICK

Visit prevea360.com/get-help

ENROLL

Find the best plan for you!

Visit prevea360.com/enroll2023

For more ways to enroll, see page 14.

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.



Coordinated, Physician-led Coverage and Care

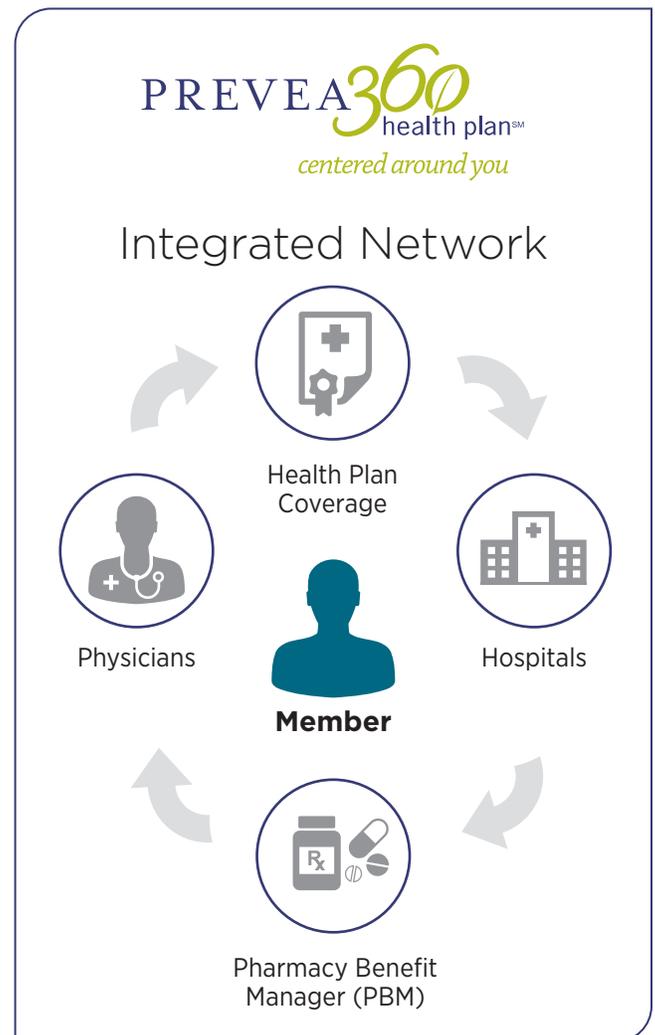
Prevea360 Health Plan addresses the challenge of creating a long-term, sustainable health care solution by transforming the health care model. With its coordinated approach and focus on the doctor-patient relationship versus insurance company profits, Prevea360 Health Plan brings an innovative model of care and coverage to Wisconsin. Primary care physicians and specialists across Prevea360 Health Plan's network collaborate to provide the best personalized care possible. It's insurance that members can feel great about.

Quality Matters

You want 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 health care services?

Call our Customer Care Center at
877-230-7555 (TTY: 711)

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.

Choose benefits that go above and beyond 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 preventive care philosophy is a promise you will get the support needed to remain healthy.



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.



Powerful Tools

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



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.**



Exceptional Support

When you have coverage questions or needs, our knowledgeable Customer Care Team is just a call away.



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. Visit prevea360.com/pharmacy to learn more and enroll.



Care Around The Clock

Prevea Health Care After Hours* is available any time you need a little health advice. Our staff is available **365 days of the year.**



\$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



Split the Tablet, We'll Split the Copay

Tablet splitting can provide significant savings for you, depending on your prescription and dose. Using this service can save you up to 50% on your usual copay for select medications†.



Preferred Diabetic Supply Savings

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



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 every month 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



Preferred Insulin Savings

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

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

** *Through the Affordable Care Act, all groups have access to \$0 cost preventive drugs.*

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

** *HDHP members do not have to meet their deductible first.*

Be A Healthier You

Your comprehensive wellness program



Prevea360 Health Plan in partnership with WebMD offers a variety of programs focusing on the whole person across eight dimensions of wellness, making healthy living achievable and fun.

Wellness Programs and Features

Health Assessment

Based on your individual questionnaire results, WebMD provides recommendations for each lifestyle category. A variety of interactive self-management tools are customized to your needs.

