



# Your health plan

2025 Open Enrollment

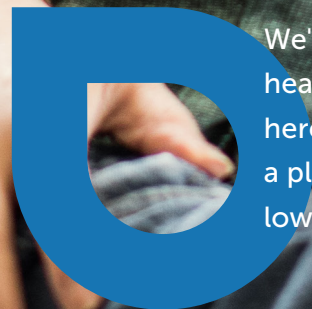
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Your medical plan benefits . . . . .	3
Your dental plan benefits . . . . .	8
Extra support . . . . .	10





# Your partner for good<sup>SM</sup>



We're 26,000 partners strong, working together to support your health every day. You can rely on a top-rated Member Services team – here to help you understand your plan and answer your questions. It's a plan you can trust, benefits that benefit you and a commitment to lower costs. We're your partner for all of it. Your partner for good.



HealthPartners



# Getting started

The more you know about your plan, the easier it is to make good decisions for your health and wallet. We're happy you're trusting HealthPartners. Here are some tips.

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## What to do next

- **Call us** with questions at **952-883-5000 or 800-883-2177**
- **Sign in** or create an account at **healthpartners.com**

We can help you make choices you'll feel good about.



I'm thankful I had someone to help me understand my own health insurance. I can walk you through your plan now, so you're prepared when you use it later.

**Lauren, Member Services**

## Understand your costs

You'll likely see these terms during enrollment and throughout the year. Knowing how these costs work with your plan will help you avoid unexpected charges.

- **Premium** – how much you pay for your plan, usually taken out of your paycheck
- **Deductible** – the amount you're responsible to pay for care before your plan helps cover costs, not including your premium
- **Copay** – a flat fee you pay each time you visit the doctor or get a prescription
- **Coinsurance** – the percentage you pay for the total cost of care. Your plan covers the rest
- **Out-of-pocket maximum** – the most you'll pay each year for care covered by your plan
- **Allowed amount** – the maximum amount your plan will pay for a covered service. Also called an eligible expense, payment allowance or negotiated rate
- **Summary of Benefits and Coverage (SBC)** – lists the services your plan covers and how much

## Check out your extras

Your health plan does more than just process claims. Learn more about the perks, special programs and discounts you have available to help you live your best life.

## Use your online account

With an online account, you can get up-to-date personal health plan information in one simple place.

- Find guidance with personalized alerts and recommendations
- See claims and how much you could owe
- Search for doctors in your network
- Check your spending amounts
- View your member ID card
- Get cost estimates for care
- Review your formulary (drug list) and compare prescription costs
- Manage your health on the go with the HealthPartners mobile app

# Deductible plan

You have every reason to get your preventive care to stay healthy – it's covered 100%.

## What you'll pay

### Deductible, then coinsurance

This plan has a deductible. That's the amount you pay for care before your plan helps cover costs.

After that, your plan splits the bill with you. That's called coinsurance. For example, you might pay 20%, and your plan would pay the other 80%.

### Out-of-pocket maximum

Once you reach a limit, called an out-of-pocket maximum, you don't pay any more – your health plan pays for all in-network care.

## What your plan pays for

Your health plan fully pays for in-network preventive care, even before you've paid your deductible.

After you hit your deductible, your plan chips in on things like:

- Convenience care and virtual care
- Specialty care (no referrals needed)
- Prescriptions

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## How to get more info

- **See plan details** in your **Summary of Benefits and Coverage (SBC)** in your enrollment materials
- **Call us** with questions at **952-883-5000 or 800-883-2177**

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**TIP:** Get your yearly checkup, vaccines and screenings. They're all covered by your plan.

**[healthpartners.com/preventive](https://healthpartners.com/preventive)**

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# Open Access<sup>SM</sup> network and Achieve network

Get the most options from our largest network, or choose Achieve to get access to the best local doctors at the lowest cost.

## Choosing Open Access

You can see any doctor in the Open Access network. With over one million network providers and 6,000 hospitals, you can see your favorite doctor or specialist, locally or nationally. Or you can pick one from the network on your own – no referral needed.

**Search the Open Access network** for your doctor or find a new one at [healthpartners.com/openaccess](https://healthpartners.com/openaccess)

## Choosing Achieve

We review patient surveys, claims info and overall health care data. The doctors in the Achieve network consistently have happier, healthier patients at a lower overall cost – and you can see any doctor in the network. If you need additional care, your primary care doctor can help you find a specialist. Or you can pick one from the network on your own – no referral needed.

