



APPLE TREE DENTAL

Access • Compassion • Excellence

2024 Open Enrollment



Gallagher

Insurance | Risk Management | Consulting

Welcome to Open Enrollment

- Open Enrollment is your annual opportunity to make changes to your benefits for the new plan year, effective **10/1/2024**.
- During Open Enrollment, you may opt to do the following:
 - Change or opt out of coverage
 - Choose new benefit options
 - Enroll eligible family members in your health or dental plans
 - Enroll in coverage, if eligible, but not currently covered
- You must submit your enrollment decisions in ADP no later than **August 30th**.



Special Enrollment Periods

- Elections made at Open Enrollment will remain until the next open enrollment unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact HR within 30 days.
- Qualifying events include:
 - Gaining a new dependent by Marriage, Birth, Adoption, or Placement for Adoption,
 - Loss of Other Coverage through your spouse's employer
 - Loss of Coverage for Medicaid or a State Children's Health Insurance Program
 - Gaining eligibility for Medicaid or a State Children's Health Insurance Program



Today We'll Cover....

- Medical Insurance (BCBS of MN)—*Renewing with a few plan changes!*
- Kavira Health—*Available to all employees!*
- Dental Insurance (HealthPartners)
- Vision Insurance (EyeMed)
- Health Savings Accounts – HSAs
- Flexible Spending Accounts – FSAs
- Life & Disability Insurance
- Employee Assistance Program (EAP)
- Open Enrollment & Next Steps

This material is meant to provide an overview of the most commonly asked questions on HSAs, VEBA's, and FSAs. It does not represent all rules and regulations. For more information, please refer to IRS Publications [#502](#), [#503](#), [#969](#) and the [US Treasury Website](#). And always consult your tax advisor.

Glossary of Terms



Deductible

This is the set amount you pay before we share the cost for covered health services you receive.



Copay

Specified dollar amount that you pay for covered health services and prescription drugs, as defined by your plan design.



Your percentage of the costs (coinsurance)

After you pay your deductible, this is your percentage of costs each time you get care and then your plan covers the rest.



Out-of-pocket limit

This is the maximum amount you can pay out of your pocket for covered services each year. Once you reach that limit, which varies by plan, we cover the rest.



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Medical Insurance BCBS of Minnesota

What's new this year?

Choose the Medical coverage that's right for you!

- *Renewing with BCBS of MN*
 - *No changes to your costs per pay period!*
 - *Increasing the member out-of-pocket maximum for the HDHP plans*
 - *Rx copays are increasing slightly on the \$2,000-30% Ded-Copay plan*
- **Plans:**
 - \$2,000 Deductible 30% Coinsurance Copay Plan
 - \$3,200-25% HDHP with HSA
 - \$4,500-25% HDHP with HSA
- **Networks:**
 - Aware (Open Access)
 - High Value Network (HVN)

Medical Plan Designs

Step 1: Choose the plan that's right for you!

In-Network Coverage	\$2,000-40-70%	\$3,200-75% HSA	\$4,500-75% HSA
Benefit	Aware Network or High Value Network	Aware Network or High Value Network	Aware Network or High Value Network
Lifetime Benefit Maximum	Unlimited	Unlimited	Unlimited
Deductible—Calendar Year	\$2,000 per person \$6,000 per family	\$3,200 per person \$6,400 per family	\$4,500 per person \$9,000 per family
Coinsurance	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible
Medical Out-of-Pocket Maximum	\$4,500 per person \$9,000 per family	\$4,500 per person \$9,000 per family	\$8,050 per person \$16,100 per family
Preventive Care—Deductible does not apply			
Routine Physical	No charge, deductible does not apply	No charge, deductible does not apply	No charge, deductible does not apply
Immunizations, Well Child Care and Cancer Screenings	No charge, deductible does not apply	No charge, deductible does not apply	No charge, deductible does not apply
Office Visits			
Illness or Injury	\$40 copay	25% after deductible	25% after deductible
Specialist Visit	\$40 copay	25% after deductible	25% after deductible
Diagnostic Test <i>X-Ray, Blood Work</i>	30% after deductible	25% after deductible	25% after deductible
Imaging <i>CT / PET Scan, MRIs</i>	30% after deductible	25% after deductible	25% after deductible
Urgent or Emergency Care			
Urgent Care	\$ 40 copay	25% after deductible	25% after deductible
Hospital Emergency Room	30% after deductible	25% after deductible	25% after deductible
Emergency Ambulance	30% after deductible	25% after deductible	25% after deductible
Durable Medical Equipment and Prosthetics	30% after deductible	25% after deductible	25% after deductible
Home Healthcare	30% after deductible	25% after deductible	25% after deductible
Out-of-Network			
Deductible	\$ 5,000 per person \$10,000 per family	\$ 5,000 per person \$10,000 per family	\$ 7,500 per person \$15,000 per family
Out-of-Pocket Maximum	\$10,000 per person \$20,000 per family	\$10,000 per person \$20,000 per family	\$12,500 per person \$25,000 per family
Coinsurance	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible

The information contained herein is subject to the disclosures and disclaimers on the Disclaimers page of this presentation.

Prescription Drug Coverage

Step 1: Choose the plan that's right for you!

In-Network Coverage	\$2,000-40-70%	\$3,200-75% HSA	\$4,500-75% HSA
Benefit	Aware Network or High Value Network	Aware Network or High Value Network	Aware Network or High Value Network
Prescription Drugs (Rx)			
Preventive Rx Coverage*	Not included	Included	Included
Retail—up to a 31-day supply			
Tier 1	\$20 copay	25% after deductible	25% after deductible
Tier 2	\$50 copay	25% after deductible	25% after deductible
Tier 3	\$75 copay	25% after deductible	25% after deductible
Tier 4	\$120 copay	25% after deductible	25% after deductible
Mail Order—up to a 90-day supply			
Tier 1	\$ 60 copay	25% after deductible	25% after deductible
Tier 2	\$150 copay	25% after deductible	25% after deductible
Tier 3	\$225 copay	25% after deductible	25% after deductible
Tier 4	\$360 copay	25% after deductible	25% after deductible

* Check your current Preventive Drug Formulary to see what maintenance drugs may be covered at 100% before the deductible or OOP limits are met.

Network Options

Step 2: Choose the network or providers that's right for you!

- Choose from between the Aware or the High Value Network (HVN)
 - Aware Network is the largest network including 99% of clinics and hospitals within the Twin Cities metro area
 - High Value Network (HVN) is a smaller network of providers and offers you premium savings
- To receive the highest level of benefits, see providers in your network
 - Anything paid to your out-of-network deductible and out-of-pocket maximum does not count towards your in-network deductible and out-of-pocket maximum
- Emergency care is always covered at your network benefit level
- To look up network providers, go to bluecrossmn.com or download the app today for easy access on the go!



AWARE® PROVIDER NETWORK



With more than **98%** of doctors and hospitals in Minnesota, the **Aware® network** gives you broad, open-access to the largest selection of providers in the state.

18,545 primary care providers¹

39,578 specialty care providers¹

176 hospitals¹



Travel outside the state, and have nationwide access to:

86% of doctors²

95% of hospitals²



Blue Cross Blue Shield Global® Core gives you access to care internationally.

¹ Numbers are subject to change and are reflective of signed contracts as of June 2021.

² Blue Cross and Blue Shield Association Network Portfolio Statistics, CHP, Q3 2021 Provider Data
Each provider is an independent contractor and not our agent.

Blue Cross Blue Shield Global® is a brand owned by the Blue Cross Blue Shield Association, a national federation of 36 independent, community-based and locally-operated Blue Cross and Blue Shield Companies.



