

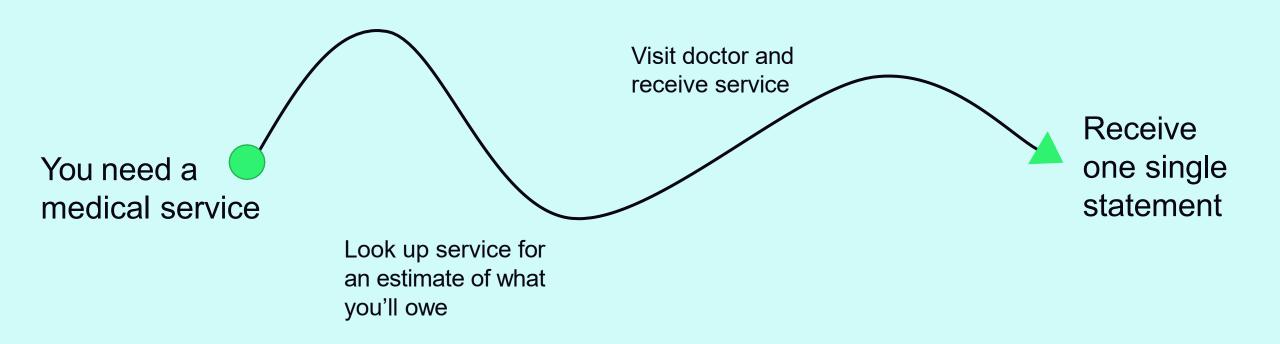
Coupe Health Education Session 2024 St. Olaf College

Current Healthcare Process

EOBs Copay Provider statement Deductible You need a What you owe medical service Is this covered? Out-of-pocket max Is this in-network?



Coupe Health Member Journey



It's just like any other consumer experience...

Retail



\$



Select good or service. Know cost ahead of time.

Use your credit card. Pay later.

Receive one monthly credit card statement with the minimum you owe.

Coupe



\$



Choose provider & service. Know cost ahead of time.

Show your ID card. Pay later.

Receive one monthly statement with the minimum you owe.



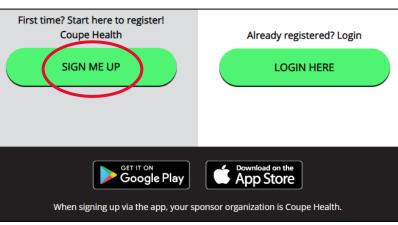
Coupe Support: Member Portal

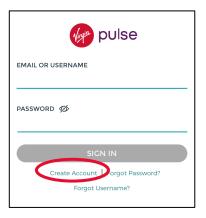


How to Access Your Member Portal

- 1 Visit <u>www.coupehealth.com</u> and select "MEMBER LOGIN' in the right corner.
- 2 Select the "SIGN ME UP" button and enter your registration information.
- Want the app? Download the Virgin Pulse app onto your device. Select "Create Account" and type in "Coupe Health" as your sponsor.