**Search the Achieve network** for your doctor or find a new one at [healthpartners.com/achieve](https://healthpartners.com/achieve)

## How to get more info

- See plan details in your **Summary of Benefits and Coverage (SBC)** in your enrollment materials
- Call us with questions at **952-883-5000 or 800-883-2177**

# Care today for a healthy tomorrow

Prevent problems before they start so you can enjoy the things you love. Your health plan covers in-network preventive care at 100%. You don't pay anything.

## Protect your health with routine visits

Even if you're not sick, it's smart for you and your family to go in for regular checkups, screenings and well-child visits. If there are any issues, you can catch them early – when treatment is most effective.

## Preventive care includes

- Screening tests to check if you have high blood pressure, diabetes or high cholesterol
- Colorectal, breast and cervical cancer screenings
- Routine pre- and post-natal care
- Vaccines
- Weight, alcohol and tobacco screenings
- And more!

Visit [healthpartners.com/preventive](https://healthpartners.com/preventive) to find out what care is recommended for you.

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## Questions about benefits?

We can help. Call Member Services at **952-883-5000 or 800-883-2177**



I always encourage members to go in for their screenings. If you're ever wondering whether a service counts as routine preventive care, give us a call.

**Renae, Member Services**

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# Fast, easy, affordable care

Life is busy. Save time and money by using telemedicine care for many common conditions. Your plan includes options for treatment from your phone or computer.

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## Questions about benefits?

We can help. Call Member Services at **952-883-5000 or 800-883-2177**

### Virtuwell®

#### Your 24/7 online clinic

Start your visit any time with any device – no appointments, video or downloads needed. Answer a few questions online to get same-day treatment for more than 60 common conditions. Nurse practitioners give you a diagnosis, treatment plan and prescription (if needed). You'll usually pay less than an in-person visit, and you're only charged if Virtuwell can treat you. Plus follow-up care about your treatment is free.

Get better faster at **virtuwell.com**.\*

### Doctor On Demand

Live video visits with a doctor include assessment, diagnosis and prescriptions for urgent care like cold & flu, skin conditions and allergies. When you create a free member account, your visit price is always shown up front, without any surprise bills later.

Register at **doctorondemand.com**.

### Teladoc

Fill out a brief medical history to connect with medical experts by phone, video or mobile app. Whether it's a prescription sent to the pharmacy of your choice, the guidance to move forward or a review of a preexisting condition, they're ready to help.

Get started at **teladoc.com**.



The next time you're sick, your health plan has affordable options to help you get better, faster.

**Julie, RN, Nurse Navigator**

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\*Available anywhere in the U.S. to residents of AZ, CA, CO, CT, IA, MI, MN, NY, ND, PA, SD, VA and WI.

# Dental Distinctions<sup>SM</sup> plan

A healthy mouth may help decrease the risk of diabetes, heart attacks and strokes. That's why our dental plans cover 100% of all in-network preventive care.

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## How to get more info

- **See plan details** in your **Summary of Benefits (SOB)** in your enrollment materials
- **Call us** with questions at **952-883-5000 or 800-883-2177**
- **Search the network** for your dentist or find a new one at **healthpartners.com/dentaldistinctions**

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**TIP:** By seeing a dentist in benefit level 1, you may get extra care covered by your plan, like more frequent teeth cleanings if you get a lot of cavities.

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## What your plan pays for

Preventive care is covered at no cost to you when you see a network dentist. It also helps cover:

- HealthPartners MouthWise Matters – extra exams, gum care and cleaning are covered 100% if you're pregnant, or if you have diabetes and are at risk of gum disease
- The cost of other dental care at the amounts shown in your Summary of Benefits

## What you'll pay

### Deductible or coinsurance

Things like getting a cavity filled might cost a deductible. That's the amount you have to pay before your plan helps with the cost. There's also coinsurance, which is a percent of the bill.

### Annual maximum

Your dental plan max is a bit different than your medical plan. It's the most your plan will pay for dental care each year. You're in charge of the rest.