Case Management

Provides support through complex health situations.

Wellness Care Package

A monthly brochure highlighting programs, education and health observances.

Partner Perks

Discounts for gyms, spas, golfing, devices, equipment, nutrition and more.

Nicotine Cessation

Nicotine cessation and vape free programs for families. Free medications may be available.

R.E.A.L. Goals (Realistic, Easy, Attainable, Life Goals)

Preset goals covering all eight dimensions along with tips and trackers to help you achieve success.

Preventive Health Toolkits

Download our toolkits that include education and awareness for many national observances and seasonally-appropriate topics.

Events Calendar

Access live monthly Book Club discussions, Move with a Doc, Learning Loft, and more webinars covering the eight dimensions of wellness. Events are virtual, and you can attend from anywhere. Learn more at prevea360.com/events

Nutrition

Members can access WebMD resources, challenges, webinars and a monthly Made from Scratch newsletter.



Your lowest risks are...



Emotional Health



Tobacco



Cervical Cancer Screening

You should work on...



Blood Pressure



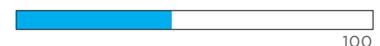
Stress



Safety

Optimal YOU is 100

You scored a 41 out of 100



Health Assessment Example

Additional Wellness Programs

Learn more at...

prevea360.com/wellness

Resources and rewards to help you achieve your health and wellness goals.

Behavioral Health

1 in 5 adults experience mental illness in their life. If you or someone you know needs help, know you are not alone. Prevea360 Health Plan offers a spectrum of support, services and treatment options within our network. Visit prevea360.com/behavioralhealth to access our resources.

Living Healthy Rewards:

A focus on Preventive Health Services

Prevention or early detection of common diseases is the best way to be the healthiest you and earn up to **\$150 in rewards!** Earn points and money for taking care of you!

Here's how it works:

1. Choose the healthy activities you want to complete
2. Each completed activity is worth reward points (example: 500 points = \$50)
3. Earn up to 1,500 points for a maximum of \$150* per calendar year (before December 31, 2023)
4. Rewards come in the form of gift card(s) of your choice to many national retailers, restaurants and other popular merchants

Preventive Health Services

Prevention or early detection of common diseases is the best way to be the healthiest you. The list below includes some of the more common preventive and screening services proven to improve health, but it is important to check with your primary care provider to determine which tests are appropriate for you, based on your medical history and family history. Earn points for taking care of you!

- **Immunizations:** Influenza, Varicella, Tetanus, Meningococcal and Pneumococcal
- **Cancer screenings:** Mammogram, Colon Cancer (FIT testing, Cologuard, Colonoscopy) and PAP smear
- **Other screenings:** Chlamydia, Gonorrhea, HIV, Hepatitis C, Diabetes and Depression

* Only Prevea360 Health Plan members, ages 18 and older, are eligible for Living Healthy Rewards.

LivingHealthy

POWERED BY **WebMD** health services



Sync device with your Living Healthy account



Join a wellness challenge



Check in with your mental health



Engage in your community

Visit prevea360.com/livinghealthy to access your resources and start your Health Assessment today!

* Prevea360 Health Plan members age 18 and older are eligible for Living Healthy rewards. Covered adult children (ages 18 and older) can earn up to \$100 per year. Visit prevea360.com/livinghealthy for full details.

Prevea360 Health Plan Network

Need assistance reading this map?

Call our Customer Care Center at **1-877-230-7555 (TTY:711)**

Prevea360 Health Plan has you covered with in-network local hospitals and urgent care centers, and conveniently-located primary care sites in 8 counties throughout northern Wisconsin. With so many choices, we're certain you'll find a provider who will be a great fit, and right in your backyard.

We offer a current and comprehensive listing of physicians, specialists, pharmacies and more at prevea360.com/doctors. Important contact information such as phone numbers and locations are listed on our website.



Convenient Tools and Resources

Get the information you need, when you need it. Find it all on prevea360.com and within member tools that easily connect you to health information, benefit details and much more.



■ Member Portal

Your online member portal

Visit prevea360.com/login and use your member number located on your ID card to activate your account.

- View 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

■ MyChart

Your online health record

Visit prevea360.com/mychart to activate your account.

