

FAQs for Healthy Rewards – Health Saving Account (HSA)

A high deductible plan with network options.

For additional questions about enrollment or premiums, view the <u>Enrollments</u> section of the <u>FAQ</u> page or <u>contact</u> your Human Resources office.

The Healthy Rewards plan offers compatibility with a Health Savings Account (HSA). On this plan you must meet the deductible before most medical services are covered. There are three benefit tiers.

Tier 1 benefits, provided by the GatorCare Network, offer the best value with low deductibles, out-of-pocket costs and co-insurance, and include hospitals, physicians and providers in Gainesville, Jacksonville, and Central Florida. When using the Tier 1 GatorCare Network for wellness and preventive care, annual physicals and labs are offered with no out-of-pocket expense to you.

Tier 2 benefits apply when you receive services from Florida Blue's NetworkBlue providers, which result in higher deductibles, out-of-pocket costs and co-insurance.

For Tiers 1 and 2, the deductible does not apply to wellness and preventive care annual physicals and labs.

Tier 3 benefits apply when you receive services from an out-of-network provider; you still have coverage but may be billed for the difference between the provider's charge and the allowed amount.

Q: How do I know what I am going to pay now compared to what I used to pay under my old plan?
A: At the end of the FAQ is a list of some of the most common costs. Please contact your Florida Blue Dedicated Representative for more specific questions.

Q. Is my Doctor In-Network?

A. To find out if your doctor or provider participates in GatorCare, click below to refer to the:

- Gainesville Provider Directory
- Central Florida Provider Directory

A list of providers can also be found on the <u>Florida Blue website</u>. When searching in the Florida Blue online provider directory, please use "**BlueOptions**" to find providers that qualify for coverage under within Tier 2.

Q. How much do I pay to see an In-Network Primary Care Doctor or an In-Network Specialist for an office visit?

A. You will pay the contracted allowed amount until you meet the deductible.

Q. Do I need a referral to see an In-Network specialist?

A. No, a referral is not necessary to see a specialist.

Q. What happens if I am out of the state and need medical care?

A. There are many participating Network Blue providers in the United States and abroad. You can access a listing of these participating providers on our website, www.Floridablue.com. On the provider directory home page, click FIND DOCTORS AND HOSPITALS WORLDWIDE, OR FIND DOCTORS AND HOSPITALS NATIONALLY. Your policy does provide benefits for emergency care even at non-par providers, these providers are considered out of network. The suitcase symbol on your card shows GatorCare is participating with PPO providers Nationally and Internationally.

Q. Does GatorCare cover Virtual Visits?

A. Yes, Virtual Visits are covered with In-Network providers Tier 1 UF Health only. You will pay the contracted allowed amount until you meet the deductible.

Q. Do I have access to Free Virtual Behavioral Health Services?

A. Yes! As of 1/1/2022, GatorCare members ages 13+ are eligible for free online mental health counseling services through Talkspace. Additionally, GatorCare members ages 18+ are eligible for free online counseling and psychiatry services through Talkspace.

This service is convenient, confidential, and flexible. You can meet with your provider anywhere, anytime—from the comfort of your home, office, or wherever you are. Your provider is available for live video sessions (similar to in-person therapy) or secure text messaging.* The Talkspace platform is HIPAA-compliant and allows you to select a provider that best matches your preferences and goals.

Visit GatorCare.org/Talkspace to learn more about this benefit.

Q. Who manages my Pharmacy Benefits?

A. Magellan Rx Management is the administrator for GatorCare's pharmacy benefits. The dedicated toll-free number is (800) 651-8921

Q. What much do I pay for prescriptions?

A. You will pay Tier 1 deductible plus any applicable coinsurance, up to the cost of the drug. For more information, visit gatorcare.org/pharmacy.

Q. The prescription plan has Tiers 0-5 of coinsurance. How can I find out the tier for the medication being prescribed?

A. Magellan Rx maintains a <u>look-up tool</u> for our GatorCare members. The tool is user-friendly and offers useful and important information. After navigating to this page, enter the name of the drug on the left hand side. After several seconds, possible matches appear on the right side of the screen. The tier to which the drug is offered through the GatorCare formulary is found along with other alternative drugs and information. By clicking on the 'find alternative drugs' link, a member can determine if an alternative medication for the drug may be available on the formulary on a lower tier, reducing the member's out-of-pocket expenses.

Q. How can I find out the expected cost for a prescription?

A. Members should establish an account on the <u>Magellan Rx portal</u> after your effective date with GatorCare. Once the account has been set up, there is a "Price a Drug" function. Members can also contact the GatorCare dedicated line at Magellan Rx Management at 1-800-651-8921. If the call is being made prior to the effective date of coverage, please advise the GatorCare customer representative that your policy is still not active, but you expect it to begin at a later date.