## Plan highlights

This plan has two benefit levels. Benefit level 1 is a narrow network where you'll get great care with low out-of-pocket costs. Benefit level 2 is where you'll find more dentists, but your out-of-pocket costs could be higher.

## Where you can get care

Pick the care and dentist that's right for your teeth and your wallet.

### Benefit level 1

With this narrow network, you may get extra care covered by your plan. It includes HealthPartners Dental Group and other leading clinics in the Twin Cities that provide savings and care to help improve your overall health.

### Benefit level 2

Get lots of clinic options so you can choose the dentist who works best for you.



## Unlock extra dental health benefits

Your dental health has an impact on your overall health. And when your dental health needs extra care, MouthWise Matters provides added benefits for people who are pregnant or living with diabetes.

### How to get more info

- **See plan details** in your **Summary of Benefits (SOB)** in your enrollment materials
- **Call us** with questions at **952-883-5000 or 800-883-2177**

### What it covers

If you're living with diabetes or are pregnant and at risk of gum disease, MouthWise Matters covers:

- 100% of services to help control gum disease
- Extra dental checkups and cleanings
- Root planing and scaling – a deep cleaning for your teeth

All other services, like fillings and root canals, are covered according to your Summary of Benefits.

### How it works

It's easy to get the care you need to stay healthy:

- Visit a network dentist
- Get 100% coverage on medically necessary gum treatment

When gum treatment is needed, there's no coinsurance or deductible. Plus, your plan will pay even if you've reached your annual maximum for the year.

# Get the most from your meds

Use these tools and resources to learn important information about your prescriptions, including cost and coverage, and how to make sure they're working properly.

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## Questions about benefits?

We can help. Call Member Services at **952-883-5000 or 800-883-2177**

## Check your formulary

A formulary, also called a drug list, tells you what medicines are covered by your health plan and generally how much you'll pay. You'll also learn what steps you may need to take before you can start a medicine, such as submitting prior authorization from your doctor or meeting quantity limits.

1. Get started at **healthpartners.com/preferredrx**.
2. Search by the name or type of medicine.
3. Use your Summary of Benefits and Coverage (SBC) in your enrollment materials to learn more about your coverage, copay or cost share.

## Try generics

Generics are as safe and effective as brand-name medicines and made with the same active ingredients, but they cost a lot less. They also might come in a different size, shape or color than the brand-name version. Talk to your doctor or pharmacist about switching to a generic medicine.

## Search for the lowest cost

Medicine prices can change from pharmacy to pharmacy. Use our prescription shopping tool to compare prices at nearby pharmacies. You'll find real-time prices, including all available discounts so you can be sure you're getting the best possible price. Get started at **healthpartners.com/pharmacy**.

## Talk with a pharmacy navigator

One call will give you answers to your questions around benefits, coverage, costs, formularies and more. Call Member Services at the number on the back of your member ID card. Ask to talk with a pharmacy navigator.

## Meet with a pharmacist

If you or a family member are managing multiple or complex medicines, or if you have questions about interactions or side effects, we can help. Our specially trained pharmacists are experts at looking at your medications holistically. At a one-on-one appointment, they'll review your medicines to make sure they're working and right for your lifestyle. Learn more at **healthpartners.com/mtminfo**.

# Medicine delivered to your door

Skip the trip to the pharmacy. Get your prescriptions mailed to your home with WellDyne.

## 5 great things about mail order

1. It's easy to refill your medicine online or with our mobile app
2. Track your package every step of the way, your way – by text, email, phone or online
3. Save money with 90-day supplies and free standard shipping
4. Get your package delivered safely and discreetly in 7-10 days
5. We are available 24/7 to help you with your order – just call the dedicated phone line

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**TIP:** You can track the status of your order at each step, from receipt and processing to shipping and delivery.

To check the status of your order, sign in to your online account or call our responsive phone system.

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## How to get started

- Call **800-591-0011**
- Visit **[healthpartners.com/mailorder](https://healthpartners.com/mailorder)**



It's hard to get to the pharmacy each month. Mail order pharmacy delivers your meds quickly and easily to you, just like your favorite stores.

**Dave, Pharmacist**

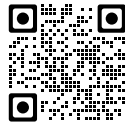
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# Pharmacy solutions in the palm of your hand

Use our prescription shopping tool to save both time and money.

