

EMPLOYEE BENEFITS ENROLLMENT GUIDE

January 1, 2023



www.aga-tpa.com

7605 Westfield Drive
Fort Wayne, IN 46825

1-800-888-6472
fax 260-489-0365

This is an outline of benefits and not to be determined as a contract, for further definitions of covered benefits, see the Summary Plan Description

Table of Contents

I.	ELIGIBILITY	2
II.	MEDICAL AND PRESCRIPTION COVERAGE	3
III.	PLAN FEATURES	7
	Magellan Rx.....	8
	Paydhealth	13
	HealthiestYou	14
	Care Concierge Line.....	16
	Chronic Care Program.....	17
	Healthy Track Genesis Meter.....	18
	Lab Service Program.....	19
	Direct Imaging.....	20
	Daavlin Home Phototherapy.....	21
	QicLink Benefits Exchange	22
IV.	CHILDREN’S HEALTH INSURANCE PROGRAM & MEDICAID (CHIP) NOTICE	23

Eligibility

Eligibility Date:



Coverage begins immediately upon the date of employment. Eligible employees will be defined through employer contract requirements.

Open Enrollment Period:



An open enrollment period will occur during the month of November, with coverage to be effective January 1.

Special Enrollment Period:



A special enrollment period is a thirty (30) day period during which a person, who declined coverage when eligible, becomes eligible again to enroll because of a qualifying event. Examples of a qualifying event are: marriage, divorce, birth or adoption of a child, or loss of eligibility of coverage on another plan.

Dependent Children:



Children to age 26 are eligible for coverage. Children are not required to be in school, may be married and eligibility is not restricted based upon residence or tax status.

West Noble School Corporation

Employee Benefits Summary Review – Plan 1

Traditional Health Plan – Non-Grandfathered

To receive maximum benefits from your medical insurance coverage, you must use a doctor, EPO hospital or facility that is part of the Network. To locate a Signature Care Provider: 1-800-666-4449 or www.parkview.com/signaturecaredirectory
Pre Certification: Managed Care Concepts 1-866-750-2723

Benefits Effective: January 1, 2023

Benefits	EPO Hospital, PPO Providers, No PPO Provider or Hospital Available	PPO Hospital	NON-PPO Providers
Calendar Year Deductible (Embedded)	\$1,500 Individual / \$3,000 Family	\$2,500 Individual / \$5,000 Family	\$4,500 Individual / \$9,000 Family
Co-Insurance Benefit	100%	90%	70%
Out of pocket maximum *	\$0 Individual / \$0 Family	\$3,000 Individual / \$6,000 Family	Unlimited
Lifetime Maximum	Unlimited lifetime maximum Unlimited Plan year maximum		
Preventive Care (ACA Preventive) Routine physical exam, pap tests, Immunizations, etc.	100% Benefit; not subject to deductible	100% Benefit; not subject to deductible	Deductible, then 30%
Physician Office Visit	Deductible, then 0%	N/A	Deductible, then 30%
Hospital Services	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Maternity Services	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Urgent Care Visit	Deductible, then 0%	N/A	Deductible, then 30%
Emergency Room	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Ambulance Services	Deductible, then 0%	N/A	Deductible, then 30%
Chiropractic Services Limited to 52 visits per calendar year	Deductible, then 0%	N/A	Deductible, then 30%
Physical, Occupational & Speech Therapy	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Mental Health, Alcohol & Substance Abuse Outpatient Care Inpatient Care	Deductible, then 0% Deductible, then 0%	Deductible, then 10% Deductible, then 10%	Deductible, then 30% Deductible, then 30%
Laboratory Services If lab card used: 100% benefit, not subject to deductible	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Retail and Mail Order Prescription Drugs	Prescription Drugs Out of Pocket Maximum \$7,050 Individual / \$14,100 Family **		
Prescription Drugs** Retail 34 Day Supply	\$4 copay; generic \$20 copay; formulary brand \$40 copay; non-formulary brand	N/A	Not Covered
Prescription Drugs** Mail Order 90 Day Supply	\$10 copay; generic \$50 copay; formulary brand \$100 copay; non-formulary brand	Not Covered	Not Covered
Injectable & Infusion Drugs Specialty Pharmacy	Deductible, then 0% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Deductible, then 10% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Not Covered
<ul style="list-style-type: none"> * The out-of-pocket limit does NOT include premiums, deductibles, Rx Copays, balance-billed charges, pre-cert penalties and excluded charges. Balance billing protection when you use a Network PPO provider In-Patient hospital admission and many out-patient procedures require mandatory notification to Managed Care Concepts: 1-866-750-2723 			
Third Party Administrator: Automated Group Administration • 7605 Westfield Drive • Fort Wayne, IN 46825 • (260)489-6447 (800)888-6472 • (260) 489-0365 Fax			
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Please contact the Automated Group Administration Customer Service Line with any questions or concerns you may have. 1-800-888-6472



West Noble School Corporation

Employee Benefits Summary Review- Plan 2

High Deductible Health Plan (H.S.A. Qualified) – Non-Grandfathered

To receive maximum benefits from your medical insurance coverage, you must use a doctor, EPO hospital or facility that is part of the Network. To locate a Signature Care Provider: 1-800-666-4449 or www.parkview.com/signaturecaredirectory

