

HOW TO MAKE THE MOST OF MY HEALTH BENEFITS

1. PREVENTATIVE CARE:

Preventative Care is paid at 100%, no co-payments are collected, regardless of what plan you are enrolled in. Preventative Exams include:

Mammograms Colonoscopy Pap Smears
Well Baby Care Annual Physical Exams

2. DOCTORS ON DEMAND:

Connect with a doctor right from your phone, tablet or computer on demand or by appointment - 365 days a year, 24/7. Through live video, hand-picked doctors review symptoms and medications, perform an exam, and may recommend treatment, including prescriptions and lab work. These board-certified doctors can treat a wide variety of health conditions, including:

Colds & Allergies Migraines UTI's
Eczema & Acne Prescription Refills
Heartburn & Indigestion Pink Eye & More

3. GRAND ROUNDS:

Grand Rounds, FREE TO ALL WCSD INSURED MEMBERS, is available to members when you need:

AN EXPERT: You can receive a second opinion or a personalized care plan from a world-leading expert without leaving home.

ANSWERS: Grand Rounds will tell you everything you need to know about a new diagnosis or existing condition.

SUPPORT: Grand Rounds will help you decide if surgery is right for you.

4. HOW TO SAVE MONEY BY USING THE PRESCRIPTION DELIVERY SERVICE:

Prescription Delivery Service offers free delivery of medications to a convenient place - home, work, or doctor's office. This service is recommended if you take a medication on an ongoing basis. You will receive a 90 day supply (3 months) for only two months co-pay. That is like receiving one month for free! Here is how to register:

Online: For 24/7 access to your benefit and prescription information, register at www.WelldyneRx.com.

By Mail: Complete the Prescription Delivery Service Registration Form and mail to WelldyneRx. Please contact the Risk Management Department for this form.

5. HOW TO SHOP AROUND FOR THE CHEAPEST PRESCRIPTION:

No matter which plan you are on, the EPO, PPO or QHDHP, it is always a good idea to shop around when receiving a prescription. When you are on the EPO or PPO plan, you only have a co-pay, but the portion that is paid by the District (your health insurance), can depend on where you choose to have your prescription filled. By checking and having your prescription filled at the lowest cost pharmacy, it will save you money if you are on the QHDHP, but it will also save the District money, no matter which plan you are covered on. Here is how you can check prescription costs:

GOODRX: Download the APP and begin saving money for you and the plan!

6. DENTAL:

The District pays for each Active employee, a comprehensive dental plan. You have the following benefits with this plan:

Three (3) Free Teeth Cleaning appointments per year.

\$2,000 Calendar Year Maximum for all dental services.

7. GAP COVERAGE - WHAT IS IT AND HOW CAN I SAVE MONEY:

The Gap Plan (not available to those on the QHDHP) is a supplemental insurance plan through American Fidelity Assurance Company, which is designed to help cover certain out-of-pocket expenses. If you incur a medical expense, you file a claim with American Fidelity by completing a claim form on-line, or mailing in a claim form, attaching a copy of your EOB (explanation of benefits). American Fidelity will do the rest. You can file your claim at any time and go back as many years as needed as long as you can provide the required EOB. Here are some of the out-of-pocket expenses you can claim:

OUT-PATIENT BENEFIT - this benefit is payable for actual out-patient expenses you incur up to a maximum benefit of \$200 for services in a hospital emergency room, outpatient surgery and diagnostic testing.

DOCTOR BILL BENEFIT - The doctor benefit is payable for doctor visits. This benefit pays \$25.00 per visit, up to 5 visits (\$125.00) per family per calendar year.

8. VISION COVERAGE FOR THE WHOLE FAMILY:

Covers whole family - regardless if they are on your insurance.

Covers Dependents up until age 26.

Eye exam every 12 months - \$10 copay

Lenses/Frames/Contacts every 24 months (2 years)

9. QUALIFIED HIGH DEDUCTIBLE HEALTH PLAN/HEALTH SAVINGS ACCOUNT:

The District has three medical plan options to include EPO, PPO and the QHDHP (Qualified High Deductible Health Plan). The QHDHP has a \$2,700 deductible per year for an individual and \$5,000 deductible per year for family. All medical and prescription expenses would go toward that deductible. Once the deductible is met, claims are paid at 80%. To help offset some of the costs of the deductible the District will contribute \$1,610 into a Health Savings Account (HSA). This contribution is increasing to \$1,805 in 2019. The money in the health savings account is yours to keep even if you should leave or retire from the District. Here are some highlights of the plan:

District contributes into a Health Savings Account \$1,610 in 2018 and \$1,805 in 2019.

Health Savings Account is yours for life, even if you retire or leave the District.

HSA Money is to be used for medical expenses.

You can contribute money into your health savings account on a tax free basis.

The deductible is \$2,700 per year for an individual and \$5,000 for family.

All medical and prescription claims go towards deductible.

Preventative Services, such as mammogram, pap smear, well baby care, etc., are still covered at 100%.

For questions please contact Risk Management
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