## Compare prices at nearby pharmacies

You'll find real-time prices, including all available discounts, so you can be sure you're getting the best possible price. You can also use it to transfer prescriptions to a lower-cost pharmacy and see what's covered by your health plan. Get started at [healthpartners.com/pharmacy](https://healthpartners.com/pharmacy) and scan the code below to view a short video highlighting how to use the tool.

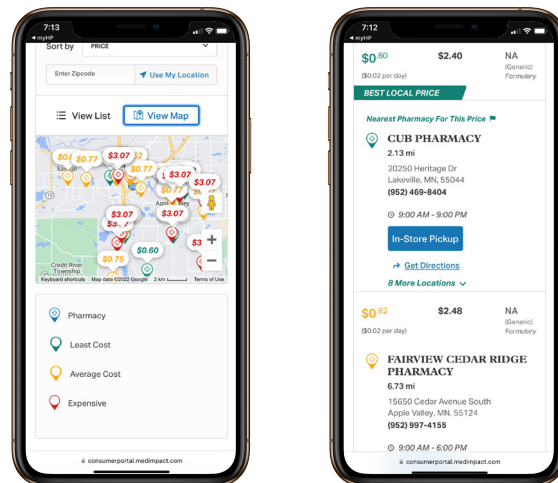


[healthpartners.com/viewrxtoolvideo](https://healthpartners.com/viewrxtoolvideo)

## Sign in to your account

Manage your health and your plan at [healthpartners.com](https://healthpartners.com) or the **HealthPartners** mobile app.

Don't have an account yet? It's quick and easy to sign up— you'll just need your member ID card.



## You can also use the prescription shopping tool to:

- See available refills
- Check the status of prior authorizations
- Download tax reports of what you spent in the last year



# Here for you, 24/7

Call us at one of these numbers if you have questions about your health or what your plan covers. We're ready to help.

## Member Services

### For questions about:

- Your coverage, claims or plan balances
- Finding a doctor, dentist or specialist in your network
- Finding care when you're away from home
- Health plan services, programs and discounts

Monday – Friday,  
7 a.m. to 6 p.m. CT  
Call the number on the back  
of your member ID card,  
**952-883-5000 or 800-883-2177**  
Interpreters are available if you  
need one.  
Español: **866-398-9119**  
**healthpartners.com**

## Member Services can help you reach:

### Nurse Navigator<sup>SM</sup> program

### For questions about:

- Understanding your health care and benefits
- How to choose a treatment

Monday – Friday,  
7:30 a.m. to 5 p.m. CT

### Pharmacy navigators

### For questions about:

- Your medicines or how much they cost
- Doctor approvals to take a medicine (prior authorization)
- Your pharmacy benefits
- Transferring medicine to a mail order pharmacy

Monday – Friday,  
8 a.m. to 5 p.m. CT

## Behavioral health navigators

### For questions about:

- Finding a mental or chemical health care professional in your network
- Your behavioral health benefits

Monday – Friday,  
8 a.m. to 5 p.m. CT  
**888-638-8787**

## CareLine<sup>SM</sup> service nurse line

### For questions about:

- Whether you should see a doctor
- Home remedies
- A medicine you're taking

24/7, 365 days a year  
**800-551-0859**

## BabyLine phone service

### For questions about:

- Your pregnancy
- The contractions you're having
- Your new baby

24/7, 365 days a year  
**800-845-9297**



One thing I love about my job is how my team helps people all day, every day.

**Rachel, Registered Nurse, CareLine**

# Take charge of your health plan

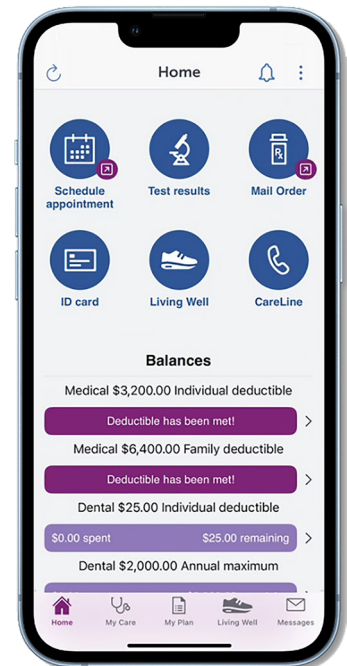
A HealthPartners online account makes it easy to stay on top of your health care and insurance.