Pre Certification: Managed Care Concepts 1-866-750-2723

Benefits Effective: January 1, 2023

Benefits	EPO Hospital, PPO Providers, No PPO Provider or EPO Hospital Available	PPO Hospital	NON-PPO Providers
Calendar Year Deductible (Embedded)	\$3,000 Individual / \$6,000 Family	\$4,000 Individual / \$8,000 Family	\$6,000 Individual / \$12,000 Family
Co-Insurance Benefit	100%	90%	70%
Out of pocket maximum *	\$4,000 Individual / \$8,000 Family	\$7,000 Individual / \$14,000 Family	Unlimited
Lifetime Maximum	Unlimited lifetime maximum / Unlimited plan year maximum		
Preventive Care (ACA Preventive) Routine physical, pap tests, Immunizations, etc.	100% Benefit; not subject to deductible	100% Benefit; not subject to deductible	Deductible, then 30%
Physician Office Visit	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Urgent Care Office Visit	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Hospital Services	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Maternity Services	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Emergency Room (Copay Waived if Admitted)	Deductible, then \$250 Copay	Deductible, then \$250 Copay, then 10%	Deductible, then \$250, then 30%
Ambulance Services	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Chiropractic Services Limited to 52 visits per calendar year	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Physical, Occupational & Speech Therapy	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Mental Health, Alcohol & Substance Abuse Inpatient Outpatient	Deductible, then 0% Deductible, then 0%	Deductible, then 10% Deductible, then 10%	Deductible, then 30% Deductible, then 30%
Laboratory Services If Lab Card used: DISCOUNT AVAILABLE	Deductible, then 0%	Deductible, then 10%	Deductible, then 30%
Prescription Drugs	MAJOR MEDICAL DEDUCTIBLE FIRST**		
Prescription Drugs** Retail 34 Day Supply DEDUCTIBLE FIRST	Deductible then, Generic: \$0 copay Formulary: \$30 copay Non-formulary: \$50 copay	Deductible then, Generic: \$0 copay Formulary: \$30 copay Non-formulary: \$50 copay	Not Covered
Prescription Drugs** Mail Order 90 Day Supply DEDUCTIBLE FIRST	Deductible then, Generic: \$0 copay Formulary: \$75 copay Non-formulary: \$125 copay	Not Covered	Not Covered
Injectable & Infusion Drugs Specialty Pharmacy	Deductible, then 0% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Deductible, then 10% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Not Covered

- * The out-of-pocket limit does not include premiums, deductibles, balance-billed charges, pre-cert penalties, excluded charges
- Balance billing protection when you use a Network Provider
- In-Patient hospital admission and many out-patient procedures require mandatory notification to Managed Care Concepts: 1-866-750-2723

This is an outline of benefits and not to be determined as a contract, for further definitions of covered benefits, see the Summary Plan Description

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West Noble School Corporation

Employee Benefits Summary Review – Plan 3

Traditional Health Plan – Non-Grandfathered

To receive maximum benefits from your medical insurance coverage, you must use a doctor, EPO hospital or facility that is part of the Network. To locate a Signature Care Provider: 1-800-666-4449 or www.parkview.com/signaturecaredirectory
Pre Certification: Managed Care Concepts 1-866-750-2723

Benefits Effective: January 1, 2023

Benefits	EPO Hospital, PPO Providers, No PPO Provider or Hospital Available	PPO Hospital	NON-PPO Providers
Calendar Year Deductible (Embedded)	\$6,200 Individual / \$12,400 Family	\$7,200 Individual / \$14,400 Family	Unlimited
Co-Insurance Benefit	60%	50%	0%
Out of pocket maximum *	\$650 Individual / \$1,300 Family	\$3,650 Individual / \$7,300 Family	Unlimited
Lifetime Maximum	Unlimited lifetime maximum Unlimited Plan year maximum		
Preventive Care (ACA Preventive) Routine physical exam, pap tests, Immunizations, etc.	100% Benefit; not subject to deductible	100% Benefit; not subject to deductible	Not Covered
Physician Office Visit	Deductible, then 40%	N/A	Not Covered
Hospital Services	Deductible, then 40%	Deductible, then 50%	Not Covered
Maternity Services	Deductible, then 40%	Deductible, then 50%	Not Covered
Urgent Care Visit	\$150 Copay, Deductible, then 40%	N/A	Not Covered
Emergency Room (Copay Waived if Admitted)	\$800 Copay, Deductible, then 40%	\$800 Copay, Deductible, then 50%	Not Covered
Ambulance Services	Deductible, then 40%	N/A	Not Covered
Chiropractic Services	Not Covered	Not Covered	Not Covered
Physical, Occupational & Speech Therapy	Deductible, then 40%	Deductible, then 50%	Not Covered
Mental Health, Alcohol & Substance Abuse Outpatient Care Inpatient Care	\$100 Copay Deductible, then 40%	\$100 Copay Deductible, then 50%	Not Covered Not Covered
Laboratory Services If lab card used: 100% benefit, not subject to deductible	Deductible, then 40%	Deductible, then 50%	Not Covered
Retail and Mail Order Prescription Drugs			
Prescription Drugs Retail 34 Day Supply	\$60 copay; generic \$120 copay; formulary brand Deductible, then 40% copay; non-formulary brand	N/A	Not Covered
Prescription Drugs Mail Order 90 Day Supply	\$150 copay; generic \$300 copay; formulary brand Deductible, then 40% copay; non-formulary brand	Not Covered	Not Covered
Injectable & Infusion Drugs Specialty Pharmacy	Deductible, then 40% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Deductible, then 50% Does not apply towards out of pocket maximum if Specialty Pharmacy is not used	Not Covered
<ul style="list-style-type: none"> * The out-of-pocket limit does NOT include premiums, deductibles, balance-billed charges, pre-cert penalties and excluded charges. Balance billing protection when you use a Network PPO provider In-Patient hospital admission and many out-patient procedures require mandatory notification to Managed Care Concepts: 1-866-750-2723 <p>Third Party Administrator: Automated Group Administration • 7605 Westfield Drive • Fort Wayne, IN 46825 • (260)489-6447 (800)888-6472 • (260) 489-0365 Fax</p> <p><i>This is an outline of benefits and not to be determined as a contract, for further definitions of covered benefits, see the Summary Plan Description</i></p>			

Please contact the Automated Group Administration Customer Service Line with any questions or concerns you may have. 1-800-888-6472



Signature Care EPO Network

The Signature Care EPO (Exclusive Provider Organization) network is dedicated to providing members with the best healthcare providers at the best rate. Members receive the highest level of benefit coverage when utilizing one of these EPO facilities.

