

Orange Open Access Plan Overview

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Hello, this is an overview of the SCHOOLCARE orange open access plan. This overview will review all the parts of the plan and how it works.

Before we begin let's review some commonly used terms for the health plan. The first term is deductible. A deductible is the first part of coverage that must be paid out of pocket by the insured before the insurance plan starts to pay. After you meet the deductible then you have coinsurance. Coinsurance is when the insurance plan pays a percentage of the cost and you pay a percentage of a cost up to your out-of-pocket maximum. The out-of-pocket maximum is the sum of your deductible amount and your coinsurance amount, and it's the most that you would ever incur out-of-pocket in any given year.

Here are some highlights of the SCHOOLCARE Orange open access plan. First, it provides the same level of coverage of treatments, hospitals, and prescription drugs as all other SchoolCare plans. Your preventive care and certain generic preventive drugs are covered at no cost to you. All other covered medical services and prescriptions do apply to a deductible and then coinsurance, up to the annual out-of-pocket maximum. Once the out-of-pocket maximum has been met, all covered services and prescriptions are then covered at 100% for the remainder of the year. One note about the Orange plan is that it meets IRS requirements for a health savings account or HSA which is a financial account that you can set up to help pay for your qualified medical expenses.

Now let's review the orange plan in depth. First of all, the orange plan uses the same Cigna National Open Access network as all other SchoolCare plans. You do not need a referral to see a specialist and all your preventive care and certain generic drugs are no cost to you. Note that the maximum amount that an employer can contribute to your HSA is \$1,000 or \$2,000 in any year. Your deductible for an individual is \$2,000 and for 2 person and family coverage the deductible is \$4,000. Once you meet the deductible then you'll pay 20% of the medical charges and 10% percent of the cost of a prescription but no more than \$75 until you reach your annual out-of-pocket maximum.

Your out-of-pocket maximum for an individual is \$4,000. The out-of-pocket maximum for 2 person and family coverage is \$8,000. All your medical services, tests, labs, emergency room visits, x-rays, MRIs, hospitalizations, would all apply to the deductible. Specialty therapies such as speech, physical, and occupational therapy have a 60-visit combined limit also apply to the deductible. As well as chiropractic visits of which there are 20 per year, acupuncture visits of which there are 12 per year, and your durable medical equipment and prescription costs.

Let's illustrate how this works. First, we'll look at an individual plan. They start off with a \$2,000 deductible for their medical expenses. So when they go to see the doctor, they would end up with a bill for that service. If they go to the pharmacy, they would have to pay for their prescription at the register. Once they have reached 2,000 dollars in out-of-pocket expenses then they start coinsurance.

Coinsurance is 20% of medical services and 10% of the cost of a prescription, but no more than \$75 for an additional \$2,000. Once they have spent a total of \$4,000, they've met their out-of-pocket maximum and all their medical care and the prescriptions etc. would be covered at 100% for the rest of the year.

And note that individuals can set up their own HSA account in order to help pay for those out-of-pocket expenses.

And now 2 person and family coverage. All members of the family contribute to the deductible amount and coinsurance amount for the year. The family's deductible is \$4,000, so again their medical services and the prescription costs would apply to the first \$4,000 of deductible. Then the family has coinsurance of 20% of the medical charges, 10% of a prescription cost but no more than \$75 until they reach a total expenditure of \$8,000. Once they have met their out-of-pocket maximum then the family would have no more out-of-pocket expenses for the rest of the year. The family can set up an HSA account to pay for out of pocket expenses.

MyCigna makes it easy to keep track of all your transactions. First, you can log on to myCigna.com and click on claims and balances to review all the transactions for your family's medical services. You can also call in to Cigna 24/7 365 and speak with a phone representative for questions and customer service issues. And lastly Cigna has a mobile app that you can download to your smart phone and have all the information at your fingertips.

You can always call SchoolCare if you have questions about your benefits at 603-836-5031. The SchoolCare website schoolcare.org is a great resource for plan documents, resources, and other information including details about the *Good For You!* Well-Being Program.

Thank you for watching.