## Get personalized information when and where you need it

With an online account, you have real-time access to your personal health plan information in one simple place. No more guessing or waiting until business hours to get answers to your questions.

## Top 3 ways to use your online account

1. Visit My dashboard through a web browser on your phone or computer for personalized preventive care reminders, helpful tips about your plan and more.
2. Search for in-network doctors, clinics and hospitals and get cost estimates for services specific to your plan using the web or mobile app.
3. Open the HealthPartners mobile app for on-the-go access to claims details, your member ID card and Member Services contact information.



## Sign in to your account

Manage your health and your plan at **healthpartners.com** or the **HealthPartners** mobile app.

Don't have an account yet? It's quick and easy to sign up— you'll just need your member ID card.



Scan here for a quick tutorial on creating and using your online account.

[healthpartners.com/getconnectedvideo](https://healthpartners.com/getconnectedvideo)



I love directing members to their online accounts and the mobile app. You can easily get your health plan info, even when I'm not in the office.  
**Jarria, Member Services**

# Get the right care at the right price

When you need care, you've got options. Use the chart below to make sure you're making the best choice for your health and your budget. Check online to see what's covered by your plan.

## Find in-network care

Manage your health and your plan at **healthpartners.com** or the **HealthPartners** mobile app.

Don't have an account yet? It's quick and easy to sign up— you'll just need your member ID card.

When you need	Go to	Average cost	Average time spent
Health advice from a registered nurse for: <ul style="list-style-type: none"> <li>At-home remedies</li> <li>When to go in for care</li> </ul>	CareLine <sup>SM</sup> service Call 24/7 at <b>800-551-0859</b>	Free	15 minutes
Treatment and prescriptions for minor medical issues, like: <ul style="list-style-type: none"> <li>Bladder infection</li> <li>Pink eye</li> <li>Upper respiratory infections</li> </ul>	Virtual or convenience care	\$	15 minutes
A regular checkup or special care during the day for things like: <ul style="list-style-type: none"> <li>Diabetes management</li> <li>Vaccines</li> </ul>	Primary care clinics	\$\$	30 minutes
Care for urgent problems when your doctor's office is closed, like: <ul style="list-style-type: none"> <li>Cuts that need stitches</li> <li>Joint or muscle pain</li> </ul>	Urgent care clinics	\$\$\$	45 minutes
Help in an emergency, such as: <ul style="list-style-type: none"> <li>Chest pain or shortness of breath</li> <li>Head injury</li> </ul>	Emergency room	\$\$\$\$	60 minutes



Still not sure where to go? We'll help you figure out the best place based on the urgency of your care needs. Call CareLine at **800-551-0859**.  
**Rachel, Registered Nurse, CareLine**

# Personalized condition management support services

Living with a health condition is easier when you have a team of people to support you. Work with a nurse one on one at no cost.

## Get support

Our support team includes experienced nurses, licensed behavioral health specialists and other health professionals. We help members with chronic and complex health conditions and situations like:

- Asthma
- Depression
- Diabetes
- Heart disease
- Rheumatoid arthritis
- And more

## How it works

Working with a HealthPartners nurse is a great addition to your health care team. Through phone calls and other communications, we'll support you in feeling your best and meeting your personal health goals. It's all confidential and at no cost for HealthPartners members.

## We will help

- Answer questions and provide resources about your condition
- Help you navigate appointments, treatments and medicine refills, as well as your insurance coverage and costs
- Coordinate care, treatment and communication across different doctors and specialists
- And more

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## Ready to get started?

Call 952-883-5469 or 800-871-9243 or visit [healthpartners.com/nursesupport](https://healthpartners.com/nursesupport)



No matter what health condition you're living with, talking to our nurses can help you feel better about your condition. We're here to help care for the whole you.

**Jill, Registered Nurse**

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# A resilient you

We're here to support the whole you – this includes your emotional health. Our resources are designed to connect with you with information, specialists, and support to get you back on the road to feeling and living better.

## Self-guided resources included with your plan

### Mental Health Hub

Connect to information, tools and support for you and your family. You'll also find resources to explore your plan benefits, get care and more. Visit [healthpartners.com/my/livingwell/mental-health](https://healthpartners.com/my/livingwell/mental-health).