Call for more information:
260-266-5510
800-666-4449 toll free
Parkview.com/EmployerSolutions

Allen County facilities

- Parkview Hospital Randallia
- Parkview Regional Medical Center
- Parkview Behavioral Health
- Parkview Ortho Hospital
- Parkview Premier Surgery
- Parkview Inverness Surgery Center
- Parkview Endoscopy Center
- Parkview SurgeryONE

Other Indiana facilities

- Parkview DeKalb Hospital
- Parkview Huntington Hospital
- Parkview LaGrange Hospital
- Parkview Noble Hospital
- Parkview Wabash Hospital
- Parkview Warsaw
- Parkview Whitley Hospital
- Adams Memorial Hospital
- Cameron Memorial Community Hospital
- Logansport Memorial Hospital

IU Health System

- IU Health Methodist Hospital
- IU Health Ball Memorial Hospital
- IU Health University Hospital
- IU Health Bloomington Hospital
- Riley Hospital for Children at IU Health
- IU Health Jay

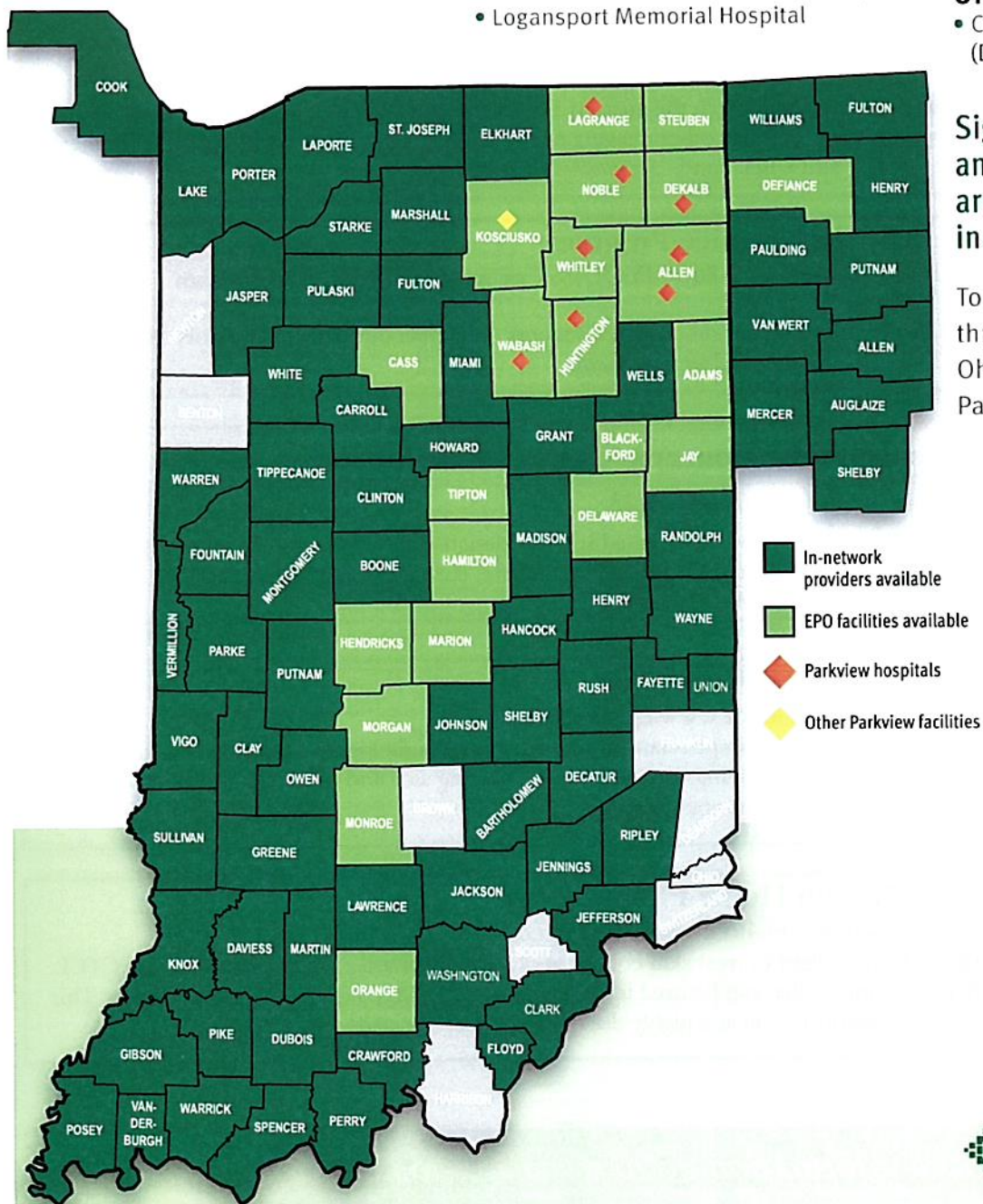
* for a complete listing of facilities, including additional IU facilities, please go to: Parkview.com/SignatureCareDirectory

Ohio facilities

- Community Memorial Hospital
(Defiance County)

Signature Care EPO facilities and in-network providers are located in the counties indicated on this map.

To view all Signature Care providers throughout Indiana and northwest Ohio, visit our online directory at Parkview.com/SignatureCareDirectory.



Paydhealth

1-877-869-7772

Paydhealth is designed to improve access to specialty drugs. This program will assist you in reducing the cost of your medication by seeking sources of alternate funding for specialty drugs on the Select Drugs and Products List. If you have any questions regarding the Select Drugs and Products Program, please call the Specialty Contact Center. *See attached for more details.*

HealthiestYou

1-866-703-1259 or www.healthiestyou.com

With HealthiestYou you can connect to a doctor, get treatment, and get prescriptions, 24 hours a day, 7 days a week over the phone or via the mobile app. Using HealthiestYou can SAVE YOU TONS OF MONEY and no more sitting around in waiting rooms. And best of all, it's FREE. *See attached for more details.*

Direct Imaging

(260)-212-1901 or www.DirectImagingLLC.net

Direct Imaging LLC, a subsidiary of DirectCare LLC, is a freestanding outpatient imaging services (MRI, CT, Ultrasound and X-rays) facility that offers the most affordable out-of-pocket cost in the area. At Direct Imaging, we use the most advanced Siemens MRI technology, equipped with 1.5 Tesla scanners. To meet other imaging needs, we also offer Siemens 64 slice CT Scanner, Digital X-Ray and Ultrasound. *See attached for more details.*

Lab Service Program

1-888-522-2677 or www.labcorp.com | 1-866-MYQUEST or www.QuestDiagnostics.com

The LabCorp and Quest programs allows you to obtain substantial discounts on certain outpatient laboratory testing. *See attached for more details.*

Managed Care Concepts Chronic Care

1-866-750-2723

Managed Care Concepts Chronic Care Program is a set of coordinated services designed to help members manage chronic medical conditions such as asthma, diabetes, hypertension, congestive heart failure, coronary artery disease and/or obesity. *See attached for more details.*

EPIC Hearing

1-877-606-3742 or www.epichearing.com

EPIC's Hearing Service Plan offers a national alliance of independent ear physicians and audiologists dedicated to high-quality hearing care. Your EPIC benefit ensures substantial savings on name-brand hearing aids and products to protect and improve your hearing.