HIGH VALUE NETWORK



The **High Value Network** includes leading primary and specialty care doctors and hospitals throughout the state.

11,930 primary care providers¹

29,093 specialty care providers¹

121 hospitals¹



Travel outside the state, and have nationwide access to:

86% of doctors²

95% of hospitals²



Blue Cross Blue Shield Global® Core gives you access to care internationally.

¹ Numbers are subject to change and are reflective of signed contracts as of June 2021.

² Blue Cross and Blue Shield Association Network Portfolio Statistics, CHP, Q3 2021 Provider Data

Each health care provider is an independent contractor and not our agent. It is up to the member to confirm provider participation in their network prior to receiving services.

Blue Cross Blue Shield Global® is a brand owned by the Blue Cross Blue Shield Association, a national federation of 36 independent, community-based and locally-operated Blue Cross and Blue Shield Companies.



BLUECARD PPO



When you travel outside of Minnesota, you have access to the large national **BlueCard® PPO network** providers.

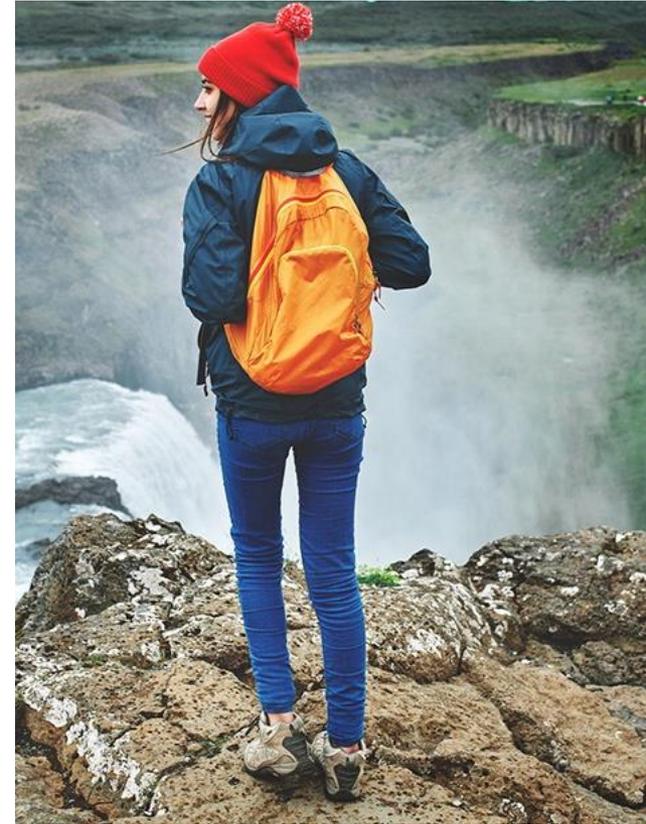
Simplifies coverage needs for student dependents.

86% of doctors¹

95% of hospitals¹



If you travel outside the United States, we have you covered with the **Blue Cross Blue Shield Global® Core network**.



¹Blue Cross and Blue Shield Association Network Portfolio Statistics, CHP, Q3 2021 Provider Data
Each provider is an independent contractor and not our agent.

Blue Cross Blue Shield Global® is a brand owned by the Blue Cross Blue Shield Association, a national federation of 36 independent, community-based and locally-operated Blue Cross and Blue Shield Companies.



Medical Premiums

Semi-Monthly (24 Pay-Periods)

	\$2,000-\$40-70%	\$3,200-75% HSA	\$4,500-75% HSA
Coverage Tier	Aware Network		
Single	\$133.46	\$119.79	\$83.13
Single + Spouse	\$460.61	\$442.94	\$358.62
Single + Child(ren)	\$259.95	\$236.88	\$174.93
Family	\$592.18	\$578.04	\$479.06
Coverage Tier	High Value Network		
Single	\$97.35	\$82.68	\$50.06
Single + Spouse	\$377.58	\$357.58	\$282.55
Single + Child(ren)	\$198.94	\$174.16	\$119.04
Family	\$494.70	\$477.84	\$389.77



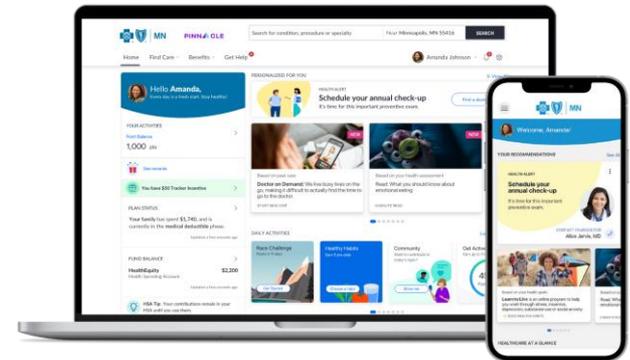
BLUE CARE ADVISORSM

BLUE CARE ADVISOR IS PERSONALIZED TO YOU

Blue Care Advisor takes the guess work out of managing your benefits. It's a comprehensive, digital resource for both you and your family. You can see the details of your plan and what's covered, and **it's personalized just for you**. That means the information and features you see are based on your benefits provided by your employer.

Once you have access, you'll be able to:

- Access your benefits in one spot – from medical plan details to program information and prescription coverage, Blue Care Advisor pulls together your benefit programs in one place.
- The app includes your digital insurance card.
- Know the cost of care before getting treatment – get help predicting your out-of-pocket costs before seeking care. We'll even recommend providers near you to make finding care simple.
- Receive support and important reminders about your care to keep you on track with managing your health.



Sign up at www.bluecrossmn.com/bca



BLUE CARE ADVISOR DASHBOARD

www.bluecrossmn.com/bca

PERSONALIZED DASHBOARD
Recent activity and claims tracking

FIND CARE

BENEFITS

The screenshot shows the Blue Care Advisor Dashboard interface. At the top left is the Blue Cross of Minnesota logo. A vertical navigation menu on the left includes: FIND CARE, BENEFITS, REWARDS, CONNECT, GET HELP, and NOTIFICATIONS. The main content area is divided into several sections: 'Your Rewards' with a 'Points balance' card; 'Your Recommendations' with two cards: 'Based on your health history' (yellow) and 'Based on your health history Preventive Care Health Check' (green); 'Your Health Plan' with 'Insurance Cards' and 'Care Team' cards; 'Recent Claims' with a 'Prescription' card for May 2023; and 'Medical Spend' with a progress bar for the 'In-network - Deductible phase'. A 'Log manually' link is visible in the top right of the dashboard area.

WELLNESS TOOLS

The Wellness Tools section features three cards: 'Walk 10 minutes' (Earn 10 pts), 'Stretch 5 minutes' (Earn 5 pts), and 'Eat Smart' (Earn 10 pts). Each card includes an illustration of a person performing the activity and a 'Get Started' button.



BENEFITS

www.bluecrossmn.com/bca

Access your health plan ID card and your EOBs.

Account Home LOG OUT

Plan Information Profile Forms Dental Resources

PLAN INFORMATION

Welcome Back

- Summary of Benefits & Coverage**
Explore the details of your plan and coverage in this detailed document by clicking the link above to view the PDF.
- Medical Benefit Booklet**
View all of your benefits within the benefit booklet by clicking the link above to view the PDF.

ID CARDS

View, Manage, Order & Send ID Cards

Select a member below to view their ID card. Choose an action if you need to email, fax, print, order, or report an ID card lost or stolen.