### Living Well

Discover personalized activities for building healthier habits, reducing stress and improving your mood. You may need to complete a health assessment to access these activities. Visit [healthpartners.com/livingwell](https://healthpartners.com/livingwell).

### myStrength

Goal-based activities, articles and videos to help you with stress, anxiety, depression and more. This resource will be available to you through your health and well-being experience.

## Behavioral health navigators

Get customized resources, guidance and support from an experienced behavioral health specialist – confidentially and at no extra cost. Your behavioral health expert will work with you and your care team to develop a personalized plan focused on your well-being.

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**TIP:** Visit [healthpartners.com/resilience](https://healthpartners.com/resilience) for more information and resources on building emotional resilience.

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## Questions about benefits?

Our behavioral health navigators can help you find care in your plan network and answer coverage questions. Call **952-883-5811** or **888-638-8787**.

# Improve your health and well-being

Living Well is easy and available to you at no cost.

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## Sign in to get started

Manage your health and your plan at **healthpartners.com** or the **HealthPartners** mobile app.

Don't have an account yet? It's quick and easy to sign up— you'll just need your member ID card.

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**TIP:** After you sign in to your HealthPartners online account, go to the *Living Well* tab or select *Living Well* from the HealthPartners mobile app. If you need help, give us a call at **800-311-1052**.

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## Learn about your health

Start by taking your health assessment. You'll get a better picture of your current health to help you choose where to focus.

## Pick a well-being activity

Want to wake up more refreshed? Bounce back from stress better? Or take control of your weight? You've got lots of options to choose from.

## Choose what's best for you

Ask yourself, "What do I want to do to be healthier?" If you want to:

- Eat better – Try *Go for Fruits & Veggies* or *Sugar Smart*.
- Feel less stressed and more in control of your life – *Tackle Stress*, *Healthy Thinking* or *myStrength* might be your best bet.
- Be more active – Walk it out with the *10,000 Steps®* program.
- Move more – Get on-demand fitness classes with *Wellbeats*.



I know what a difference being healthy can make in your life. Members tell me that a little support from a health professional like me can be a big help.

**Sara, Health Coach**

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# Quit for good

Quitting tobacco and vape may be one of the hardest things you'll ever do. You don't have to do it alone. We're here to help.

## Get help from a health coach

Work with a health coach to set goals around tobacco use and vaping that fit your lifestyle. You'll get support and encouragement to reach your goals and live nicotine free. Plus, you can schedule phone calls or email your health coach when it works best for you.

### Work at your own pace to:

- Beat cravings
- Relieve stress
- Deal with tempting social situations
- Adjust to life without tobacco and vape
- Feel great

## Medicine to support quitting

Your health plan might pay for medicines to help you quit. Visit [healthpartners.com/formulary](https://healthpartners.com/formulary) to view your formulary. Or call our Member Services team at the number on the back of your member ID card.

## Digital smoking cessation resources

Pivot is an app-based cessation program to help you quit cigarettes, cigars and all smokeless tobacco products.

- Visit [pivot.co/healthpartners](https://pivot.co/healthpartners) to get started.

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## How to get started

Call **800-311-1052** to sign up with a health coach.



Maybe you've tried to quit on your own – more than once. Don't get down on yourself. Getting support from a coach can be just what you need to quit for good.

**Sara, Health Coach**

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# Living healthier just got a little less expensive

Get special savings from handpicked retailers as a HealthPartners member. There are lots of products and services available to you at a discounted rate – all designed to help you live healthy every day.

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## See where you can save

Visit [healthpartners.com/discounts](https://healthpartners.com/discounts) for a list of participating retailers and discounts.

### Save big by showing your member ID card at participating retailers

#### Save money on:

- Eyewear
- Exercise equipment
- Fitness and well-being classes
- Eating well
- Healthy mom and baby products
- Hearing aids
- Pet insurance
- And more!

### Discounts on gym memberships

#### The Active&Fit Direct™ program

Offers access to more than 12,000 fitness centers nationwide and over 9,000 on-demand fitness videos for a flat monthly fee.

### Digital workouts

#### Wellbeats

Get access to free workout videos across all fitness levels, featuring top fitness brands and names. This activity will be available to you through your health and well-being experience.