Daavlin Home Phototherapy

1-800-322-8546 or www.daavlin.com

Phototherapy is the use of a special type of medical light to treat skin conditions such as Psoriasis, Vitiligo, Eczema, and CTCL. Daavlin offers personal-sized phototherapy products that can be used in the comfort and convenience of your own home. This safe and easy treatment is now available to you at a highly discounted price. *See attached for more details.*

For more information go to www.aga-tpa.com

The Magellan Rx Mobile App

On-hand prescription drug management tools for members

Our mobile app is designed to help members understand and maximize their prescription drug benefits through key tools that elevate the pharmacy experience. Members will have access to real-time prescription updates, critical clinical information and cost management tools all in the palm of their hand.

Members can:

1. Check the status of their prescriptions

- Transparency is key and the Magellan Rx app makes it easy to see where a prescription is in the review process with 6 easy statuses:



Ready



Not ready



Under review



Needs approval



Quantity limit



Not covered

- Members can opt-in to receive prior authorization notifications for new submissions, status updates and expirations.

2. Price a drug

Members can get accurate drug pricing from nearby pharmacies so they can make the best decision on where to fill a prescription.

3. Get detailed clinical content for their prescription

Including alerts for severe drug interactions and adverse reactions, as well as general information about the medication.

4. Receive notifications

Members will receive notifications for prescription refills, severe drug-drug interactions, and prior authorization status updates.*

5. View Rx claims history

Members can view a comprehensive history of previously filled prescriptions.

*Available November 1



Coming in 2022!



Live chat with a customer service agent



Schedule home delivery for prescriptions



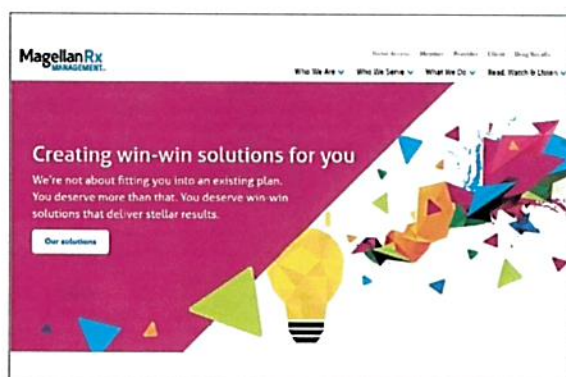
The Magellan Rx app is available on the Apple app store and Google play store.

Want to learn more? Connect with us!

- magellanrx.com
- mxinquiries@magellanhealth.com
- Magellan Rx Management
- Magellan Rx
- Magellan Rx

Access your prescription history, schedule a refill and more!

At Magellan Rx Management, we are on a quest to provide a connected healthcare experience that truly leads humanity to healthy, vibrant lives. We are committed to delivering quality service and personalized care. Our secure member portal makes it easy for you to quickly refill your prescription and check your order status while also providing access to additional support to help you stay on track.



STEP ONE

Visit www.magellanrx.com and select Portal Access: Member.

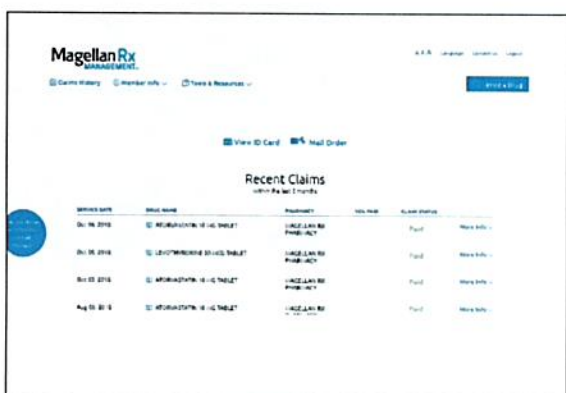


STEP TWO

Login. If it's your first time on the site, you will need to complete the one-time registration process.

To register, fill out the registration form. Click on confirmation link sent to the email you registered with within 24 hours (if you don't click on the link within 24 hours you will need to re-register).

The link will take you to the member login page and will complete your registration.

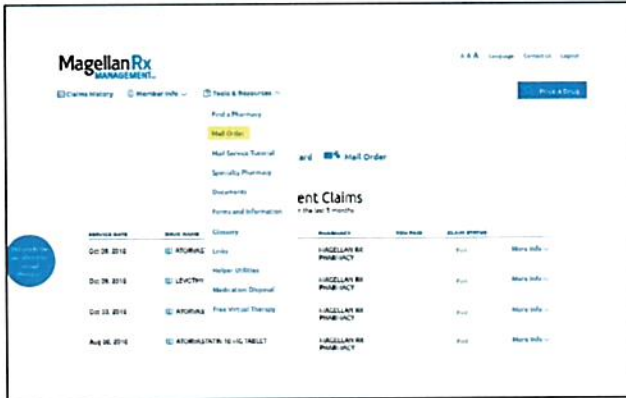


STEP THREE

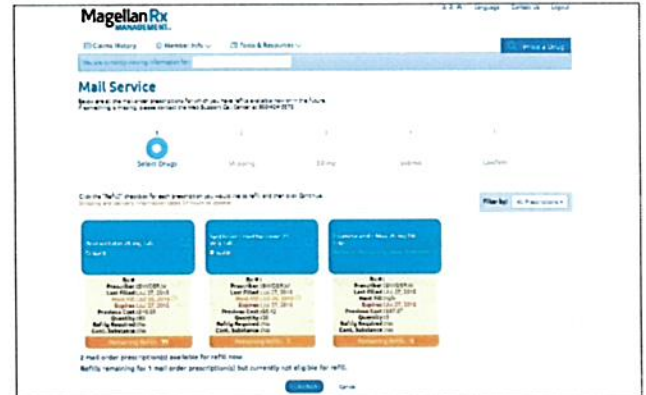
Get to know your dashboard. It's easy to view recent claims, renew and refill prescriptions, access on-demand medication videos and more!

