

Health Insurance Overview

Marshfield Clinic Health System | April 1, 2021 – March 31, 2022

Health Insurance Plans

- Active Advantage 3 Tier Plan
- HDHP 3 Tier Plan
- HDHP SimplyOne
- HDHP Indemnity

Here are the networks for the 3 tier plans:

Tier	3 Tier Plan Networks
1	Marshfield Clinic Health System Providers Only, with the exception of certain specialties
2	Security Health Plan contracted providers excluding Aspirus and Mayo
3	All other providers not in Tier 1 or 2

Beaver Dam employees have these networks available to them:

Tier	Beaver Dam Networks
1	The Alliance - Marshfield Clinic Health System and UW Health providers
2	Rest of The Alliance network providers (including Dean)
3	All other providers not in Tier 1 or 2

The best way to avoid surprise costs is to verify if your provider is in network by using the online Find a Doctor tool on Security Health Plan's website or to call Security Health Plan Customer Service.

- Lower out-of-pocket costs if employee remains in Tier 1 for services
- Tier 2 & 3 out-of-pocket expenses apply toward Tier 1
- Tier 1 out-of-pocket expenses are not applied toward Tier 2 or 3

Deductibles, coinsurance and Out-of-Pocket Maximums

Active Advantage

- 3 Tier Single Deductibles: \$1,000/\$2,000/\$5,000
- 3 Tier Family Deductibles: \$2,000/\$4,000/\$10,000
- Employee Coinsurance: 20%/30%/40%
- Single Maximum Out-of-Pocket Limits including Copays: \$5,000/\$7,000/\$9,000
- Family Maximum Out-of-Pocket Limits including Copays: \$10,000/\$14,000/\$18,000

Copays and Coinsurance for Pharmacy Costs under the Active Advantage Plan are applied right away, even before deductible has been met.

High Deductible Health Plan

Under all HDHP Plans, the full cost of prescriptions is the employee responsibility until the deductible is met. The cost of the prescriptions applies to the deductible. Once the deductible is met, copays and coinsurance apply to prescription costs.

- 3 Tier Single Deductibles: \$2,800/\$3,500/\$5,000
- 3 Tier Family Deductibles: \$5,600/\$7,000/\$10,000
- Employee Coinsurance: 0%/20%/40%
- Single Maximum Out-of-Pocket Limits including Copays: \$4,000/\$7,000/\$9,000
- Family Maximum Out-of-Pocket Limits including Copays: \$8,000/\$14,000/\$18,000

All preventive care covered at 100% in Tier 1 for both plans



Marshfield Clinic
Health System

SimplyOne Medical Plan

Only available as a High Deductible Health Plan

- Single Deductible: \$2,800
- Family Deductible: \$5,600
- Employee Coinsurance: 0%
- Beaver Dam employees can choose this plan, but should be mindful of the limited provider network for your location
- No employee premiums - 100% employer sponsored
- Lower out-of-pocket costs
- Integrated network, care management within Marshfield Clinic Health System provider system
- No out-of-network coverage
- Marshfield Clinic Providers Only
- *UW Health is not included in this plan*

Indemnity Plan

Only available with the High Deductible Health Plan

- Same deductibles, coinsurance and maximum out-of-pocket amounts as the SimplyOne HDHP Plan
- With this plan you can choose to receive care from any in-network provider or out-of-network provider
- Claims processed for out-of-network providers and facilities are based on the usual/customary/reasonable (UCR) fee schedule, which means your out-of-pocket costs will likely be higher for services you receive from out-of-network providers

Note: Indemnity and Tier 3 services received with out of network providers are subject to Usual, Customary, and Reasonable fees (UCR). UCR is the amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. SHP pays according to UCR and non-contracted providers can legally bill members above UCR if they don't accept discounts.

- All preventive care is covered at 100% with Tier 1 providers
- Care with Tier 2 or Tier 3 will be subject to deductible and coinsurance
- Virtual visits thru Care My Way are available with no cost to employees
- Review the Schedules of Benefits on the Benefit Library for a more detailed list of covered services and how they apply to your out-of-pocket costs



Pharmacy Benefits

(Same for all 4 plans).

Note: Under all High Deductible Health Plans, the full cost of prescriptions is the employee responsibility until the deductible is met. The cost of the prescriptions applies to the deductible. Once the deductible is met, copays and coinsurance apply to prescription costs.