Making healthy choices is easier when it doesn't break the bank. I always say taking advantage of these discounts is a great way to make the most out of your health plan.

**Katie, Member Services**

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Assist America®

## Travel anywhere, worry-free

Whether you're traveling abroad or just out of town for the weekend, you can feel confident you're in good hands when the unexpected happens.

### Get 24/7 help

Assist America provides all the support you need when you're more than 100 miles from home.

- Coordinating transport to care facilities or back home
- Filling lost prescriptions
- Finding good doctors
- Getting admitted to the hospital
- Pre-trip info, like immunization and visa requirements
- Tracking down lost luggage
- Translator referrals
- And more!

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### How to get started

- Download your **Assist America ID card** at [healthpartners.com/getcareeverywhere](https://healthpartners.com/getcareeverywhere)
- Get the **Assist America app** and enter HealthPartners reference number **01-AA-HPT-05133**



The Assist America mobile app makes traveling much easier. You can make calls right from the app when you need support.  
**Jamie, Member Services**

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## Our approach to protecting personal information

HealthPartners® complies with all applicable laws regarding privacy of health and other information about our members and former members. When needed, we get consent or authorization from our members (or an authorized member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable law and standards. Our policies and practices support compliant, appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, our patients and the community, while being sensitive to privacy. For a copy of our Notice of Privacy Practices, visit our website or call Member Services.

## Summary of utilization management programs for medical plans

Our utilization management programs help ensure effective, accessible and high-quality health care. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of health services.

### THESE PROGRAMS INCLUDE:

- Progression of care review and care coordination to support safe, timely care and transition from the hospital.
- Outpatient case management to provide member support and coordination of care.
- Evidence-based coverage policy criteria for certain kinds of care.
- Prior authorization of select services – we require prior approval for a small number of services and procedures. For a complete list, visit our website or call Member Services.

## Benefit limitations for dental plans

After you enroll, you'll receive plan materials that explain exact coverage terms and conditions. This plan doesn't cover all dental care expenses. In general, services not provided or directed by a licensed provider aren't covered.

### HERE IS A SUMMARY OF EXCLUDED OR LIMITED ITEMS (THESE MAY VARY DEPENDING ON YOUR PLAN):

- Coverage for dental exams limited to twice each calendar year.
- Coverage for dental cleanings (prophylaxis or periodontal maintenance) limited to twice each calendar year.
- Sealants limited to one application per tooth once every three years.
- Coverage for professionally applied topical fluoride limited to once each calendar year for members under age 19.
- Coverage for bitewing X-rays limited to once each calendar year.
- Full mouth or panoramic X-rays limited to once every three years.
- Oral hygiene instruction limited to once per enrollee per lifetime.
- Coverage for space maintainers limited to replacement of prematurely lost primary teeth for dependent members under age 19.
- Replacement of crowns and fixed or removable prosthetic appliances limited to once every five years.
- Certain limitations apply to repair, rebase and relining of dentures.
- Dental services related to the replacement of any teeth missing prior to the member's effective date are covered when services are performed by a provider in the HealthPartners dental network.
- Non-surgical and surgical periodontics limited to once every two years.

## Appropriate use and coverage of prescription medicines for medical plans

We provide coverage for medicines that are safe, high-quality and cost-effective.

### TO HELP US DO THIS, WE USE:

- A formulary (drug list). These prescription medicines are continually reviewed and approved for coverage based on quality, safety, effectiveness and value.
- A free, confidential one-on-one appointment (in person or over the phone) with an experienced clinical pharmacist. Our Medication Therapy Management (MTM) program helps members who use many different medicines get the results they need.
- An opioid management program to support members in managing their pain.
- A transition program that provides a seamless move to our formulary. We allow coverage for a first-time fill of a qualifying non-preferred medicine within the first three months of becoming a member.

The formulary is available at [healthpartners.com/formulary](https://healthpartners.com/formulary), along with information on how medicines are reviewed, the criteria used to determine which medicines are added to the list and more. You may also get this information from Member Services.

## Important information on provider reimbursement

Our goal in reimbursing providers is to provide affordable care for our members while encouraging quality care through best care practices and rewarding providers for meeting the needs of our members. Several different types of reimbursement arrangements are used with providers. All are designed to achieve that goal. Check with your individual provider to find out how they are paid.