IF YOU SELECT MAIL ORDER UNDER TOOLS & RESOURCES:

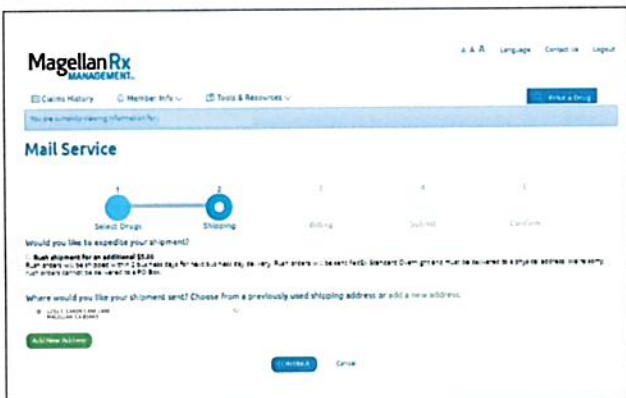
If you take maintenance medications for long-term conditions like arthritis, asthma, diabetes, high blood pressure or high cholesterol, home delivery through Magellan Rx Pharmacy may be a helpful solution for you.



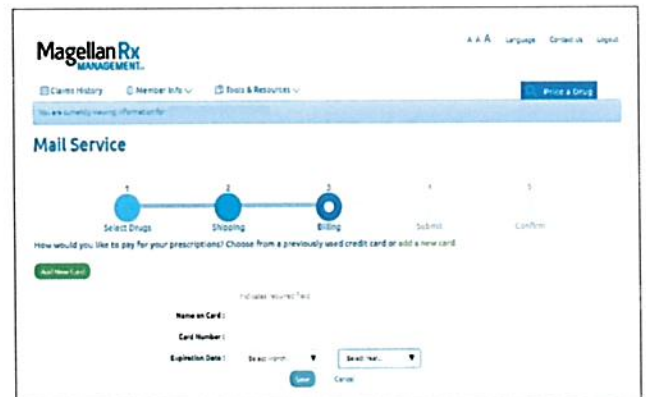
1. Click on Tools & Resources in the navigation bar to make your selection. Select Mail Order to fill your maintenance medication prescription.



2. Select the "Refill?" checkbox for each prescription you would like to refill and click continue.



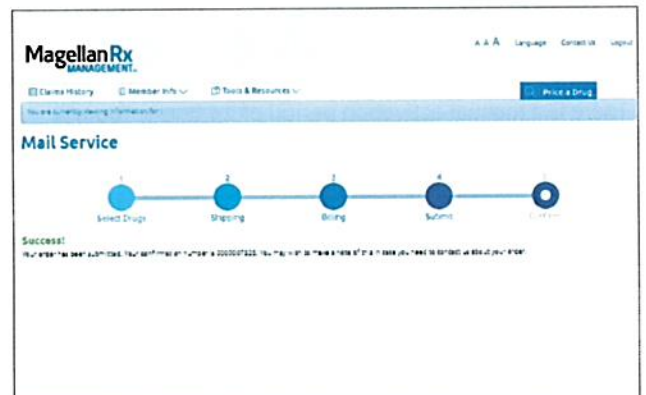
3. Enter your preferred shipping address and click continue.



4. Enter your billing information and click continue.



5. Review your order details and click submit.



Success! Your order has been submitted. Please make a note of your confirmation number.

IF YOU SELECT SPECIALTY PHARMACY UNDER TOOLS & RESOURCES:

You will need to register under the Specialty Pharmacy section if you receive a specialty medication through Magellan Rx Pharmacy. This will help you get the medications you need and the personalized support and care needed to successfully manage your condition.



1. Click on Tools & Resources in the navigation bar to make your selection. Select Specialty Pharmacy to fill your specialty medication prescription.

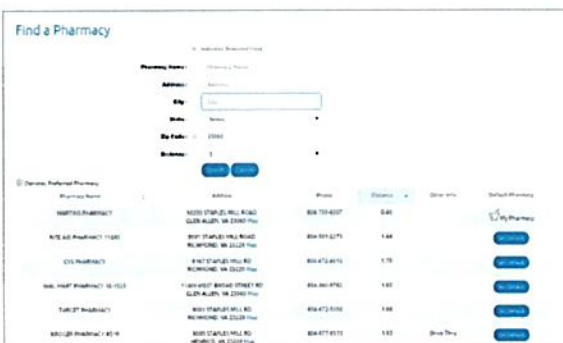
2. If you are a first time user, enter your Member Record Number (MRN) and click submit. To obtain your MRN, please call 866.554.2673.



3. There is a manual activation period of 24 hours. You will receive an email once your activation is complete.

4. Once the activation is complete, visit www.magellanrx.com and follow steps 1-3 to access your secure member information.

ADDITIONAL RESOURCES:



Smart Pharmacy Locator

- Locate pharmacies in your area
- Set default pharmacy



Medication Videos

In an effort to empower our members with rich, relevant content for more informed healthcare decision-making, we offer more than 500 medication videos through our member portal. These videos provide:

- Traditional and specialty medication details
- Disease education
- Side effect awareness



Price a Drug

- Auto-complete feature assists in searching for a drug
- Ability to select from previously filled drug and see dosage and strength options based on the drug selected
- Comparative drug pricing for up to three retail pharmacies
- Drug pricing messages in clear, understandable language

Login today at magellanrx.com.

If you have any questions about your prescription benefits, please call us at 1.800.424.0472.



Select Drugs and Products ProgramSM

At Magellan Rx Management, we are partnering across the industry to provide a connected healthcare experience that truly leads humanity to healthy, vibrant lives. We are dedicated to giving you the best service and resources to help you and your family make better healthcare decisions.

The **Select Drugs and Products ProgramSM** is administered by *paydhealth* and is designed to improve access to specialty drugs. This program will assist you in reducing the cost of your medication by seeking sources of alternate funding for specialty drugs on the Select Drugs and Products List.