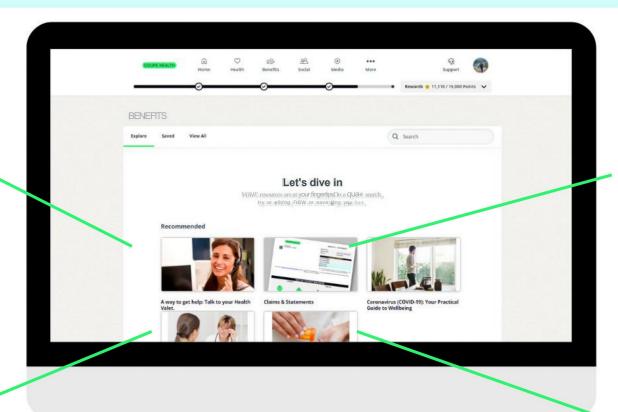


How to Access Care

Coupe Member Portal

Contact Your Health Valet

Find a High-Quality
Provider &
Compare Costs



View Your Monthly Statement

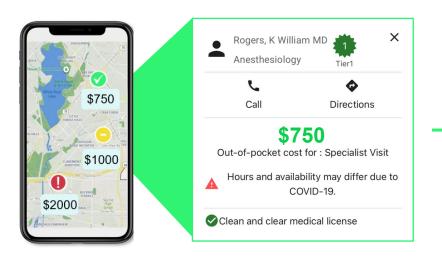
Find the Cost of Your Medications

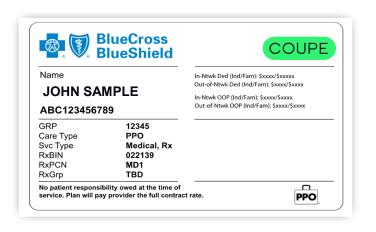
Your Journey

Select a provider based on cost & quality rankings.

Present ID card & pay \$0 at visit or drug pick up.

Receive one monthly statement & pay overtime with 0% interest.









Quality Rankings and Provider Tiering

Providers are categorized into three copay rankings based on some of the following criteria:

- Quality Providers that have the best-in-class training and certifications, aligned with good care outcomes.
- Relationship Providers that are associated with top quality service lines at their facility.
- 3 **Experience** Providers that deliver a positive patient experience and outcomes.
- **Efficiency** Providers that deliver the best care outcome by providing the appropriate amount of care.

Provider Tiering

- Tier 1 Provider: Meets all criteria and they have the lowest copay.
- Tier 2 Provider: Meets most criteria and has an average copay.
- Tier 3 Provider: Meets minimum criteria and therefore has the highest copay.



Health Valet Support

- Assist in finding a top provider
- ✓ Setting appointments with providers
- ✓ Available for open enrollment questions
- ✓ Available for insurance questions
- ✓ Resolving billing issues with provider
- ✓ Administrative assistance

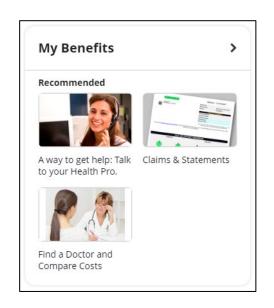
Member Statements



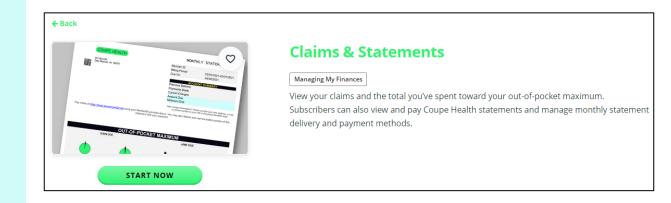
How to Access Your Claims & Statements



Locate "Claims & Statements" under the "Benefits" page.