### PROVIDER REIMBURSEMENT INFORMATION FOR MEDICAL PLANS

- **Fee-for-service** – Some providers are paid on a “fee-for-service” basis, which means that the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.
- **Discount** – Some providers are paid on a “discount” basis, which means that when a provider sends us a bill, we have negotiated a reduced rate on behalf of our members. We pay a predetermined percentage of the total bill for services.
- **Case rate** – Sometimes we have “case rate” arrangements with providers, which means that for a selected set of services the provider receives a set fee, or a “case rate,” for services needed up to an agreed upon maximum amount of services for a designated period of time. Alternatively, we may pay a “case rate” to a provider for all of the selected set of services needed during an agreed upon period of time.
- **Reconciliation** – Sometimes we have withhold arrangements with providers, which means that a portion of the provider’s payment is set aside until the end of the year. The year-end reconciliation can happen in a variety of ways.
- **Withhold Arrangements** – Sometimes we use withhold arrangements as part of provider payments which means that a portion of the provider’s payment is set aside until the end of the year. The year-end reconciliation can happen in a variety of ways.
- **Diagnosis** – Some providers — usually hospitals — are paid on the basis of the diagnosis that they are treating; in other words, they are paid a set fee to treat certain kinds of conditions. Sometimes we pay hospitals and other institutional providers a set fee, or “per diem,” according to the number of days the patient spent in the facility.
- **APCs** – Some providers — usually hospitals — are paid according to Ambulatory Payment Classifications (APCs) for outpatient services. This means that we have negotiated a payment level based on the resources and intensity of the services provided. In other words, hospitals are paid a set fee for certain kinds of services and that set fee is based on the resources utilized to provide that service.
- **Total Cost of Care** – Some providers — usually primary care medical groups — are paid based on how well they manage the total cost of care associated with a patient, as well as how well they manage the patient experience and the quality of care provided.

### ARRANGEMENTS USED FOR DENTAL PLANS:

- **Fee-for-service** – the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.
- **Discount** – the provider sends us a bill, and we’ve already negotiated a reduced rate on behalf of our members. We pay a predetermined percentage of the total bill for services.
- **Salary** – with a possible additional payment made based on performance criteria, such as quality of care and patient satisfaction measures.
- **Capitated** – the provider group receives a set fee for each month for each member enrolled in the provider group’s clinic, regardless of how many or what type of services the member actually receives. Provider groups are required to manage the budget for their entire patient panel appropriately.
- **Combination** – more than one of the methods described are used. For example, we may capitate a provider for certain types of care and pay that same provider on a fee-for-service basis for other types of care. We may also pay a provider such as a clinic using one type of reimbursement method, while that clinic may pay its employed providers using another reimbursement method.

## Conducting medical necessity reviews

HealthPartners conducts medical necessity reviews for select services. These reviews ensure our members receive safe and effective care that aligns with the coverage outlined in the member’s contract. Medical necessity reviews can be conducted pre-service, before the service takes place; post-service, after the service has happened; or concurrently, while the service is taking place. Contracted providers are responsible for obtaining prior authorization from the health plan when it is required. Services that require prior authorization are listed on our website. Prior authorization is not required for emergency services. HealthPartners will inform both you and your provider of the outcome of our review.

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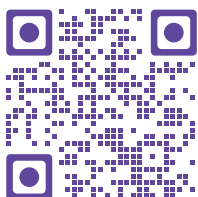
This plan may not cover all your health care expenses. Read your plan materials carefully to determine which expenses are covered. For details about benefits and services, go to [healthpartners.com](https://healthpartners.com) or call Member Services at **952-883-5000 or 800-883-2177**.

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## Let's keep in touch

We make it easy to stay connected and manage your plan. If you already have a member ID card, now's a great time to set up your online account and download the mobile app.



Create or sign in to your account to access your benefits details, compare costs and doctors, review claims and more. Point your smartphone camera at this code to get started. Or visit **[healthpartners.com/myplan](https://healthpartners.com/myplan)**. And as always, don't hesitate to call if you have any questions.

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### Member Services

**952-883-5000** or **800-883-2177**

Monday – Friday, 7 a.m. to 6 p.m., CT

**[healthpartners.com](https://healthpartners.com)**