You must specifically enroll in the Select Drugs and Products Program in order to take advantage of these benefits. All specialty drugs listed on the Select Drugs and Products List require that you seek prior review and that your case be submitted to alternate funding before your benefit will apply. If you do not participate in the program, you will have a 100% reduction in your payable benefit for specialty medication.

If you are taking a specialty drug, you will be contacted by a Program Case Coordinator. Your Case Coordinator will provide you with further information regarding the Select Drugs and Products Program and walk you through the enrollment process and requirements. If you have any questions regarding the Select Drugs and Products Program, please call the Specialty Contact Center at 877.869.7772 (8:00 a.m. – 8:00 p.m. EST).

Wherever you go, talk to a doctor for free by phone or video 24/7.



Download the HealthiestYou app, create an account, complete your medical history, and talk to a doctor for free whenever you need to.

**Take control of your health
with free doctor visits 24/7
at home or on the go.**



See a doctor 24/7

Talk to a licensed doctor by phone or video from anywhere



Save money

Find the lowest-cost prescriptions in your area



Find a pharmacy nearby

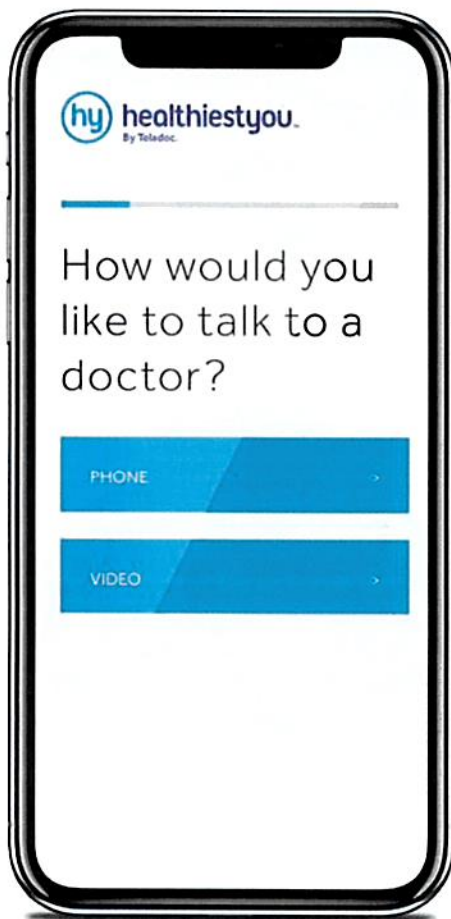
Locate a pharmacy near you to pick up prescriptions from your doctor visit*

*Medicine is prescribed when medically necessary



Download the HealthiestYou app today.

Set up your HealthiestYou account in 4 easy steps.



Download the app to connect to doctors for free by phone or video 24/7, shop the lowest-cost prescriptions, and much more.

- 1 Download the app**
Search "HealthiestYou" in the app store or on Google Play.
- 2 Set up your account**
Once you've downloaded the app, select "Register," then choose "Employee" as your membership type.
- 3 Enter basic contact information**
Type in your last name, date of birth, and ZIP code.
- 4 Type in your security information**
Enter a valid email address, password, the best number for our doctors to reach you, your preferred language, and accept terms and conditions.



All doctor visits are free. Download the app today!  | 

HealthiestYou.com | 866-703-1259



Managed Care Concepts: Care Concierge Line

Managed Care Concepts' Care Concierge Line is a program that gives employee members and their dependent family members access to experienced, licensed, caring nurses that provide assistance anytime, twenty-four hours a day, seven days a week. The Care Concierge Line's main focus is being there with timely information after hours when members may have a health plan related question or just need reassurance.

From simple to complex Managed Care Concepts' Care Concierge is there for you and your members!

HOW DO I ACCESS THE CARE CONCIERGE LINE?



Access is simple and free! Call toll free, 1-866-751-2723, any time of day, seven days a week.

DOES IT COST TO USE THE CARE CONCIERGE LINE?



There is no cost to you for this service. This benefit is brought to you as a part of your employer-sponsored health plan.

IS THERE A LIMIT TO THE NUMBER OF TIMES I CAN CALL?



There is no limit to the number of times you can use this service.

**THIS SERVICE IS NOT DESIGNED OR INTENDED FOR MEDICAL EMERGENCIES.
IN THE EVENT OF A MEDICAL EMERGENCY DIAL 911 IMMEDIATELY.**

Managed Care Concepts: Chronic Care Program

Managed Care Concepts Chronic Care Program is a set of coordinated services designed to help members manage chronic medical conditions such as asthma, diabetes, hypertension, congestive heart failure, coronary artery disease and/or obesity.

Chronic Care Programs (or disease management programs as they were known in the past) focus on chronic conditions, such as the ones listed above, because they are conditions where good self-management has been shown to produce a positive clinical impact.

Chronic Care Management helps in accomplishing risk reversal by focusing on:

- Employee Awareness/Education
- Behavior Modification Programs
- Nutrition/Exercise Strategies
- Healthy Lifestyle Coaching
- Medical Follow-Up

HOW MUCH DOES THIS COST?



The program is provided to you at NO ADDITIONAL COST and is 100% confidential!

This program includes, but is not limited to:

- Telephonic Coaching by trained nurse coaches
- Unlimited inbound calls to your nurse coach
- Educational Materials mailed to your home or via email
- Coordination of services with your physicians and/or other healthcare providers.

IF YOU WISH TO PARTICIPATE:



Contact the WELL-Managed Chronic Care Program at 1-866-750-2723 and ask to speak to a chronic care nurse manager for more information. Members can self-refer to the program.

Call now to start your journey to better health!

Managed Care Concepts: Healthy Track

Successfully managing your life with diabetes can be challenging. Healthy Track is a platform of healthcare services designed to get and keep you on a "healthy track". This is accomplished through the FDA approved MyGHR system which provides real time data and comprehensive Nurse Navigator support.

WHAT IS INCLUDED?



Healthy Track includes a Genesis Blood Glucose Monitor and MyGHR system, as well as 24-hour access to the Diabetic Care Line (1-866-751-2723) and full access to the Health Track Nurse Support line (1-866-750-2723).