Select a member: [Dropdown]

Coverage Type: Medical [Dropdown]

Actions: Select ID Card Action [Dropdown]

BlueCross BlueShield ID Card Preview

VIEW BACK VIEW LARGER

CLAIMS INFORMATION

Claims

Within the last 24 months

Claim Type	Date	Member Name	Provider	Claim Number	Status	EOB
[Icon]	06/02/2023				APPROVED	N/A
[Icon]	06/02/2023				APPROVED	N/A
[Icon]	09/22/2023				APPROVED	View EOB ↓
[Icon]	04/19/2023				APPROVED	View EOB ↓
[Icon]	04/05/2023				DENIED	View EOB ↓
[Icon]	03/25/2023				PARTIALLY APPROVED	N/A
[Icon]	03/19/2023				APPROVED	N/A
[Icon]	03/07/2023				APPROVED	View EOB ↓
[Icon]	02/20/2023				APPROVED	View EOB ↓
[Icon]	02/08/2023				PARTIALLY APPROVED	N/A

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HOME | HELP | LEGAL, PRIVACY, & PRIVACY NOTICES | NONDISCRIMINATION PRACTICES

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Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association.



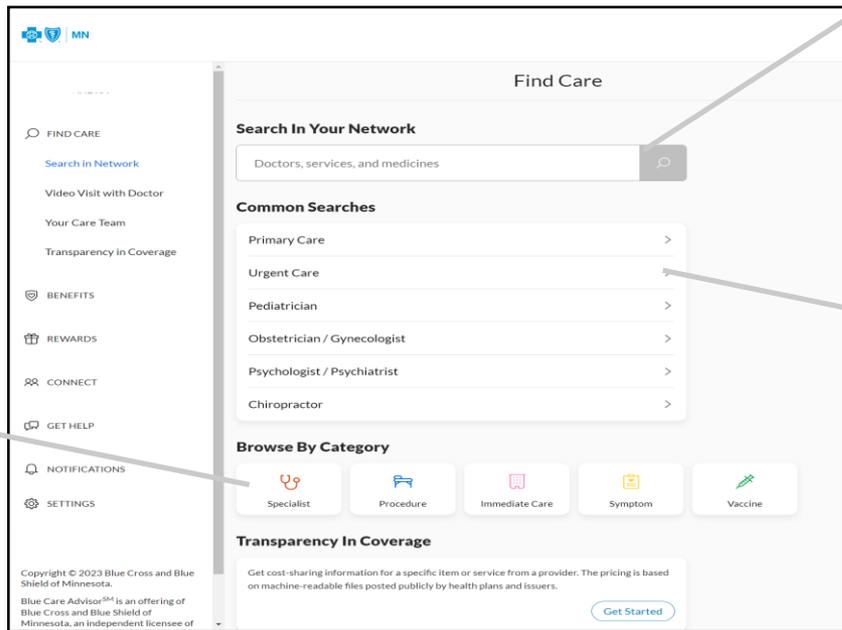
FIND CARE

www.bluecrossmn.com/bca

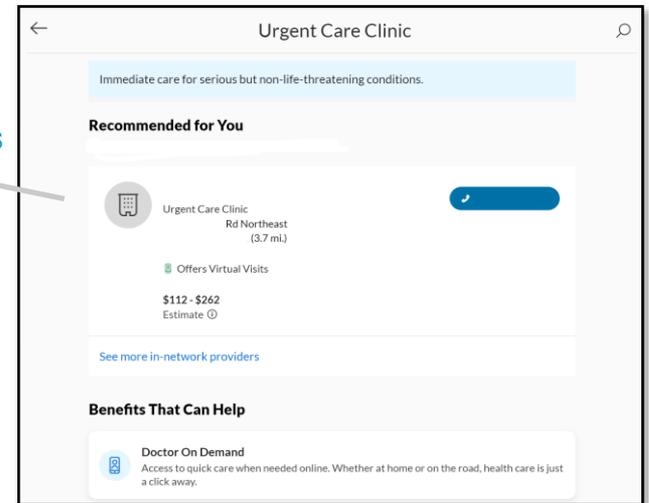
SEARCH BY LOCATION



COMMON SEARCHES



BROWSE BY CATEGORY



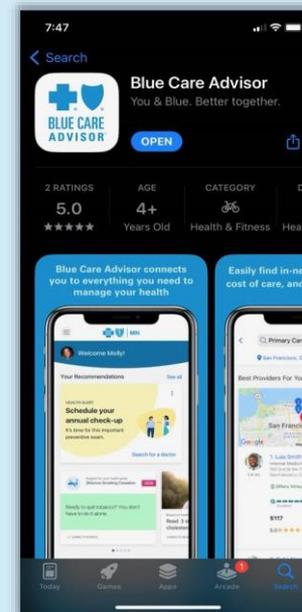
WHEN YOUR PLAN STARTS

Blue Care AdvisorSM connects you to everything you need to easily manage your healthcare, meet your goals and live healthier.

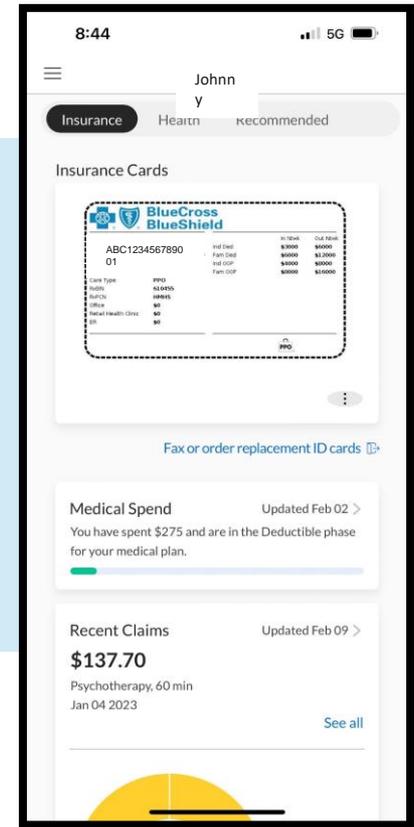
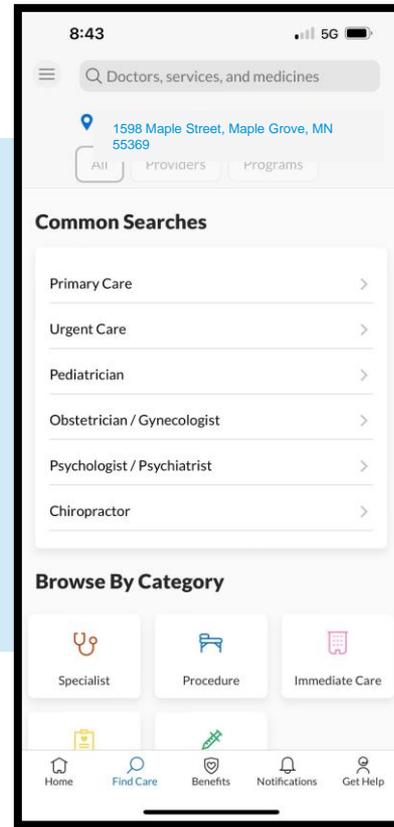
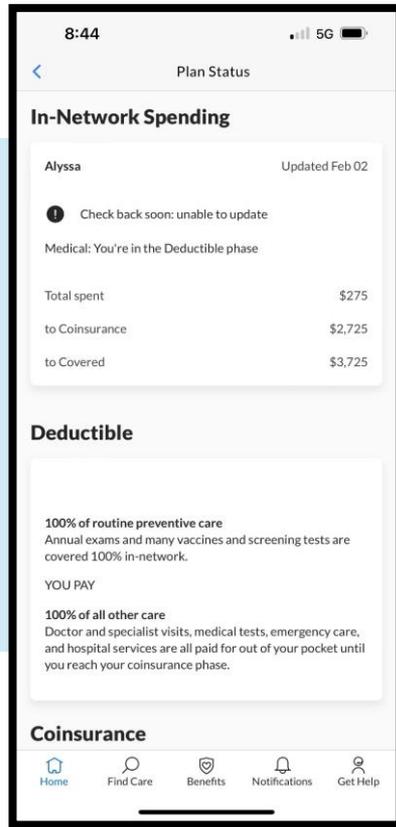
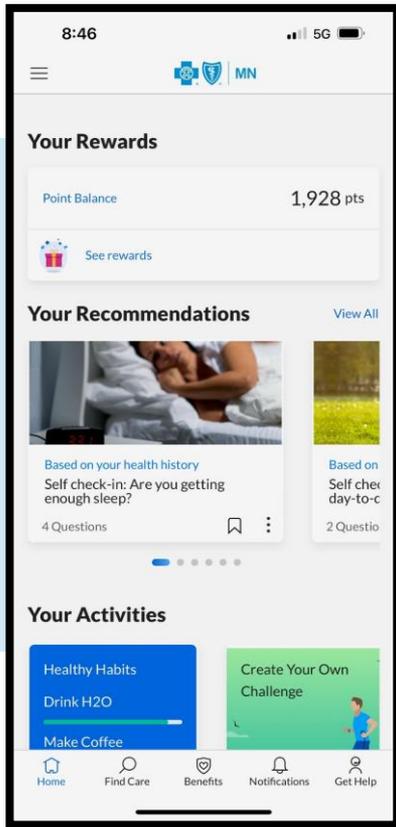
- 1 To get started, visit www.bluecrossmn.com/bca or download the app on your mobile phone