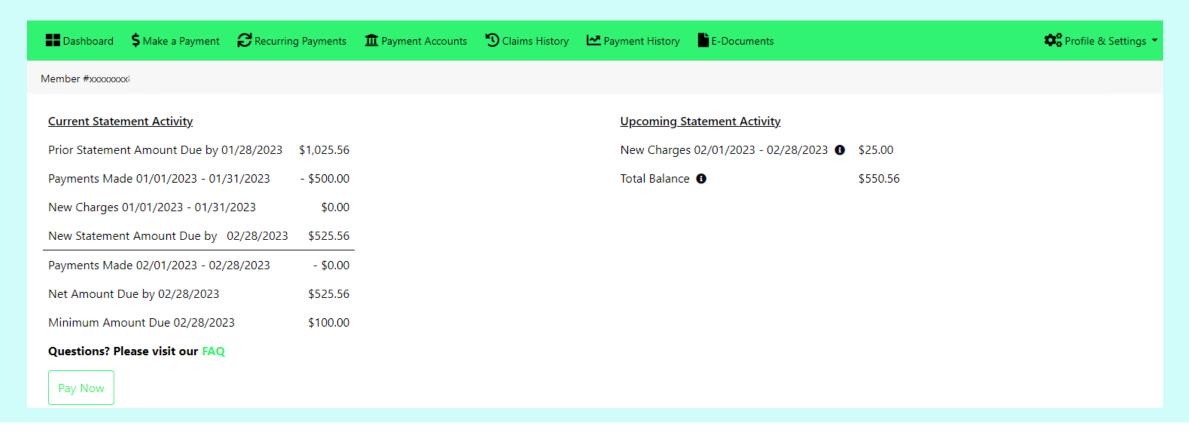


2 Then, select "START NOW".



How to Access Your Claims & Statements

You will now be in your dashboard. On this page you can view your claims, current & prior statements, payment history, update your payment method and find your Explanation of Benefits (EOB).





COUPE HEALTH

12712 Park Central Dr. Dallas, TX 75251

Member ID
Billing Period
Due on

12345678 01/01/2023-01/31/2023 2/28/2023

Account Summary Outstanding Balance \$0.00 Payments Made \$0.00 Current Charges \$750.00

\$750.00

\$100.00

Pay online at https://acap.securecondult.net using your MemberID provided above. You may also detach and mail the bottom portion of this statement with your payment.

Amount Due

Minimum Due

Monthly Statement					
Date of Service	Claim ID	Patient Name	Service	Provider	SimplePay Amount
01/02/23	457833	Jasmine Jacobs	Urgent Care	Dr. Adams	\$45.00
01/04/23	957893	Jasmine Jacobs	Orthopedic Specialist	Dr. Wong	\$35.00
01/10/23	657821	Jasmine Jacobs	Outpatient Surgery	Dr. Torrez	\$650.00
01/10/23	778644	Jasmine Jacobs	Hydrocodone	CVS	\$20.00

Patient Benefit Summary

\$750.00 has been applied to your \$5,000 out of pocket maximum

How to Read Your Coupe Monthly Statement

Current Charges:

Any balances that were transacted during the billing period.

Amount Due:

Pay this amount via check or using the Coupe portal before the Due on Date. You do not have to pay the full amount due, just the Minimum Due amount.

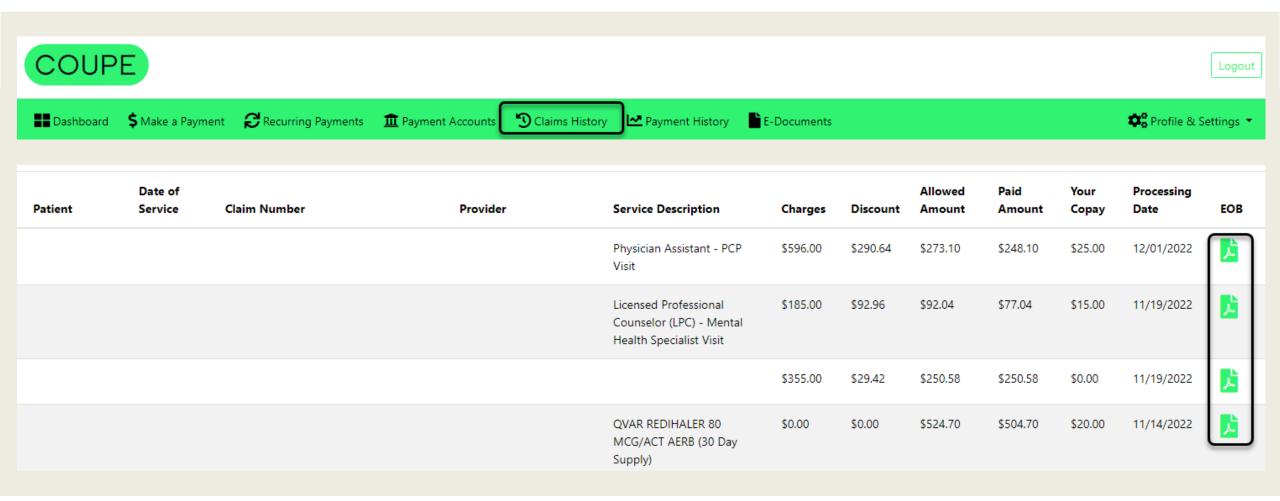
Previous Balance:

Any balances that were not paid in full prior to the billing period.