Tier	Copay/Coinsurance
1	\$5 Copay
2	\$30 Copay
3	\$60 Copay
4	25%

Preventive Drug list for Maintenance Drugs

No employee cost for these prescriptions

- Preventive medications are not subject to deductible and covered at 100% when filled at a Marshfield Clinic Health System pharmacy
- Pharmacy benefit will include insulin and diabetic supplies
- Review the prescription drug formulary, preventive drug list and preventive drug FAQ posted on the Benefits Library
- Specialty medications will assess at 25% coinsurance

Urgent/emergent-all health insurance plan options (same as current benefit)

Urgent/emergent care is covered subject to applicable benefit limitations, deductible, coinsurance and copayment amounts.

([Review this information](#) when seeking urgent and emergent care services.)

Medical emergency definition:

A condition with acute symptoms of sufficient severity, including severe pain, that with lack of medical attention would likely result in:

- Serious jeopardy to the participant's health.
- Serious impairment to the participant's bodily functions.
- Serious dysfunction of one or more of the participant's body organs or parts.

Urgent care definition:

Care that is needed sooner than a routine doctor's visit and does not meet the criteria for medical emergency. It is not follow-up care, unless such care is necessary to prevent the member's health from becoming significantly worse before reaching a participating provider.

Note: This document is only a summary of your benefits. The official plan documents govern in all circumstances.

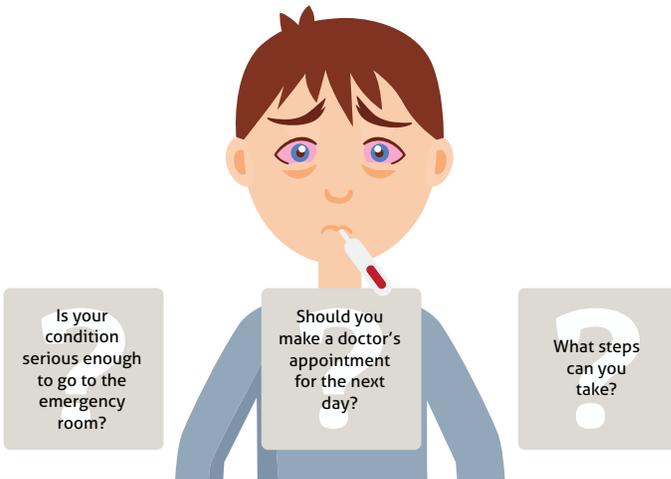
Get convenient care without leaving home or work:

[Review this information about](#) Care My Way services that are available in Wisconsin, Minnesota and Michigan.

Get convenient care *without* leaving home or work

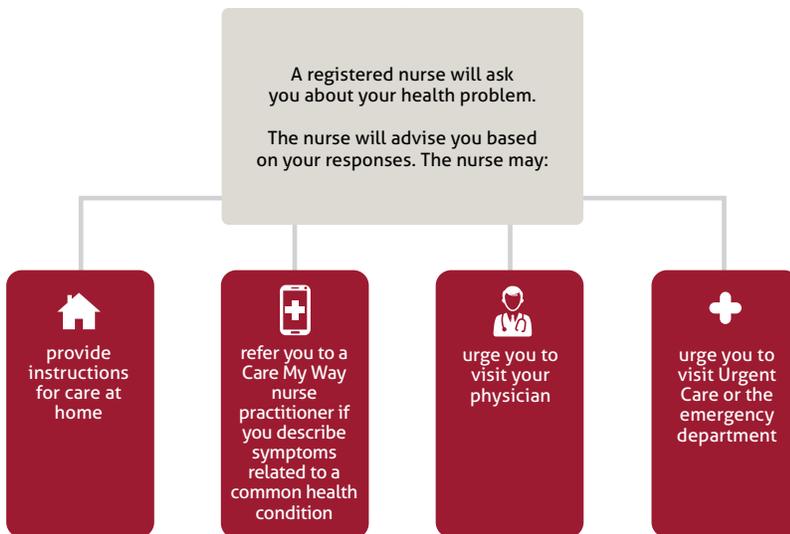


You have a 103° fever.



Start by calling our 24-hour Nurse Line.