- 2 Log in with your existing Blue Cross account (same username/password if you have one)
- 3 If you don't have an account, you can register for a new account. You will need your Blue Cross Member ID card to get started



BLUE CARE ADVISOR APP



GET ACTIVE WITH BLUE CARE ADVISOR

Earn rewards for taking steps toward your health



With your new Blue Care Advisor Get Active program, small steps can lead to big benefits — and rewards.

Simply track your daily steps or your favorite fitness activity and earn points that translate to real dollars.



Employees and spouses*
can

EARN UP TO
\$240**
ANNUALLY

*Employees and spouses must be enrolled in the Blue Cross and Blue Shield of Minnesota health plan.

**Based on points earned by step tracking and fitness activities



GET STARTED EARNING POINTS

1 Complete a short Health Assessment earn 100 points

Fill out the form located on the homepage or under 'Benefits' to start earning points. Based on your Health Assessment results, you'll receive personalized recommendations including helpful tips and resources.

2 Start tracking

Link your fitness tracker or favorite fitness app to automatically record your activities. You can also track activity manually — including weightlifting, yard work or swimming.

3 Collect your reward

Your Reward Center shows how many points you have available



5,000 steps = 5 points

7,000 steps = 7 points

10,000 steps = 10 points

(max per day)



10 points = \$1

Earn a maximum of **\$240 per year**





UNDERSTANDING YOUR HEALTH PLAN

2024 Health Plan

YOUR MEMBER ID CARD

WATCH FOR YOUR NEW CARD IN THE MAIL

- Begin using your card when your new plan year begins
- Visit your member portal at the website listed on the back of your card to log in or create a new account



ELIZABETH SAMPLENAME		In Ntwk	Out Ntwk	
000000000000		Ind Ded	\$	\$
GRP	XXXXXXXX	Fam Ded	\$	\$
Svc Type	XXX	Ind OOP	\$	\$
Care Type	XXXX	Fam OOP	\$	\$
RxBIN	XXXXXX			
RxPCN	XXX			

SYMBOLS PRINT HERE

of Minnesota, a nonprofit independent licensee of the Blue Cross and Blue Shield Association, is serving only as the claims administrator.

The sample shown is a guide only. The information and the format of your card may vary.



KNOW WHERE TO GO FOR CARE

Knowing where to go for the right care can help save you time and money. Get familiar with your options now, before you need care.

WHEN YOU NEED	USE	ACCESS/AVAILABILITY	WAIT TIME	COST
 MEDICAL ADVICE	Telehealth Common health concerns	Call your clinic for availability.	 short to medium	\$0 – \$
 CARE QUICKLY	Online care Colds, cough or flu, bladder infections, mental health*	Visit www.doctorondemand.com/bluecrossmn 24 hours a day, seven days a week or check with your provider.	 short	\$
 CARE TODAY	Convenience clinic Minor illnesses or injuries, screenings and vaccinations	No appointment necessary. Often available nights and weekends.	 short	\$\$
 CARE SOON	Office visit Preventive care, screenings and vaccines, or referrals to specialty care	Call your clinic to schedule an appointment. Days and hours vary.	 varies	\$\$ – \$\$\$
 CARE NOW	Urgent care Minor cuts, sprains and burns, skin rashes, fever and flu, X-rays and lab testing	No appointment necessary. Available seven days a week, but specific hours vary.	 varies	\$\$\$\$
 CARE IMMEDIATELY	Emergency room (ER) Chest pain, shortness of breath, uncontrolled bleeding, poisoning or other life-threatening illnesses or injuries	Immediately call 911 or go to your nearest ER anytime.	 longer, unless life-threatening	\$\$\$\$\$

Please note: The conditions listed are for example only and not a complete list.

*Mental health visits are by appointment only, 7 a.m. to 10 p.m. local time.
 Doctor On Demand® by Included Health is an independent company providing telehealth services.
 Make sure your doctor and clinic/hospital are in your network before receiving care. This will make sure you receive the highest level of benefits.
 Each health care provider is an independent contractor and not our agent.



DOCTOR ON DEMAND

GET QUICK, CONVENIENT CARE THROUGH YOUR SMARTPHONE, TABLET OR COMPUTER

- Medical care available on demand or by appointment 24 hours a day, seven days a week, 365 days a year
- Mental health care available by appointment between 7 a.m. and 10 p.m. local time
- Real-time eligibility and claims processing specific to your benefits
 - Medical: \$60 or less
 - Psychology: \$75 – \$144
 - Psychiatry: \$288 first time; \$131 for follow-up visit