Payments Made:

Any payments that you have made using the Coupe portal during this billing period.

How to Access Your Explanation of Benefits





Built-In Financing

- No payment required at time of service.
- 2 1.5% cash back when balances paid in full by due date.
- 3 0% interest payment plans with autopay feature.
- 4 Customizable payment plans available.

Balance Total	Monthly Payment		
\$1 - \$2,000	\$100		
\$2,000 +	\$375		

Sign your Patient Financial Agreement 2 Choose your preferred payment account for the Auto Pay Program*







Additional Information Related to Your BCBS Coupe Plan

Medical Policy:

There may be coverage or clinical Prior Authorization requirements.

• Rx Formulary:

- Pharmacy is powered by MedOne.
- Walgreens Tier 2; CVS is Tier 3; All other in-network retailers are Tier 1.
- Specialty Rx requires the use of mail order.
- If you are trying to access a non-formulary drug, or if there is a PA needed, different processes for approval may apply.

Secondary Insurance?

You may want to consider electing a non-Coupe plan option.

Examples



Office Visit

David is a 28-year-old who works as a Business Analyst. He is young and healthy and rarely engages with his health plan. However, after two days of waking up with a sore throat, David decides he should see his doctor to get tested for strep.



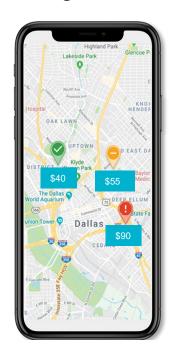
Select a provider based on cost & quality rankings.

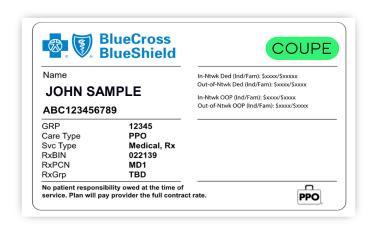
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Present ID card & pay \$0 at visit or drug pick up.



The copay for David's Tier 1 provider visit will be \$40 and will include, testing for strep and doctor visit.







Outpatient Hospital

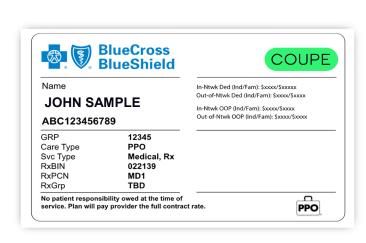
Jasmine is a 35-year-old female and a Training Specialist. She enjoys being active and spending her free time outdoors. One day Jasmine was out hiking and slipped on some loose gravel. Jasmine hurts her knee and is told she needs knee surgery.



Select a provider based on cost & quality rankings.

- 2
- Present ID card & pay \$0 at visit or drug pick up.
- The copay for Jasmine's Tier 1 provider visit will be \$1,150 and will include her knee surgery.





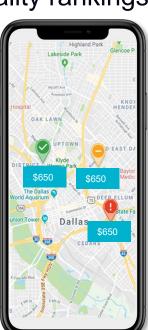


Emergency Room

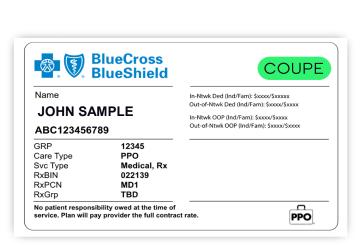
Tyree is a 35-year-old male who is a Customer Service Agent. Tyree starts to experience pain in his abdomen. The pain increases and he decides to go to the emergency room.



Select a provider based on cost & quality rankings.



Present ID card & pay \$0 at visit or drug pick up.



The copay for Tyree's emergency room visit will be \$650.