- Send and receive secure messages with your primary care provider
- Schedule appointments
- Get lab results
- Request prescription refills and more
- View and pay your medical bill

Where to go for Care

Still not sure of the type of care you need?

Members can call the Prevea Care After Hours at **888-277-3832**.

A nurse is ready to help 24/7/365.

As a member, you will have a variety of ways to receive care no matter what day of the week it is, if it is during regular office hours or the middle of the night. Knowing your care options in advance is not just good for your health, but it can also save you money.

The Right Care for Your Needs

Knowing your care options before you need them saves you time and money



Understanding the Basics of Health Coverage

Health coverage is complicated, so we're going to walk you through the basics.

Essential Health Benefits

are defined as the ten benefits that individual plans must cover. Depending on the type of plan you purchased, services associated with Essential Health Benefits may still require cost sharing in the form of copays, coinsurance and deductibles.

- Preventive (below), wellness and disease management services
- Emergency care
- Hospitalization
- Ambulatory care
- Maternity and newborn services
- Prescription drug coverage
- Pediatric services
- Laboratory services
- Rehabilitative and habilitative services
- Mental health and substance abuse services, including behavioral health treatment



Preventive Services

are services provided with no copays, coinsurance or deductibles when delivered by a network provider, and when all preventive services criteria are met.

- Routine vaccines
- Flu & pneumonia vaccines
- Preventive care visits
- Blood pressure, cholesterol and diabetes screenings
- Colorectal cancer screening (50+)
- Mammography screenings (once per year for 40 years of age and older)



For a more comprehensive list, visit prevea360.com/preventivecare

Prescription Coverage

includes programs to make filling prescriptions easier and save you money along the way. Prescription coverage benefits vary from plan to plan.



For more information visit prevea360.com/medications



■ Primary Care Provider (PCP)

Your Care Team is committed to working with you to build a relationship of trust. Trust combined with their training and experience means you have a true health advocates who care. **Your care team:**

- Consists of your primary care providers
- 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
- Coordinates needed specialist care
- Coordinates your health care with other medical experts

Visit prevea360.com/doctors to search our online provider directory for an available primary care provider. 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.

Find an in-network provider at
prevea360.com/doctors

■ Coordinated Care



Prevea360 Health Plan is part of an integrated delivery network with Prevea Health and HSHS Hospitals, which unites physician, hospital and health insurance solutions to reduce health care costs, improve quality and deliver a better member and patient experience for you.

■ In-network Provider

The network of facilities, providers, and suppliers to provide health care services that have negotiated and agreed to better rates for service. By staying in your plan's network for your care, you'll likely pay less in overall costs.

■ Out-of-network Provider

A provider or facility that has no contract with your health plan and can charge you full price for any health care services received.

Enrolling in Individual and Family Coverage

Enroll today at

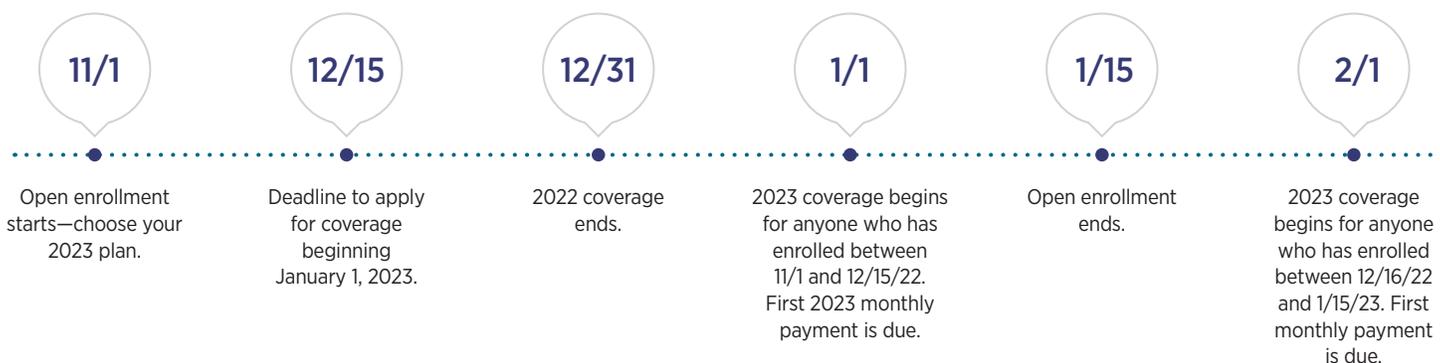
prevea360.com/enroll2023

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, 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, 2022. After that, you will need to wait for the next open enrollment period in November 2023, unless a qualifying event occurs and you are eligible for special enrollment (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. Need help determining if you should buy a Marketplace or Direct plan? See below.