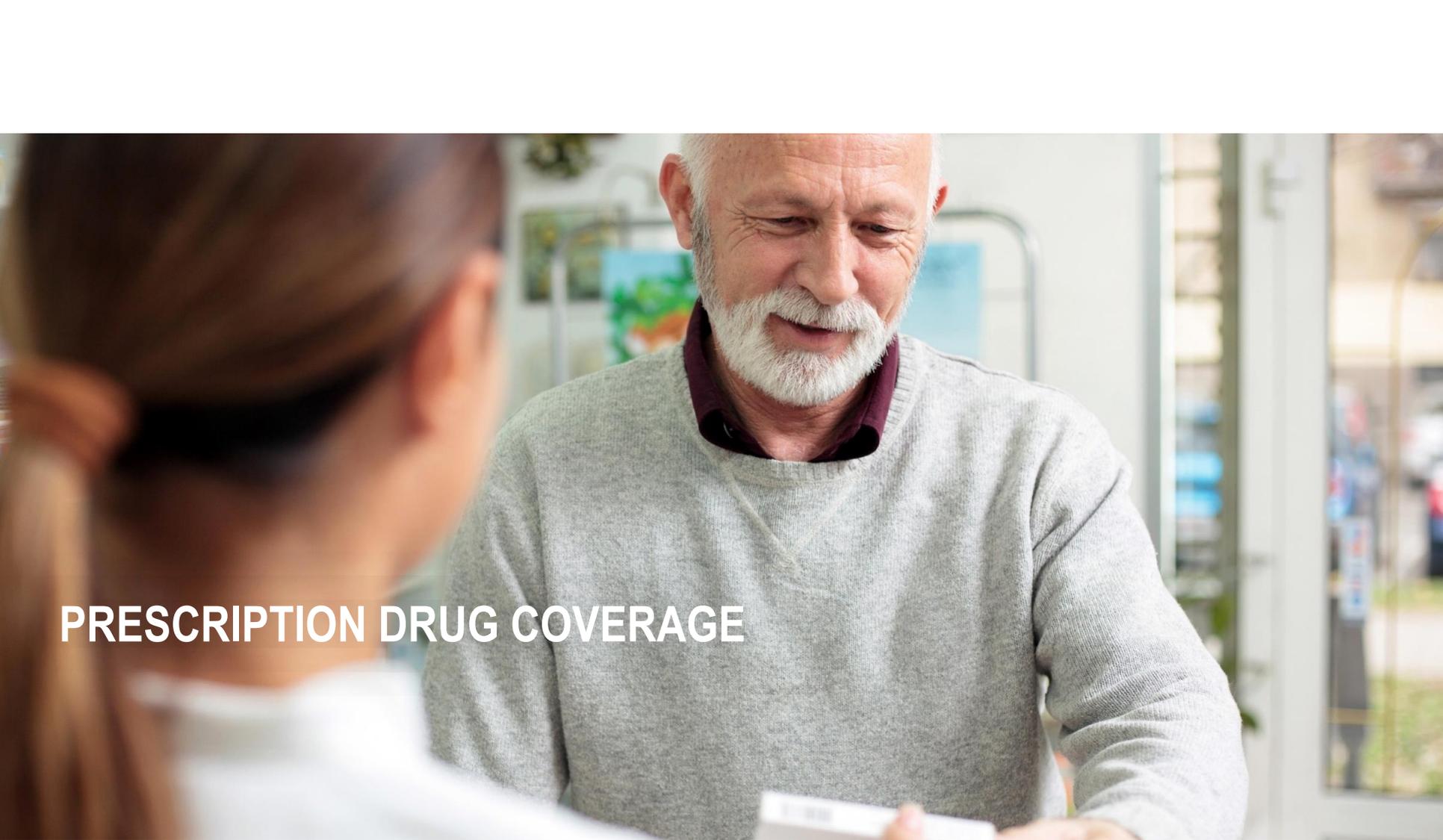


+
Dr. Ian Tong
★★★★★



Download the app or visit www.doctorondemand.com/bluecrossmn





PRESCRIPTION DRUG COVERAGE



GET THE MOST OUT OF YOUR PLAN

Search for in-network pharmacies and drugs on your drug list (formulary) or call the number on your member ID card.

FIND A PHARMACY IN YOUR NETWORK	CHECK YOUR DRUG LIST / FORMULARY
1. Visit bluecrossmnonline.com or your member portal (once your plan is effective)	1. Visit bluecrossmnonline.com or your member portal (once your plan is effective)
2. Select “Find a Doctor or Rx”	2. Select “Find a Doctor or Rx”
3. Select “Find a Pharmacy.” This takes you to the Prime Therapeutics website	3. Select “Find a Drug”
4. Choose Classic Pharmacy Network	4. Click on “Search covered drug lists”
5. Enter location details	5. Use the drop-down menu and select KeyRx



PHARMACY BENEFITS

NETWORK

Your pharmacy benefit plan uses the **Classic Pharmacy Network**:

- **Classic Pharmacy Network** provides access to a large network of pharmacies with top retailers – including Walgreens – and independent pharmacies. Please note that CVS / Target is not included

DRUG LIST / FORMULARY

This is a list of drugs preferred by your plan. Yours is called **KeyRx**:

- **KeyRx** is a managed formulary that provides access to safe and effective prescription drugs at the lowest cost of care. There is no coverage for medications not on the formulary
- **Closed formulary** – does not include coverage for drugs not on your drug list unless medically necessary



PRESCRIPTION SUPPORT



PRIOR AUTHORIZATION

A process to ensure appropriate prescribing and use before a drug will be covered. Coverage may be approved after certain criteria are met.



QUANTITY LIMITS

The maximum amount of drug allowed for each fill. Quantity limits are based on the number of days or number of units (pills, capsules, ounces, etc.). Limits promote safe, cost-effective drug use reducing waste and overuse.



STEP THERAPY

A process that requires trying another drug that may be more safe, clinically effective and, in some cases, less expensive before a more expensive drug is approved.





HEALTH AND WELLBEING RESOURCES



ONLINE CARE

All you need is a smartphone, tablet or computer to get fast, convenient care from Doctor On Demand®

LET THE DOCTOR COME TO YOU

- Board-certified doctors available 24 hours a day, seven days a week
- Licensed psychologists and psychiatrists available for next-day appointment
- Treat many common medical conditions
- Cost is typically less than an in-person visit



Sign up at www.doctorondemand.com/bluecrossmn



Doctor On Demand® is an independent company providing telehealth services.



ONLINE BEHAVIORAL HEALTH THERAPY

Learn to Live provides convenient, confidential support for stress and anxiety, depression, insomnia, social anxiety, substance use, panic, and resiliency

Interactive lessons help you explore situations that trigger negative emotions and give you tips and strategies to work through them.

- Self-paced, interactive lessons in English or Spanish
- Accessible on desktop or mobile app
- Coaching support
- Completely confidential

For members of  MN

Visit www.learntolive.com/partners to get started.



Learn to Live is an online cognitive behavioral therapy program for people dealing with stress, insomnia, depression, anxiety or substance use.

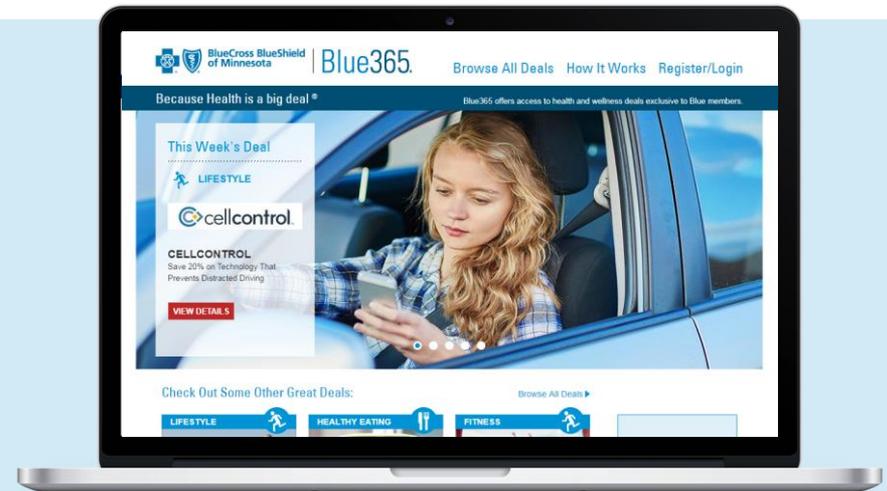


www.blue365deals.com/bcbsmn

WELLNESS DISCOUNT MARKETPLACE

Get discounts on products and services that complement your health from Blue365®. Weekly deals from leading national brands on:

- Fitness Your Way — \$29 monthly membership fee for access to a network of more than 10,000 gyms nationwide
- Healthy eating options
- Personal care (e.g., lasik, dental care, acupuncture, massages, etc.)
- Travel
- And more



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QUITTING TOBACCO AND VAPING

Make a solid plan to kick nicotine products for good

QUITTING IS HARD. BUT YOU'VE GOT SUPPORT.