Prescription Drug

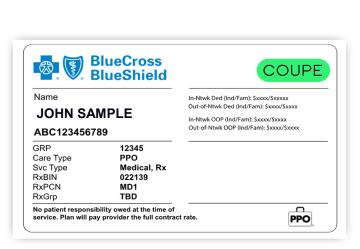
Kim is a 45-year-old female who is a Marketing Specialist. She was recently diagnosed with Asthma and prescribed Albuterol as a breathing aid.



Select a provider based on cost & quality rankings.



Present ID card & pay \$0 at visit or drug pick up.



The copay for Kim's Tier 1 Albuterol will be \$0.



Health & Wellbeing



Integrated Clinical Solutions



ovia





Diabetes and cardiovascular disease management

Fertility, pregnancy and parenting

Virtual wellness visits

Weight management and healthy eating



Expert second opinion services



Personal health assistant



Digital support for back and joint pain



What is My PHA?



My PHA are care managers that are available to help when you have a complex or chronic diagnosis. They can provide education regarding:

- Health concerns
- Options for future care, such as coordinating different services and multiple providers
- Nutritional guidance
- Disease prevention/ management they can help with how to help lower your A1c, maintain a healthy weight or get your bp under control
- Your health journey. For example, if you receive a cancer dx, My PHA can help you
 understand what that means to your overall health and next steps

*My PHA does make proactive outreaches so if you do receive a call or email from My PHA, they are part of your Coupe plan and are reaching out to help.

COUPE

Need Assistance?



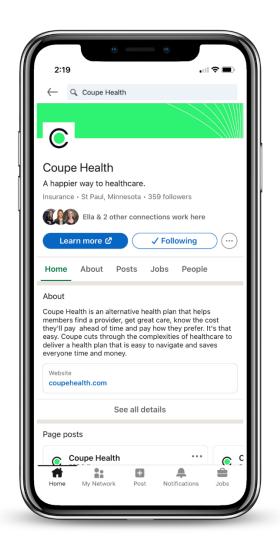
https://employers.coupehealth.com/st-olaf.html



healthvalet@coupehealth.com



1-833-749-1969



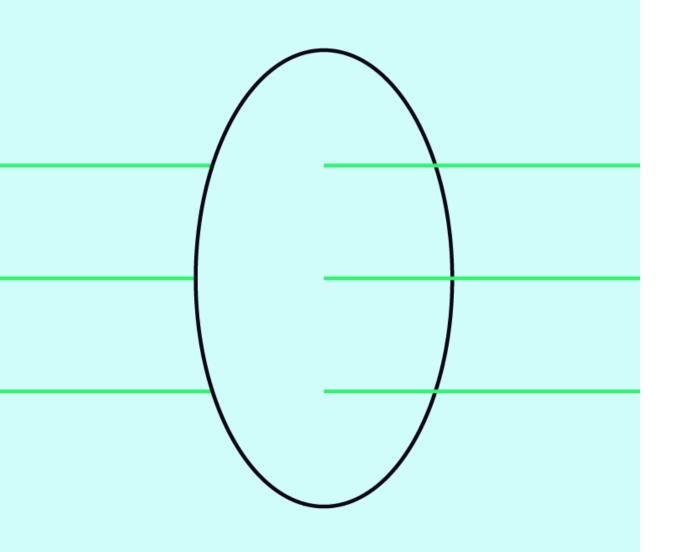
Frequently Asked Questions (FAQ)



Is there a Coupe Health mobile app?

Yes, the name of the app is Virgin Pulse.

- To download the app, head over to the App/Play Store and type in "Virgin Pulse".
- Click on the Virgin Pulse app with the Virgin Pulse logo to download the app and get started.
- When the Virgin Pulse App asks you to pick your organization, please type in "Coupe Health".



Can more than one family member use the app?

Yes, eligible dependents over the age of 18 can also use the Virgin Pulse app.