Prevea360 Health Plan Direct Plan Enrollment

Visit prevea360.com/direct

- Enroll online
- Or download a paper application and mail it to Prevea360 Health Plan

Visit a licensed Health Insurance Agent

- Enroll in-person

Prevea360 Health Plan Marketplace Plan Enrollment

Visit prevea360.com/marketplace

- Enroll online

Visit a licensed Health Insurance Agent

- Enroll in-person

Visit healthcare.gov

- Enroll online at the ACA Marketplace

Marketplace vs. Direct Plans

Let's explore these two plan options.

Individual and family coverage is available to purchase through the Marketplace or off-exchange, directly from Prevea360 Health Plan. While plans that are available in both places generally mirror each other, direct plans don't provide premium subsidies. Learn more about which type of plan you should enroll in or to determine if you qualify for these subsidies, visit prevea360.com/calculator



Do you need to shop on the Health Insurance Marketplace for 2022?



Yes

If you're uninsured, underinsured or you'd like to change the plan you previously purchased on the Marketplace, explore your options at prevea360.com/marketplace



Maybe

If you're looking for a better option than the plan you purchased through the Marketplace for 2020, compare it with Prevea360 Health Plan and others at prevea360.com/marketplace

If you are already a member, explore your options at prevea360.com/marketplace



No

If you're happy with your current Marketplace coverage, you'll be automatically re-enrolled in your plan, or a similar plan.

Other Coverage Options

- If you need individual and family health insurance, but do not qualify for premium subsidies. Direct plans from Prevea360 Health Plan will include additional benefits such as travel immunizations and adult eye exams. Learn more at prevea360.com/direct
- If you're on Medicare, you don't need to visit the Marketplace.
- If you're insured by your employer, you can stay on your group plan.

Help Choosing the Best Plan for You

Prevea360 Health Plan is all about options, so pick the plan option that's best for you. One route is to select a plan with lower premiums and higher copays. Another may have higher premiums and lower copays.

We can help if you have questions. Whichever plan you choose, it will fall into a metal category. These help categorize plans according to how much you can expect to pay in monthly premium and when you receive medical services. See page 19 for more information.



Copay Plus

Get the coverage you need and the cost predictability you prefer! You don't like surprise bills? This may be the plan for you. The Copay Plus plans feature:

- Low copays for office visits and many prescription drugs
- Affordable deductible and coinsurance options
- An easy way to build a relationship with a provider



Copay PCP

The best value for the care you receive the most!

You keep yourself healthy with regular visits to your PCP. Our Copay PCP plans keep your premiums low, and offer you the best value for your regular PCP visits and generic prescription drugs.

- Affordable primary care and generic drug copays to cover your health concerns and maintenance
- Affordable deductible and coinsurance options
- An easy way to maintain or build your relationship with your provider
- Lower monthly premium savings



Value Copay

Perhaps you prefer the lower premiums of a high-deductible plan as well as low out-of-pocket costs when you visit the doctor. We have you covered with our Value Copay Plan options.

- Three affordable office visit copays to cover unexpected health concerns
- Lower copays on generic prescription drugs with most plans
- Overall monthly premium savings while making it easy to establish a relationship with your provider

Copay PCP, Standard and Safety Net plans are *only* available to Marketplace members



Standard

Simplify your shopping experience with standard plans.

Standard plans make it easy to shop across all of the important services you need. Our standard plans are offered at every network type, metal tier, and in every service area that we offer coverage.



Safety Net

Your goal is to protect yourself from medical bankruptcy in the event of an unexpected catastrophic illness or injury.

Consider jumping into our Safety Net Plan that offers a high deductible and three FREE office visits. Remember that government affordability programs are not available with the Safety Net Plan.

Our Safety Net Plan is available for those who:

- are under age thirty
- or meet certain income guidelines
- and are comfortable with their health status



HSA-eligible

Looking to save even more?