The Genesis Blood Glucose Meter accurately tests glucose levels and automatically sends the results to the patient's secure and personal on-line MyGHR account, which can be shared with healthcare professionals or individuals involved in patient care. The Genesis meter has an intuitive user interface and is easy to use, including a color LCD screen, rechargeable battery and the ability to store up to 450 readings.

WHY USE HEALTHY TRACKS?



The MyGHR system eliminates the need for traditional paper logbooks and contains features for running test history reports. In addition, the system can be programmed to send text message alerts of test results to any mobile phone or to your physician!

HOW DO I PARTICIPATE?



Call the Diabetic Nurse Line Support at 1-866-751-2723 to begin!



Lab Service Program

LabCorp and Lab Card are programs offered by your employer that helps you and your covered dependents save money on covered laboratory services when testing is performed at LabCard or LabCorp.

DO I HAVE TO USE THE LAB SERVICE PROGRAM?



You are not required to use the discount program; however, by participating in the program, you and your covered dependents can save money on covered laboratory services.

HOW DO I TAKE ADVANTAGE OF THE PROGRAM?



Simply present a physician's order for covered laboratory testing and your insurance card with the LabCorp or LabCard logo at any LabCorp or LabCard specimen collection lab.

WHERE CAN I GO TO RECEIVE DISCOUNTED TESTING?



To locate a specimen collection lab near you, use the Find A Lab feature on LabCorp's website at www.labcorp.com or by phone at 1-888-522-2677. To location a LabCard collection lab near you, visit www.labcard.com or call 1-800-646-7788.

The screenshot shows the LabCorp website's 'Find a Lab Near You' section. It includes a search bar with fields for 'City', 'State', and 'ZIP'. Below the search bar, there are links for 'Advanced Search', 'No appointment? No problem. Walk-ins are welcome.', and 'Prefer to make an appointment?'. At the bottom, there are three icons: 'Lab Locations', 'Testing Services', and 'Appointments'.

The screenshot shows the Quest Diagnostics website's 'Appointment / Location' section. It includes a search bar with fields for 'City', 'State', and 'ZIP'. Below the search bar, there are links for 'Make Appointment', 'Find Location', 'Reason for testing', 'Date / Time', and 'See locations on map'. At the bottom, there are three icons: 'Lab Locations', 'Testing Services', and 'Appointments'.

Imaging Discount Services (MRI, CT, Ultrasound, X-Ray)

Direct Imaging LLC, a subsidiary of DirectCare LLC, is a freestanding outpatient imaging services (MRI, CT, Ultrasound and X-rays) facility, located at 1355 Getz Rd, Suite B, Fort Wayne, IN 46804, that offers the most affordable out-of-pocket cost in the area. You are not required to use the discount program; however, by participating in the program, you and your covered dependents can save money on covered imaging services.

Professional interpretation

- All exams are interpreted by Summit Radiology board-certified radiologists
- Images and reports are available through their secure, HIPPA-compliant website or via CD

Fast and Efficient

Results are sent within 24 hours, but can be sent STAT upon request.

One Flat Rate

⚙ The low pricing includes the cost of your exam and the radiologists interpretation. No hidden costs or fees.

Lower Out-of-pocket Cost

⚙ The Direct Imaging program helps you and your covered dependents save money on covered imaging services when testing is performed at Direct Imaging in Fort Wayne. This program allows you to receive substantial discounts on imaging services, and in some cases may be free.

Advanced Technology

MOST ADVANCED INDEPENDENT FREE-STANDING IMAGING FACILITY IN FORT WAYNE

⚙ High quality 1.5 Tesla MRI, 64 Slice CT, Digital X-Ray, and Ultrasound

Same or Next-day Appointments

⚙ Being a "Patient" isn't about waiting. They will find a time that works for you.

Rapid Results

⚙ The technology ecosystem allows for a quick report turn-around time, in most instances within 24 hours. Providers can secure access to view images anywhere and have the ability to burn onto a CD.

Comfort and Convenience

⚙ Getting an MRI might feel like a big step. They will do their best to make it a comfortable and relaxing experience.

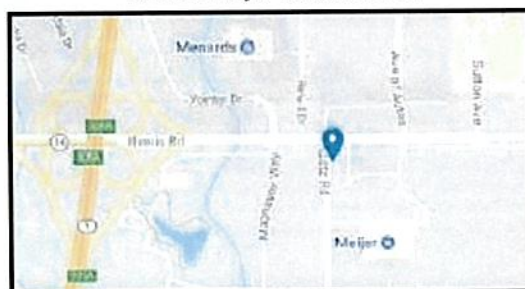


**SAME DAY OR NEXT DAY APPOINTMENTS
MONDAY – FRIDAY 8AM – 5PM**

Direct Imaging
MRI . CT Scan . Ultrasound . X-Ray
www.DirectImagingLLC.net

**P: 260.212.1901
Fax: 260.999.5889**

Next to Meijer on Illinois Rd.



1355 Getz Rd, Suite B, Fort Wayne, IN 46804
2023 Enrollment Guide // 20

Daavlin Home Phototherapy Benefit

Phototherapy is a safe and highly effective treatment for such skin diseases as psoriasis, eczema, and vitiligo, as well as many others. It can take place in a clinical setting or be prescribed for use in the patient's home. For best results, phototherapy treatments need to occur about three times a week for several weeks to months depending on the disease. Home phototherapy is popular because it is easy for patients to maintain consistency in their treatment schedule

Most phototherapy performed today uses Narrowband UVB. This is the most therapeutic band of light and treatments are quite brief, typically just seconds to minutes in duration! Patients simply expose the affected skin to the light - there is no need for other drugs or medications. Once the treatment is over, patients can go about their day as normal.

HOW MUCH DOES THIS COST?



The program is provided to you at a substantial discount, or in some cases AT NO COST!

WHAT ARE THE RISKS?



Contrary to other therapies, phototherapy can be prescribed for many types of patients. Pregnant women, children, the elderly, and those with compromised immune systems can all benefit from this safe and effective treatment. Side effects are mild and temporary. Examples are dry skin, itching, or occasional erythema.

IF YOU WISH TO PARTICIPATE:



Discuss this option with your physician and then contact AGA at 1-800-888-6472 to start the process!