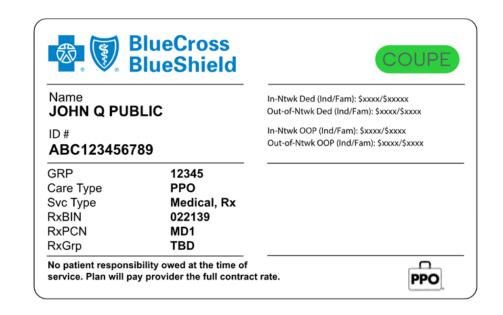


How do we get our ID card if we haven't received it?

ID cards can be downloaded directly from your Coupe member portal under Benefits > View All > Member ID Card > Start Now.

What are some helpful tips I should know before I start using my Coupe Health plan?

- If your doctor asks for your insurance information, please tell them you have BCBS (not Coupe).
- BCBS/BlueCard PPO is listed as your network on your insurance ID card.
- If your pharmacist asks for your insurance information, please say you have MedOne (not Coupe).
- MedOne is listed as your pharmacy benefit manager on your insurance ID card.





What are some helpful tips I should know before I start using my Coupe Health plan?

- Certain medical services and medications require prior-authorization on the Coupe Health plans.
 - Your physicians must turn in the information necessary to complete the priorauthorization process.
 - Prior Authorization generally takes around five business days once the information is received, unless it is deemed an urgent request where it will be handled within 48 hours.
- Doctors, hospitals, and pharmacists will no longer be able to tell you your out-ofpocket cost amounts.
- If you want to know your out-of-pocket cost amounts, please visit <u>www.coupehealth.com</u> or contact your Health Valet at <u>HealthValet@CoupeHealth.com</u> or 833-749-1969.

Is there someone I can call for questions regarding the Coupe Health Plan?

The Coupe Health Valet Team can be contacted by email at healthValet@CoupeHealth.com or you can call 833- 749-1969.

The Health Valet hours are Monday through Friday 8AM - 8PM CST.

Is it required to use the Coupe member portal to look up doctors or can I schedule with my doctor directly?

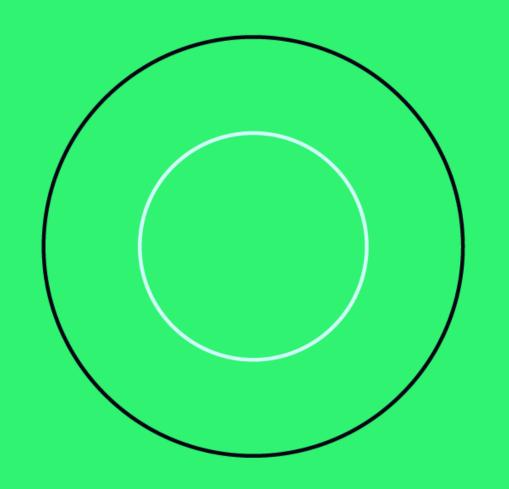
It is recommended to use the member portal to confirm provider network participation and copay details prior to scheduling a service or an appointment with your doctor.

You do still have the option to schedule with your doctor directly.

If my physician is out-of-network and I continue to use them, what will I be charged?

Please contact your Health Valet at HealthValet@CoupeHealth.com if your physician is not listed.

Your Health Valet will help to confirm provider network participation and your costs associated.



Are Quest and LabCorp Tier 1 lab providers?

Yes, Quest and LabCorp locations are considered Tier 1 routine diagnostic labs.

In the event a PCP performs lab work in their office, will I only be charged for the PCP visit?

Yes. If routine lab work is performed the same day as the office visit, only one bundled office visit copay applies.

If lab work is done on separate days, separate copays apply.

If I am admitted to the hospital, am I charged for each day I am there, and for each service?

No, you are charged for the event, not the individual services or individual days.

If you are readmitted, this would be a new event and result in an additional copay.

What do I do if I am being charged at the doctor's office or pharmacy during my visit?

Provide the doctor your member ID card and show them the section where it states "No patient responsibility owed at the time of service. Plan will pay provider the full contract rate."

If the provider still tries to bill you, please point them to the Provider Service phone number on the card and ask the provider to verify your benefits.

When providers verify your benefits, they will only see that they will be paid in full, and they will not see the out-of-pocket amount you owe to the health plan.