Call 1-800-549-3174 (TTY: 711)



*Our 24-hour Nurse Line is available seven days a week, including holidays.

24-hour Nurse Line

If you need to talk to a provider after hours, you may call the provider's office. You may also call Security Health Plan's 24-hour Nurse Line at **1-800-549-3174**, seven days a week, including holidays, to connect with a registered nurse who can help answer your health care questions. The registered nurse will provide advice for seeking care or instructions for care at home.

Care My Way®

Symptoms of certain minor illnesses can be all too familiar, but a trip to the doctor's office can take time and energy you don't have. Call Care My Way instead. For many common health conditions, you can talk to one of our nurse practitioners by phone, or try a virtual visit by downloading the app. The nurse can verify your symptoms and, if needed, call a prescription into the network pharmacy of your choice – saving you time and hassle. Care My Way has no copay, no deductible charge and unlimited visits*. For a complete list of conditions Care My Way can treat, and more information about the service, go to: www.securityhealth.org/CareMyWay.

Care My Way services are available in Wisconsin, Minnesota and Michigan.

*Security Health Plan is not responsible for any tax-related charges for HSA plans.

Seeking care after hours



Using urgent care services

Sometimes you need care quickly when you are outside the Security Health Plan service area. If you cannot safely postpone care until you return to the service area, you may receive care at the nearest appropriate medical facility. When within the Security Health Plan service area, you must use in-network providers. Notify Security Health Plan as soon as reasonably possible of any services received from a non-network provider.



Using emergency care services

When you need emergency services, whenever possible use in-network hospital emergency rooms. If you are unable to reach a network provider, go to the nearest appropriate medical facility. If you go to a non-network provider for care, you should notify Security Health Plan of where you received emergency care as soon as possible.

If you have an emergency, **call 911**

What will it cost me?

Average cost of most common visits in Wisconsin*

Upper respiratory infection



Urgent Care vs ER
\$184 vs \$689

Pink Eye



Urgent Care vs ER
\$175 vs \$673

Sinusitis



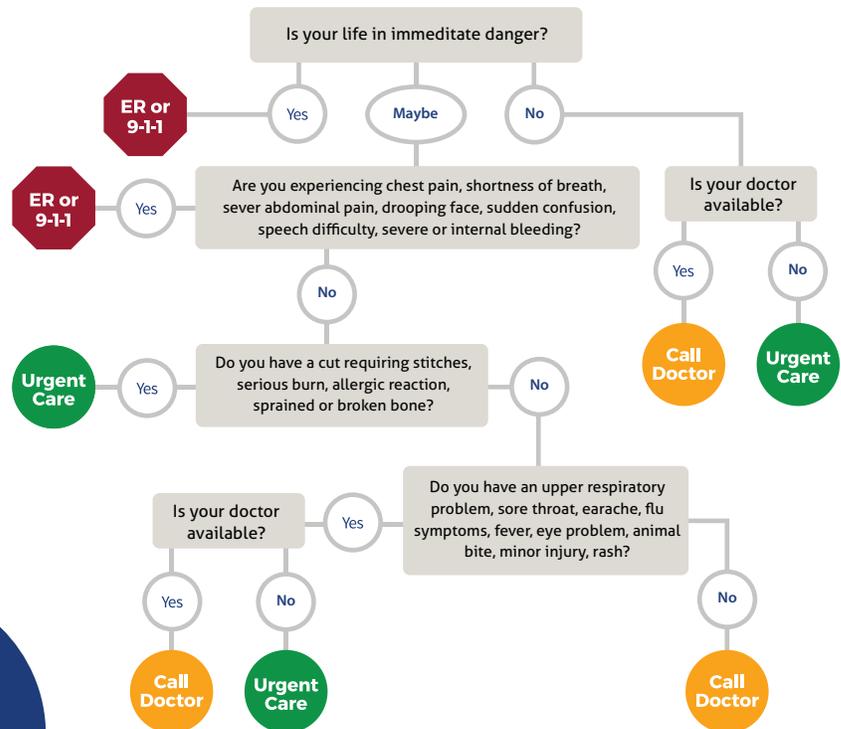
Urgent Care vs ER
\$183 vs \$842

Sore Throat



Urgent Care vs ER
\$242 vs \$959

How should I choose?



* Based on 2018 claims data from Security Health Plan