A wellness coach will work with you to develop a quit plan tailored to you:

- Identify potential hurdles
- Create strategies to manage urges
- Check in regularly

You'll also have access to online resources to help keep you on track.



Call **1-888-662-BLUE (2583)** or TTY **711**.

Monday through Thursday, 8 a.m. to 8 p.m., Central Time
Friday, 8 a.m. to 6 p.m.



DIABETES AND HEART DISEASE PREVENTION

Feel healthy for life with Omada

Omada® is an online program that can help you lose weight, feel great and lower your risk for type 2 diabetes and heart disease.

You get personal support and interactive tools to get and keep you motivated:

- One-on-one guidance from a professional Health Coach
- A welcome kit with a wireless smart scale and other tools to track your progress
- An online peer group for motivation from people who get it
- Interactive weekly lessons on nutrition, fitness, sleep and stress
- On-the-go mobile app convenience

For members of  MN

See if you're eligible at
www.omadahealth.com/bcbsmn1

The Omada program is from Omada Health, Inc., an independent company providing digital care programs.





Gallagher

Insurance | Risk Management | Consulting

Kavira Health Primary Care

kavira.

Care, like it should be.



Mobile App

Secure, HIPAA-compliant messaging and videochats with expert providers



House Visits

When in-person care is needed, our clinicians come to you



Free Care

Employees and their families get unlimited, *free care. No copays, no insurance hassles, no surprise bills

**\$5 fee for home visits for HSA-eligible employees*



Rx Refills & Delivery

Prescription management and Rx delivery

www.kavirahealth.com

Services List

Acute Conditions We Treat:

- 1st degree burns
- Asthma
- Athlete's foot
- Bronchitis
- Bug bites
- Cold sores
- Cough, cold & flu
- Diarrhea
- Ear concerns (pain, drainage, wax)
- Hand, foot, mouth
- Headache
- Mononucleosis
- Muscle or joint pain
- Pink eye
- Rashes
- Sprains and strains
- Sinus infection
- Sore throat
- Stitches or staples
- Suture removal
- UTI
- Vaginitis (yeast or BV infection)
- Various viral illnesses
- Wart evaluation
- Many more

Chronic Conditions We Treat:

- Acne
- Anemia
- Anxiety / Mild-moderate depression
- Asthma
- Constipation
- COPD
- Diabetes type 2
- Eczema
- Epi-pen refills
- GERD / Reflux
- Gout
- High cholesterol
- Hypothyroidism
- Menopause
- Obesity
- Osteoarthritis
- Osteoporosis
- Seasonal allergies

Imaging:

- X-rays
- EKGs

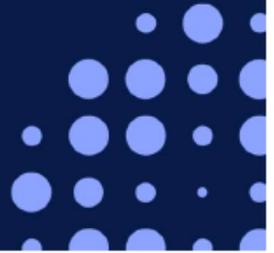
Preventive

- Annual physicals
- Sports physicals
- Contraception
- Tobacco / nicotine cessation
- Well child
- Wellness goals

Behavioral Health Counseling:

- Abuse
- Addiction
- Anxiety
- Depression
- Domestic violence
- Trauma
- Relationship counseling
- Stress
- Workplace challenges

www.kavirahealth.com



Included Labs

Lab Test	Reason	Lab Test	Reason
Fasting Lipid Panel	Annual Physical	FSH & Luteinizing Hormone (LH)	Women's Health
CBC w/ Differential / Platelet	Annual Physical	Wet Prep	Women's Health
Complete Metabolic Panel	Annual Physical, Diabetes	Prostate Level	Men's Health
Basic Metabolic Panel	Annual Physical, Diabetes	Uric Acid Level	Gout
Hemoglobin A1c	Diabetes	CBC, No Differential / Platelet	Anemia
Fasting Glucose	Diabetes	Folate Level	Anemia
Triiodothyronine (T3)	Thyroid	Ferritin Level	Anemia
Thyroxine + T4	Thyroid	Amylase	Pancreas
Thyroid Stimulating Hormone (TSH)	Thyroid	Lipase	Pancreas
Thyroid Panel	Thyroid	ANA	Autoimmune
Urinalysis	Genitourinary	Mononucleosis Test	Other
Urine Culture	Genitourinary	Magnesium	Other
Prolactin Level	Women's Health	Vitamin B12	Other
Follicle-Stimulating Hormone (FSH)	Women's Health	Fe+Total Iron-Binding Capacity (TIBC)	Other
Pregnancy Test (hCG)	Women's Health	Vitamin D, 25-hydroxy	Other

Your Partner in Health

“It was so convenient and easy. The nurse practitioner I spoke with was Angelica. She was very responsive **and even checked back to make sure I was feeling better”**

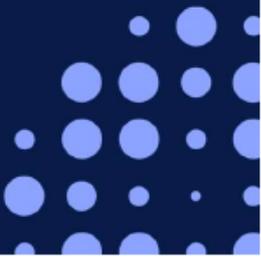
“I just wanted to give you an update and a word of thanks. After our visit, I went to urgent care last night and got a CT scan, finding out it was what you suspected: appendicitis. **If I hadn’t acted on it yesterday, it could’ve gotten really messy** this weekend! ...”

“Kavira is literally changing my life...”

“This system has made getting my care needs met so incredibly accessible, efficient, and comfortable.”

“I truly feel a relationship with the providers and I am just grateful...”

9/10 Across All Patient Encounters



Try Us Out

Kavira is FREE (or just \$5 per home visit if on an HSA-eligible plan) for you and your family to use however often you need it.

So next time you aren't feeling the best, have a question about a mysterious ache or pain, need to speak to a therapist, or just want some wellness advice, think of Kavira.

Activate Your Care:



Call or text: (763) 373-3856

www.kavirahealth.com/download





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Dental Insurance HealthPartners

Dental Benefit Summary

Network	In Network PPO	Out of Network PPO*
Calendar Year Maximum	\$1,500	\$1,500
Calendar Year Deductible	None	None
Diagnostic and Preventive (cleanings/xrays/exams/filings)	100%	100%
White fillings/root canal/ Complex Oral Surgery/Surgical Periodontics	80%	80%
Major Services – Restorative crowns & onlays	You pay 50%	You Pay 50%
Bridges/Dentures/dental implants	You pay 50%	You Pay 50%

- Out-of-network subject to usual and customary rate.
- Find an in-network provider at www.healthpartners.com/dentalopenaccess.
- Call HealthPartners Member Services at **952-883-5000** or **800-883-2177**.



Dental Premiums

Semi-Monthly Premiums (24 Pay-Periods)

Coverage Tier	Dental Premiums Semi-Monthly
Employee	\$0
Family	\$26.25

Apple Tree Dental pays 100% of employee dental premiums!