Q. Can I fill my maintenance medications as a 30-Day Supply?

A. On the 3rd fill of a Tier 0, 1 or Tier 2 maintenance medication, a 90-day supply will be required. The 90-day supply may be obtained from a Mail or Retail network pharmacy. Controlled drugs including those used to treat anxiety, sleep, pain and hyperactivity disorders are not subject to the 90-day requirement. Certain other medications, including inhalers, are not subject to the 90-day requirement. Visit this page for more details.

^{*}Text messaging only available for counseling services.

Q. How much do I pay for an In-Network Urgent Care Center?

A. You will pay deductible plus 10% coinsurance for Tier 1. Deductible plus 30% coinsurance for Tier 2. Deductible plus 40% for Tier 3.

Q. How do I locate an In-Network Urgent Care Center?

A. A list of participating Urgent Care Centers will be available soon here.

A list of Blue Options Urgent Care Centers can also be found on the Florida Blue website.

(Note: Convenient Care clinics such as Minute Clinics inside pharmacies, are NOT COVERED)

Q. How much do I pay for Emergency Room services?

A. For an ER visit at any facility you will pay Deductible plus 10% coinsurance.

Tier 1 ER Example

■ The <u>plan's</u> overall <u>deductible</u>	\$1,525	
Per Visit ER Deductible	N/A	
Hospital (facility) Coinsurance	10%	

This EXAMPLE event includes services like:

Emergency room care (including medical supplies)
Diagnostic test (x-ray)

Total Example Cost	\$1,900	
In this example, you would pay:		
<u>Cost Sharing</u>		
<u>Deductibles</u>	\$1,525	
Per Visit Deductible	\$0	
Coinsurance	\$37.50	
What isn't covered		
Limits or exclusions	\$0	
The total you would pay is	\$1,562.50	

Q. How much do I pay for lab work?

A. It is deductible plus 10% coinsurance for lab work at an In-Network Tier 1 Independent Clinical Laboratory or at an In-Network Tier 1 Outpatient Hospital Laboratory. Alliance Labs and Quest Diagnostics are considered In-Network Tier 1 Independent Clinical Laboratories.

Q. How much do I pay for imaging services?

A. It is deductible plus 10% coinsurance for imaging services at a UF Health facility, and for select procedures at Lake Medical Imaging that can't be performed at UF Health Central Florida. You would have a deductible plus 30% coinsurance after meeting your calendar year deductible at a Tier 2 Florida Blue Options imaging provider. *Physician is responsible for obtaining prior authorization for Advanced Imaging Services, such as CT, MRI, MRA, Nuclear and PET scans.*

Q. How much do I pay for a physical therapy visit?

A. If you use UF Health Outpatient Rehab Services, you will be responsible for deductible plus 10% coinsurance. If you utilize a Tier 2 Blue Options provider, you will be responsible for deductible plus 30% coinsurance after you meet the calendar year deductible. Tier 3 deductible plus 40% coinsurance.

^{*}See example below.

Tier 1 cost comparisons

*IMPORTANT: These cost shares don't represent every scenario, therefore it's important that you review the <u>HSA Summary of Health Plan Benefits</u> document for more specific details or contact your Florida Blue Dedicated Representative at <u>GatorCareCSR@bcbsfl.com</u>

Tier 1 cost comparisons	GatorCare Tier 1	Previous Tier 1
Calendar Year Deductible		
Individual	\$1,525	\$2,000
Family	\$3,625	\$4,000
Primary Care Office Visit	10% coinsurance after CYD	10% coinsurance after CYD
Primary Care Virtual Visit*	10% coinsurance after CYD	10% coinsurance after CYD
Specialist Office Visit	10% coinsurance after CYD	10% coinsurance after CYD
Specialist Virtual Visit*	10% coinsurance after CYD	10% coinsurance after CYD
Urgent Care	10% coinsurance after CYD	10% coinsurance after CYD
X-ray outpatient	10% coinsurance after CYD	10% coinsurance after CYD
Wellness & Preventative Care		
Primary Care & Specialist	\$0	\$0
Outpatient Therapies Facility (PT, OT, ST & Cardiac Rehab)*	10% coinsurance after CYD	10% coinsurance after CYD

Q. Who do I contact for anything GatorCare related?

A. Dedicated Florida Blue Representative – 904-571-0416 – <u>GatorCareCSR@bcbsfl.com</u>

In the event that any ambiguity arises between these highlights and the Certificates of Insurance or the Plan Documents, the terms of the Certificates and Plan Documents will prevail.