What if my pharmacist or doctor tells me I do not owe any out-ofpocket costs for medication? Is that always true?

No. We pay your providers the full cost of your care, so you do not have to worry about making payment at the time of service.

This can mean that it looks like you do not owe anything to your providers.

You will then pay your out-of-pocket cost or copays to Coupe Health and not to your healthcare providers.

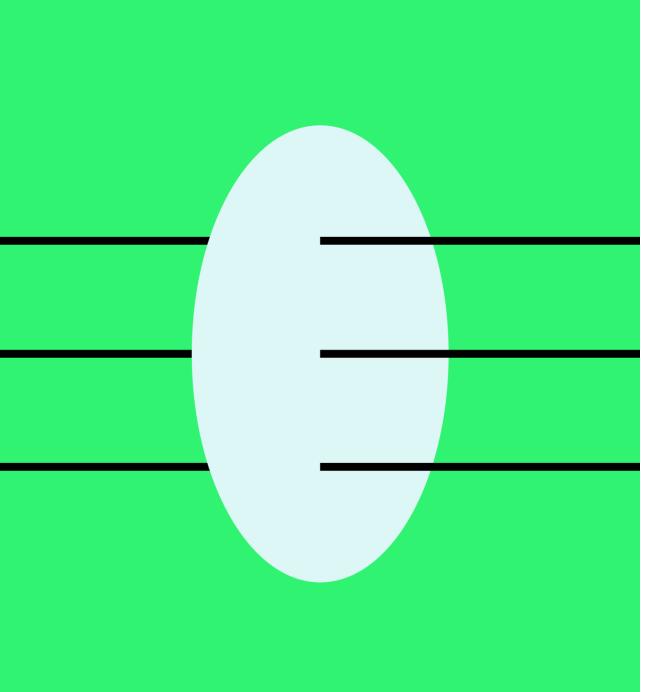
What if the provider bills me after my service? What if there is a discrepancy between what the provider says I owe and the Coupe copay?

In the event you receive a bill from a provider, please contact your Coupe Health Valet for assistance.



All in-network pharmacies including most local pharmacies, grocery store chains, COSTCO, Walmart, and Sam's Club are Tier 1, with being Walgreens Tier 2, leaving CVS Tier 3.

If you are taking maintenance medications, we recommend enrolling in the mail order program.



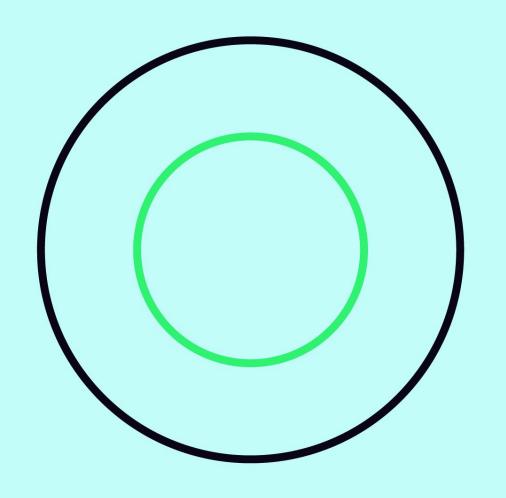
What happens if my medication costs less than the copay on my Coupe Health pharmacy benefits?

You never pay more than the full cost of the medication.

If the medication costs less than your copay, you will only pay the cost of the medication.

What is prior authorization or step therapy?

- When you look up the cost of a medication on the Coupe Health member portal (www.coupehealth.com) under "Find Drug Prices," you may see a yellow warning box at the top of the pricing page that indicates prior authorization or step therapy is required before the medication can be approved and paid for by the health plan. For prior authorization and step therapy, the MedOne medical team reviews clinical documentation received from your doctor regarding the medication and medical condition.
- Step therapy involves using alternative medications that your provider found to be inappropriate or ineffective for your treatment prior to the plan approving the requested medication to be filled.
- Prior authorization review process generally takes 5 business days to complete once the clinical information is received from your physician.
- Generally, a prior authorization is only required the first time you fill a medication during a plan year, but certain medications may be approved for specific durations.