QicLink Benefits Exchange

QicLink Benefit Exchange (QBE) provides Internet access to claim information for members. As a QBE member, you will have access to the following features:

- View member information
- View deductible and out of pocket information
- Submit request for ID cards
- View or print copies of explanations of benefits (EOB's)
- Access links to healthcare management-related websites

HOW DO I REGISTER?



QBE can be accessed through the www.aga-lpa.com website.

Or visit <https://b23qbeprod.cishoc.com/AGA>. Click on New Member Registration. Enter your group number (6XXX), your Member ID from your insurance card and your date of birth.


Automated Group Administration x QicLink Benefits Exchange - Log In x

b23qbeprod.cishoc.com/AGA/Login.aspx?CID=000610058DID=AGA

Apps Advanced Analytics Healthcare You - QicLink Shipping UPS - Link Automated Group... Cognizant Logo QicLink Notice 2020... Other bookmarks

QicLink Benefits Exchange

Monday, June 08, 2020 9:04:09 AM



AGA
Automated Group Administration, Inc.

Log In

User ID:

Password:

LOGIN

[New Member Registration](#)
[Forgot Your Password?](#)

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Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2022. Contact your State for more information on eligibility –

ALABAMA-Medicaid	CALIFORNIA-Medicaid
Website: http://myalhipp.com/ Phone: 1-855-692-5447	Website: Health Insurance Premium Payment (HIPP) Program http://dhcs.ca.gov/hipp Phone: 916-445-8322 Fax: 916-440-5676 Email: hipp@dhcs.ca.gov
ALASKA-Medicaid	COLORADO-Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)
The AK Health Insurance Premium Payment Program Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: https://www.colorado.gov/pacific/hcpf/child-health-plan-plus CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program HIBI Customer Service: 1-855-692-6442
ARKANSAS-Medicaid	FLORIDA-Medicaid
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Website: https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html Phone: 1-877-357-3268

GEORGIA-Medicaid	MAINE-Medicaid
<p>A HIPP Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162, Press 1 GA CHIPRA Website: https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra Phone: (678) 564-1162, Press 2</p>	<p>Enrollment Website: https://www.maine.gov/dhhs/ofi/applications-forms Phone: 1-800-442-6003 TTY: Maine relay 711</p> <p>Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applications-forms Phone: -800-977-6740. TTY: Maine relay 711</p>
INDIANA-Medicaid	MASSACHUSETTS-Medicaid and CHIP
<p>Healthy Indiana Plan for low-income adults 19-64 Website: http://www.in.gov/fssa/hip/ Phone: 1-877-438-4479 All other Medicaid Website: https://www.in.gov/medicaid/ Phone 1-800-457-4584</p>	<p>Website: https://www.mass.gov/masshealth/pa Phone: 1-800-862-4840</p>
IOWA-Medicaid and CHIP (Hawki)	MINNESOTA-Medicaid
<p>Medicaid Website: https://dhs.iowa.gov/ime/members Medicaid Phone: 1-800-338-8366 Hawki Website: http://dhs.iowa.gov/Hawki Hawki Phone: 1-800-257-8563 HIPP Website: https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp HIPP Phone: 1-888-346-9562</p>	<p>Website: https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp Phone: 1-800-657-3739</p>
KANSAS-Medicaid	MISSOURI-Medicaid
<p>Website: https://www.kancare.ks.gov/ Phone: 1-800-792-4884</p>	<p>Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005</p>
KENTUCKY-Medicaid	MONTANA-Medicaid
<p>Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPPPROGRAM@ky.gov</p> <p>KCHIP Website: https://kidshealth.ky.gov/Pages/index.aspx Phone: 1-877-524-4718</p> <p>Kentucky Medicaid Website: https://chfs.ky.gov</p>	<p>Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084</p>
LOUISIANA-Medicaid	NEBRASKA-Medicaid
<p>Website: www.medicicaid.la.gov or www.ldh.la.gov/la hipp Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)</p>	<p>Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178</p>

NEVADA-Medicaid	SOUTH CAROLINA-Medicaid
Medicaid Website: http://dhcfp.nv.gov Medicaid Phone: 1-800-992-0900	Website: https://www.scdhhs.gov Phone: 1-888-549-0820
NEW HAMPSHIRE-Medicaid	SOUTH DAKOTA-Medicaid
Website: https://www.dhhs.nh.gov/oii/hipp.htm Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218	Website: http://dss.sd.gov Phone: 1-888-828-0059
NEW JERSEY-Medicaid and CHIP	TEXAS-Medicaid
Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710	Website: http://gethipptexas.com/ Phone: 1-800-440-0493
NEW YORK-Medicaid	UTAH-Medicaid and CHIP
Website: https://www.health.ny.gov/health_care/medicaid/ Phone: 1-800-541-2831	Medicaid Website: https://medicaid.utah.gov/ CHIP Website: http://health.utah.gov/chip Phone: 1-877-543-7669
NORTH CAROLINA-Medicaid	VERMONT-Medicaid
Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100	Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427
NORTH DAKOTA-Medicaid	VIRGINIA-Medicaid and CHIP
Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-844-854-4825	Website: https://www.coverva.org/en/famis-select https://www.coverva.org/en/hipp Medicaid Phone: 1-800-432-5924 CHIP Phone: 1-800-432-5924
OKLAHOMA-Medicaid and CHIP	WASHINGTON-Medicaid
Website: http://www.insureoklahoma.org Phone: 1-888-365-3742	Website: https://www.hca.wa.gov/ Phone: 1-800-562-3022
OREGON-Medicaid	WEST VIRGINIA-Medicaid and CHIP
Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075	Website: https://dhhr.wv.gov/bms/ http://mywvhipp.com/ Medicaid Phone: 304-558-1700 CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)
PENNSYLVANIA-Medicaid	WISCONSIN-Medicaid and CHIP
Website: https://www.dhs.pa.gov/Services/Assistance/Pages/HIPP-Program.aspx Phone: 1-800-692-7462	Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002
RHODE ISLAND-Medicaid and CHIP	WYOMING-Medicaid
Website: http://www.eohhs.ri.gov/ Phone: 1-855-697-4347, or 401-462-0311 (Direct RIt Share Line)	Website: https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/ Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since January 31, 2022, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

OMB Control Number 1210-0137 (expires 1/31/2023)

NOTES



For more information visit
www.aga-tpa.com