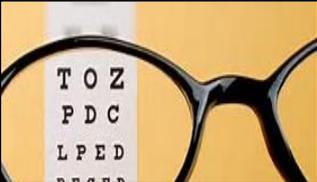


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Vision Insurance EyeMed

Voluntary Vision Benefit Summary

Vision Care Services	Member Cost In-Network	Out-of-Network Reimbursement*
Comprehensive Vision Exam:	\$10 Copay	Up to \$30
Frames:	\$0 Copay; \$130 Allowance, 20% off remaining balance over \$130	Up to \$65
Standard Plastic Lenses: Single Vision Bifocal Trifocal Standard Progressive Lens	\$25 Copay \$25 Copay \$25 Copay \$90 Copay	Up to \$25 Up to \$40 Up to \$60 Up to \$40
Contact Lenses: (Contact lens allowance includes materials only) Conventional Disposable Medically Necessary	\$0 Copay; \$130 Allowance, 15% off remaining balance \$0 Copay; \$130 Allowance, plus remaining balance \$0 Copay; Paid-in-Full	Up to \$104 Up to \$104 Up to \$200
Frequency: Exam Frame Lenses or Contact lenses	Once every 24 months Once every 24 months Once every 12 months	n/a
Additional Discounts: Additional Glasses Lasik Hearing Care	40% off additional full pair of prescription glasses 15% off Retail; 5% off Promotion 64% off Hearing Exams (w/Amplifon)	

The information contained herein is subject to the disclosures and disclaimers on the Disclaimers page of this presentation.

Voluntary Vision Premiums
Semi-Monthly Premiums (24 Pay-Periods)



Coverage Tier	Vision Premiums Semi-Monthly
Employee	\$3.59
Employee + 1	\$7.17
Family	\$10.28

Visit www.eyemedvisioncare.com for more information, to locate in-network providers, or to view your benefits in more detail.





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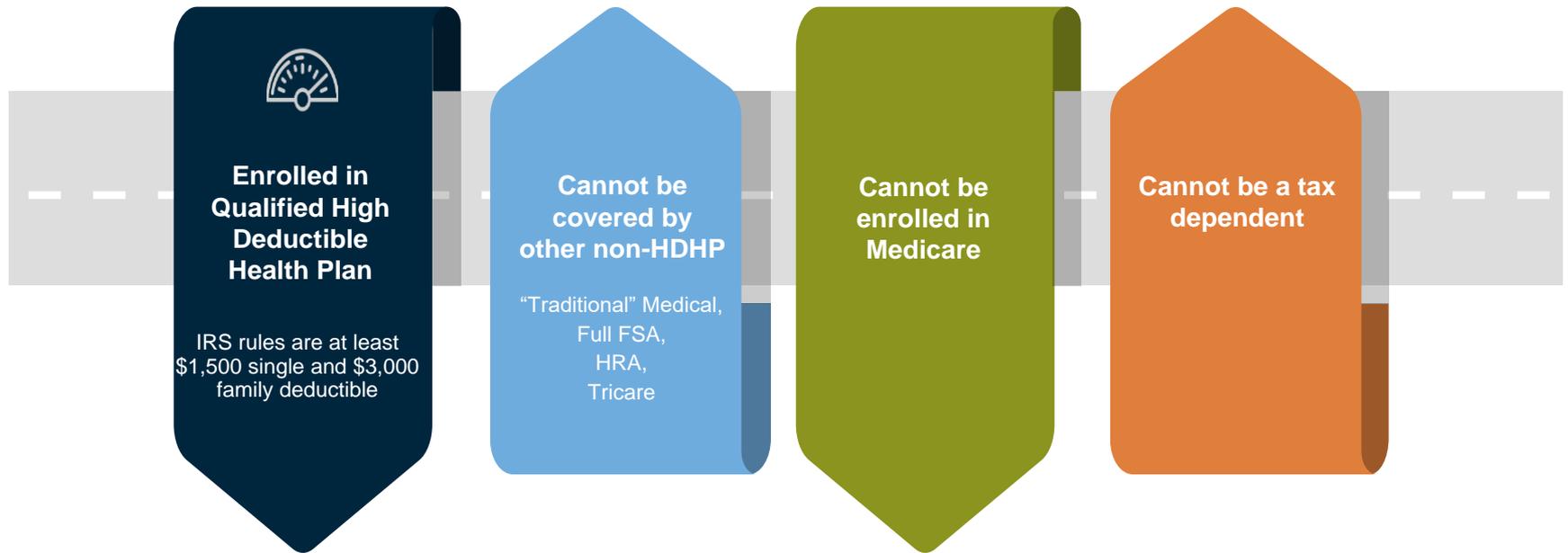
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Health Savings Account (HSA)

Bremer Bank

Health Savings Account (HSA)

Road to Eligibility to Contribute to an HSA



Health Savings Account (HSA)

Contributions

- 2024 Annual limit is increasing
- Change your contributions at anytime throughout the year
- Unused balances rollover
- Portable – you own the account
- TIP! Consider investing funds to grow account

Enrolled Coverage	2024	2025
Individual	\$4,150	\$4,300
Family	\$8,300	\$8,550
Age 55+	Add \$1,000	

Contribution	Individual Coverage	Family Coverage
Employer	\$ _____	_____
Employee	+ _____	+ _____
Maximum	\$4,150	\$8,300
Age 55+	+\$1,000	+\$1,000

You may contribute your own funds tax-free into your HSA to pay for health care expenses on a tax-free basis.



Health Savings Account (HSA)

Expenses

- Accountholder, Spouse, Tax Dependent expenses



TAX FREE

Qualified Expenses

- Medical, Dental, Vision
- Over-the-counter meds, menstrual products
- Some Insurance Premiums:
 - COBRA
 - If 65+ Medicare B, D, and Advantage

Non-Qualified Expenses

- Taxable
- +20% Penalty
- No penalty, taxable only:
 - Medicare eligible based on age
 - Disabled (IRC 72)
 - Death

Notes: you must have funds in the account to reimbursement expenses. And you must establish the account before you can reimburse for incurred expenses.

This is a summary only. Learn more: [IRS Publication 969](#) & [IRS Publication 502](#)



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Flexible Spending Accounts (FSA)

Health Equity

Flexible Spending Accounts

Health FSA

Elections

- Employees elect up to the limit annually to set aside pre-tax money to pay for eligible expenses
- Can only make mid-year changes to the election if there is a qualifying event
- IRS maximum amount is \$3,200 (2024)
- All remaining funds left in your account will not carry over
- Use it or lose it—elect carefully!

Health FSA – Full Scope

- **Full-scope is used when employee and spouse are not contributing to an HSA**
- FSA funds used to reimburse eligible medical, vision and dental expenses

Health FSA- Limited Scope

- **Limited-scope is used when employee or spouse are contributing to an HSA**
- FSA funds **limited** to eligible vision and dental expenses only



*This is a summary only.
Learn more: [IRS Publication 969](#) & [IRS Publication 502](#)*

Flexible Spending Accounts

Dependent Care FSA

Contributions

- Elect up to \$5,000 per family annually to pay for child care while working
 - Cannot change election mid-year without a qualifying event
 - Use it or Lose It
- Pre-tax account: save money!



Expenses

Eligible Expenses:

- Licensed day care facilities
- Preschool programs
- After-school programs
- In-home child and dependent care services
- Elder care – *dependent care expenses for tax dependents over the age of 13 require proof of medical necessity*
- Day camp expenses

Qualifying Person

- Your child who is your dependent and who was under age 13 when the care was provided;
- Your spouse who wasn't physically or mentally able to care for himself or herself and lived with you for more than half the year; or
- A person who wasn't physically or mentally able to care for himself or herself, lived with you for more than half the year – see *IRS publication 503 for more details to determine if they are a qualified person*

This is a summary only. Learn more: [IRS Publication 503](#)



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Disability and Life Insurance

Lincoln Financial Group



Provided at no
cost to you!