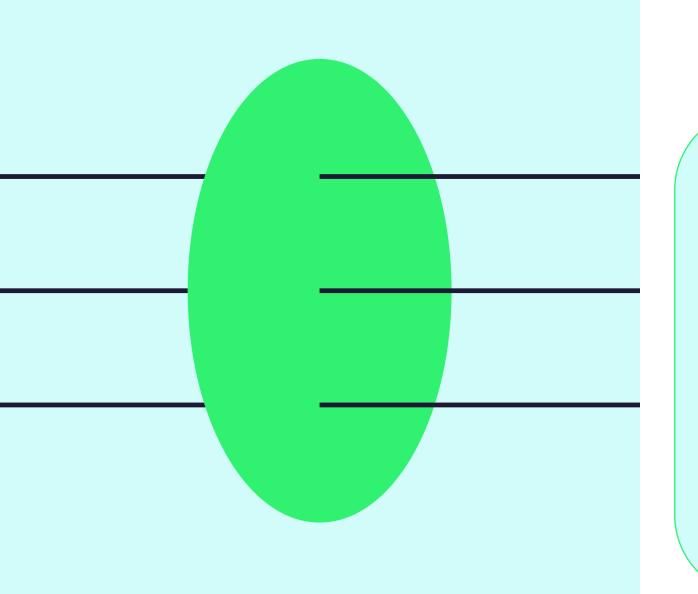


What are the available benefits for diabetic members?

If a member enrolls in Livongo, you will receive a free glucometer and test strips.

Your Health Valet can assist with your enrollment into Livongo.

Additionally, information and enrollment instructions for Livongo will be available on the Coupe member portal.



When will I get a Coupe Health statement?

If you had a medical or pharmacy service, you would get a Coupe statement in the mail or by email mid-month the month in which it is due.

If you do not get a statement in the mail, please visit www.coupehealth.com or contact your Health Valet to get a copy of your statement.

What if I don't see a charge for one of my visits?

Your statements cover all the charges processed in the previous month.

Not all providers send in bills for your care timely so it may take a couple months for you to see processed charges.

Only pay for charges that have posted to your statement.

Why does Coupe Health require me to have a payment account on file?

To protect the integrity of your account and meet the requirements for no credit-check, interest-free financing, Coupe Health requires that you participate in an automatic payment protection program to pay your minimum due amount reported on your Coupe monthly statement.

The payment protection program turns on as soon as your monthly statement shows a balance due.

Do the copays go towards the out-of-pocket?

Yes. All in network out-of-pocket amounts count towards your out-of-pocket maximum.

Please see your Coupe statement to see how much out-of-pocket cost has accumulated towards your benefit plan's out-of-pocket max.

Please be aware that out-of-pocket amounts for providers that are not in your network will not count towards your out-of-pocket maximum.

What do I do if I have secondary insurance coverage or receive financial assistance from a provider?

If you have secondary insurance or provider financial assistance, it is recommended that you choose a traditional plan. The Alternative Plan does not coordinate with secondary insurance or provider financial assistance on your behalf.

- If you choose the Alternative Plan and it is your primary insurance, you will be responsible for sending in a manual claim and Explanation of Benefits (EOB) to your secondary insurance to have those claims paid as deemed appropriate by the secondary insurance carrier.
- If you choose the Alternative Plan and it is your secondary carrier, you or your provider must submit the claim and EOB from your primary insurance carrier to the Alternative Plan as your secondary insurance carrier for the claim to be considered.
- The Health Valet will not be able to pull your claim or EOB and submit on your behalf to the appropriate carrier. They will, however, be able to direct you in locating the EOB needed on your member portal.



Questions?

Please contact your Coupe Health Valet:

Email: HealthValet@coupehealth.com

Phone: 1-833-749-1969

Benefits landing page:

https://employers.coupehealth.com/st-olaf.html



Thank You!