You're a saver and prefer to take advantage of a Health Savings Account (HSA) to cover your medical bills. We have excellent choices for you! Eligible individuals can combine a qualifying high-deductible health plan (HDHP) with an HSA for more financial freedom and flexibility. Just visit **prevea360.com** and purchase one of our HSA-eligible Individual & Family plans. For questions regarding an HSA plan, call us at **877-230-7555 (TTY: 711)**.

- Provide multiple options for combining a qualifying HDHP with an HSA
- Grow health care savings — no “use it or lose it” rule
- Receive tax savings

Health Coverage Affordability Programs

Financial help is available!

Learn more at prevea360.com/calculator

Having health coverage means peace of mind in knowing you have coverage.

Depending on your income and personal situation, you may be eligible for a variety of discounts and subsidies, too. Visit prevea360.com/calculator 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 most Marketplace plans. When you visit prevea360.com/calculator and begin shopping plans, your tax credit allowance will be calculated for you.

■ Cost Sharing Reduction Plans

These plans are only available on **silver plans** for those who make **\$33,975 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
- Most 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

You can use metal tiers to help determine which type of plan is right for you. No matter where you purchase your plan, it will be categorized using metal tiers.

Metal Tiers				
				
	Platinum	Gold	Silver	Bronze
Monthly cost	\$\$\$\$	\$\$\$	\$\$	\$
Cost when you get care	\$	\$\$	\$\$\$	\$\$\$\$
Maximum out-of-pocket expenses	\$	\$\$	\$\$\$	\$\$\$\$
Good option if you...	Plan to use a lot of health care services	Want to save on monthly premiums while keeping out-of-pocket costs low	Need to balance monthly premium with out-of-pocket costs	Don't plan to need a lot of health care services

Federal Poverty Level (FPL)

It's important to check if you qualify for one or more of these programs based on your income level. The following table shows the FPL guidelines, but an agent or one of our representatives can help you if you're not sure.

2022 Federal Poverty Level Guidelines			
Size of Household	Percentage of Federal Poverty Level		
	100%	250%	400%
1 	\$13,590	\$33,975	\$54,360
2 	\$18,310	\$45,775	\$73,240
3 	\$23,030	\$57,575	\$92,120
4 	\$27,750	\$69,375	\$111,000
Coverage Information	May qualify for cost-sharing reductions and advance premium tax credits	May qualify for cost-sharing reductions and advance premium tax credits	May qualify for advance premium tax credits

General Limitations & Exclusions

All benefits are subject to limitations and exclusions as described in your Schedule of Benefits and in your Policy and Benefit Summary (“Policy”).

The following list is not exhaustive and may vary based on your Policy. For a complete listing refer to your Policy.

- Court-ordered drug testing unless Medically Necessary
- Cytotoxic testing and sublingual antigens associated to allergy testing
- Hair analysis (unless lead or arsenic poisoning is suspected)
- Preimplantation genetic testing of embryos and gametes
- Convenience items for a Member or a Member’s family, unless stated otherwise in this policy
- Drugs provided or administered by a physician or other provider, except those drugs that meet the definition of Professionally Administered Drugs.
- Infertility drugs including, but not limited to, those administered by a medical provider
- Outpatient prescription drugs, except those prescriptions otherwise covered under this Policy
- Oral Nutrition: Oral nutrition is not considered a medical item. We do not cover nutritional support that is taken orally (i.e., by mouth), unless mandated by state law or covered under our medical policy for a specific condition. Examples include, but are not limited to, over-the-counter nutritional supplements, infant formula, and donor breast milk
- Replacement of an item if the item is lost, stolen, unusable or nonfunctioning because of misuse, abuse, or neglect
- Sexual dysfunction supplies, including but not limited to medications and injections
- Autopsy
- Charges directly related to a non-covered service, such as hospitalization charges, except when a complication results from the non-covered service that could not be reasonably expected and the complication requires medically necessary treatment. The treatment of the complication must be a covered benefit
- Consultation, treatment, for Assisted Reproductive Technology (ART)
- Cosmetic services, including cosmetic surgery
- Experimental or investigational services, treatments, or procedures, and any related complications as determined by us, unless coverage is required by state or federal law
- Infertility-related services and procedures
- Non-medical services provided in a Hospital or medical setting, not otherwise listed as covered in this Policy
- Items that can be purchased over the counter and considered to be for comfort, convenience and/or personal hygiene, examples include, but are not limited to: seasonal affective disorder light units, disposable undergarments, wigs and modification to a Member’s home such as ramps, grab bars, stair lifts and bench/ chair lifts
- Medical and surgical treatment of excessive sweating (hyperhidrosis)
- Podiatry services or routine foot care rendered provided when there is no localized illness, injury, or symptoms. These include, but are not limited to: 1. the examination, treatment, or removal of all or part of corns, calluses, hypertrophy or hyperplasia of the skin or subcutaneous tissues of the feet; 2. the cutting, trimming, or other non-operative partial removal of toenails; or 3. for any treatment or services in connection with any of these
- Obesity-related services, including any weight loss method, surgical treatment or hospitalization for the treatment of obesity, unless specifically covered under this policy
- Reversal of voluntary sterilization and related procedures
- Services, treatment, and supplies provided to a Member while the Member is held or detained in custody of law enforcement officials, or imprisoned in a local, state, or federal penal or correctional institution
- Services and supplies furnished by a government plan, hospital, or institution the law requires you to pay
- Services, treatment, and supplies provided in connection with any illness or injury caused by: a) a Member’s engaging in an illegal occupation or b) a Member committing or attempting to commit, a felony.