Short-Term Disability Insurance

- Administered by Lincoln Financial and paid for 100% by the Company
- Elimination Period (must be satisfied before benefits are paid):
 - 0 day elimination period for accidental injury
 - 7 day elimination period for illness, including pregnancy
- 60% of your pre-disability income up to \$500 maximum weekly benefit
- Benefit duration up to 13 weeks





Provided at no
cost to you!

Long-Term Disability Insurance

- Administered by Lincoln Financial and paid for 100% by the Company
- 90 day elimination period
- 60% of your pre-disability income replacement up to a monthly maximum of \$5,000
- Benefits payable until you reach your Social Security Normal Retirement Age
- Pre-existing condition limitation: **3/12**
 - Pre-Existing Condition means a Sickness or Injury for which you the employee received treatment within 3 months prior to the effective date of coverage for this benefit. Coverage for a Pre-Existing Condition is limited for the first 12 months of coverage following the effective date.





Provided at no
cost to you!

Basic Life and AD&D Insurance

- Administered by Lincoln Financial and paid for 100% by the Company
- Company pays for a Life Insurance benefit of 1x your annual salary to a maximum of \$100,000
- Provides a benefit if you pass away or become seriously injured a result of an accident
- Matching AD&D Benefit available
- Reminder! Review and update your Beneficiary Designation forms: Name, DOB and SSN



Voluntary Term Life and AD&D Insurance

- Administered by Lincoln Financial
- 100% employee-paid
- Purchase additional coverage for yourself, your spouse and dependent children at competitive group rates!
- You may purchase additional coverage as follows:
 - Employees – 5 times annual salary to a maximum of \$500,000, in increments of \$10,000
 - Spouses – Up to 100% of the employee amount to a maximum of \$250,000, in increments of \$5,000
 - Children – Flat \$10,000 of benefit
- Newly eligible employees may purchase Voluntary Term Life coverage up to the Guarantee Issue without providing evidence of insurability (\$150,000 for employees, \$30,000 for spouses, no GI for children)
- Any application for coverage over the Guarantee Issues limits requires evidence of insurability and must be approved
- Age-rated policy—please see Human Resources for plan cost



Voluntary Term Life and AD&D Insurance

Limited Open Enrollment!

- Any employees with existing coverage under this policy may increase up to 2 benefits increments of \$10,000 to a total increase of \$20,000
- Spouses with existing coverage under this policy may increase up to 2 benefit increments of \$5,000 to a total increase of \$10,000
- Late entrants (anyone who previously waived coverage during their initial eligibility may be subject to medical underwriting or history questionnaire before coverage application will be approved by Lincoln)





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Employee Assistance Program ComPsych Guidance Resources

Employee Assistance Program (EAP)

- Confidential consultation resource
- Administered by Lincoln Financial Group & ComPsych
- Consultation options:
 - 1 free 30-minute in-person consultation per legal issue + reduced fees
 - 4 face-to-face sessions per issue, per year
- The EAP Service can help you and your immediate family members with;
 - Child care and Elder care
 - Alcohol and drug abuse
 - Legal and financial help
 - Difficulties in relationships
 - Stress and anxiety

COMPSYCH[®]
— The Guidance Resources Company[®] —



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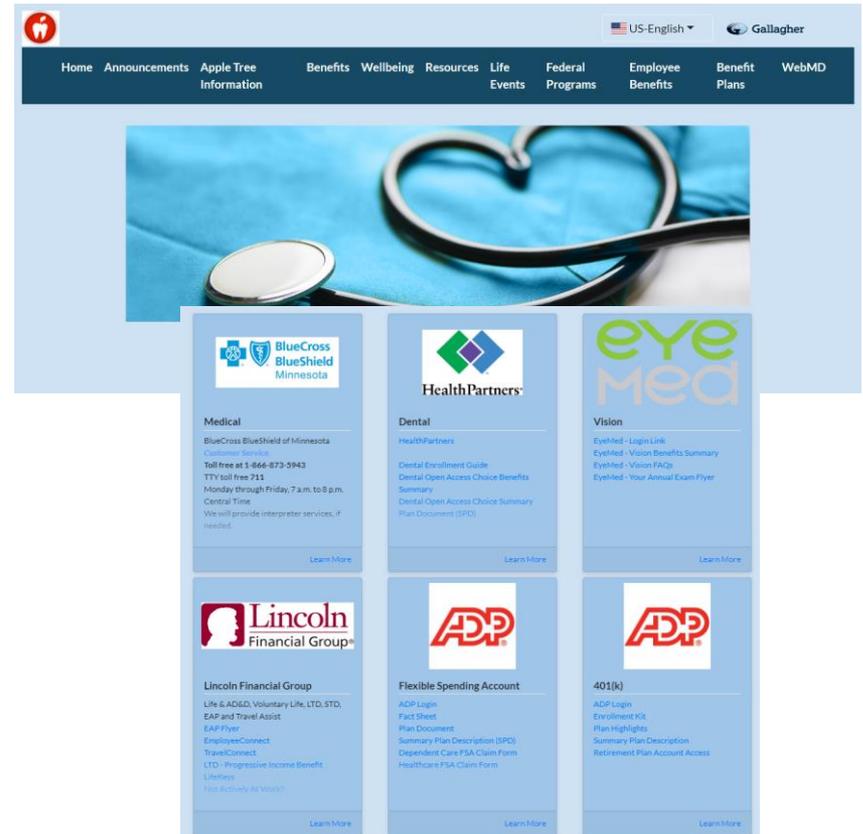
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Open Enrollment & Next Steps

Apple Tree Dental Benefits Center!

- <https://c2mb.ajg.com/appletreedental/home/>
- Connect2MyBenefits has our benefits web site that provides you and your family with 24/7 access to comprehensive benefit information, including
- Benefit Plan Details
- Carrier Resources & Links
- The BRANCH Newsletters
- Wellness Information
- Documents and Disclosures
- Life Event Checklists
- Health Care Reform
- Financial Calculators



Enrollment Timeline & Next Steps

- **Open Enrollment Runs August 19th – 30th, 2024**
- Review your coverage and benefit plan offerings and make the following decisions
 - Add or drop spouses and dependents
 - Enroll in new benefits or change current elections
 - Choose your pre-tax payroll deductions for the FSA and HSA
 - Update your beneficiary designations (Life Insurance and HSA)
 - Verify personal information
- You will not be able to make changes to your benefit elections outside of your Annual Open Enrollment period, unless you experience a Family Status Change (such as marriage, death, birth/adoption of a child, etc.). You must alert Human Resources within 31 days of a Family Status Change.

**Benefit Elections must be completed by
Friday, August 30th, 2024!**



Online Enrollment System

General Instructions

1. Log into Your ADP Web Site
2. Access the Employee Self Service* Web site <https://workforcenow.adp.com>
3. Click User Login. Enter your User ID and Password.
4. Click Log In.
5. Follow screen prompts or click on Myself/Benefits/Enrollments and you should see the Open Enrollment Option.
6. Follow the prompts through the enrollment process and SAVE/REVIEW.

Detailed instructions are posted on ATD's Intranet at Shared Documents>Human Resources>Benefits Information>October 2024-2025 Open Enrollment Information.



Questions?

New Hires go through a new-hire orientation!

Please reach out to Human Resources with questions.

Do you have a question during Open Enrollment?

Please attend a drop-in Q&A session with our Gallagher benefits broker or reach out to Human Resources with questions.

Q&A Session will be held:

Thursday, August 22nd, 2024 – 7:30 to 9:00 am on Teams

Drop-in whenever it works for you and get your benefits questions answered during Open Enrollment!

Human Resources will send out instructions for joining the Team's meeting.



Thank you!

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be directed to your Human Resources/Benefits Department.



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