(Note that this exclusion does not apply to the treatment of injuries that result from an act of domestic violence, if that treatment would otherwise be covered)

- Services provided by Members of the subscriber's immediate family or any person living with the subscriber
- Services or supplies associated to a denied Prior Authorization
- Services or supplies associated to a denied admission
- Services or supplies not Medically Necessary, not recommended or approved by a provider, or not provided within the scope of a provider's license
- Services or items provided as a result of war or any act of war, insurrection, riot or terrorism
- Services or supplies provided for an injury sustained while performing military service
- Services or supplies for which a Member receives or is entitled to receive any benefits, settlement, award, or damages, or following any claim under, any Workers' Compensation Act, employer's liability insurance plan, or similar law or act. "Entitled" means the Member is actually insured under Workers' Compensation
- Surrogacy services, for a non-Member
- Sexual dysfunction treatment and services including, but not limited to surgery
- Take home drugs and supplies unless a written prescription is obtained and filled at a network pharmacy
- Acupuncture
- Chelation therapy for atherosclerosis
- Coma stimulation programs
- Alternative medicine, not otherwise listed in the Policy
- Low level light therapy
- Massage therapy
- Prolotherapy
- Swim or pool therapy, unless Prior Authorization is obtained

- Administrative examinations such as employment, licensing, insurance, adoption, or participation in athletics
- Court-ordered care, unless medically necessary and otherwise covered under this Policy
- Educational services, except for diabetic self-management classes
- Internet consultations, including all related charges and costs, except as defined by our medical policy
- Missed appointment charges
- Telephone consultation charges between providers
- Charges or costs exceeding a benefit maximum or maximum allowable fee, where applicable
- Expenses incurred before the supply or service is actually provided unless Prior Authorized by Us

This notice was last updated June 2022.

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 with an out-of-network provider, you will need to get prior authorization.* We require these authorizations so our Medical Affairs team can make sure you are getting the appropriate care.

*HMO members will need to get prior authorization any time they seek services with an out-of-network provider. Plan providers request prior authorization for POS and PPO members

Prevea360 Health Plan is Here For You

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.

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.

■ 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 **877-230-7555** to request a copy.

For more information on coverage, benefits, and processes for your plan, please visit prevea360.com/newmember or call **877-230-7555**.

■ 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 **877-230-7555**.



Have questions? We are here to help

Call

Call our Customer Care Center for questions about benefits and more at **877-230-7555 (TTY: 711)**
Monday – Thursday, 7:30 am – 5 pm
Friday, 8 am – 4:30 pm

Click

Visit prevea360.com/get-help



Enroll

There are a variety of ways to enroll in a new individual and family plan, both digitally or with the help of an agent. Learn more at prevea360.com/enroll2023

Follow us on LinkedIn and Facebook



Prevea360 Health Plan

PO Box 56099
Madison WI 53705-9399
Toll-free **877.230.7555 (TTY:711)**
prevea360.com

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