

Benefit Overview







Welcome back! We're here to make your life easier.

HealthEZ is an independent third-party administrator (TPA), which means we manage your employer's health benefits and process your medical claims. We work with your employer to design a custom benefits plan for your organization and we're ready to help you access the services you need. We've been providing our knowledgeable and service-oriented approach for 40 years.

Direct access to member support

Dedicated phone number

Johnson Health Tech has a dedicated phone number at 855-697-2027 that is answered by a real person, Monday through Friday, between 7 a.m. and 7 p.m. CST. Outside of the hours listed, simply press "3" to reach our 24/7 help line.

24/7 helpline

You have 24/7 access to our team of experienced doctors and nurses. Have a health-related concern or need help finding the right doctor? Give us a call at 855-697-2027. We are here to help you.

Dedicated benefits website

You can use Johnson Health Tech's dedicated benefits website at <u>JHTNABenefits.com</u> to learn about and manage your health plan. View your benefits, review pharmacy information, search to find a doctor and more.

You can set up a myHealthEZ account to access monthly statements, account balances, recently processed bills and HealthEZ's online payment system, EZpay.



Manage your health benefits without all the headaches.

Download the free myHealthEZ app to view your benefits, manage and pay bills, get 24/7 support, locate care providers near you, and access your digital insurance card-right from your phone.



Tap. Pay. Done.

Pay bills, schedule automated payments, and view past statements in one simple, secure location.



24/7 help and support

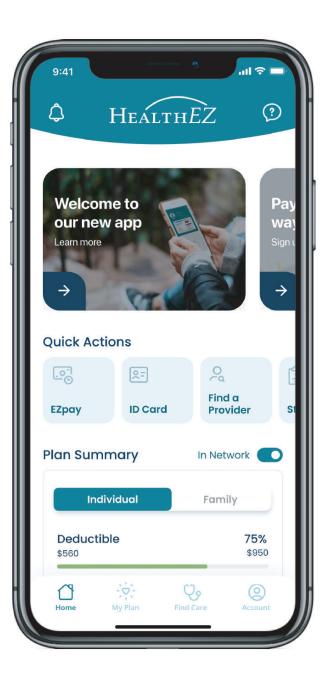
Find answers faster with access to support materials, or by connecting with a member support representative.











myHealthEZ Account

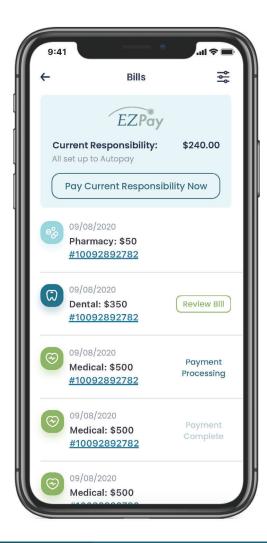
With or without the myHealthEZ app, you can manage your HealthEZ benefits on your preferred web browser as well. Visit JHTNABenefits.com and click "Login."

If you have not registered an account with HealthEZ yet, enter in your credentials, choose a password, and click "Activate Your Account".

Dependents over the age of 19 can create their own myHealthEZ account to manage their plan and request a replacement ID card or download their ID card directly to their own devices.









Seamless online payments

EZpay is HealthEZ's online payment system that allows you to easily and quickly pay your portion of medical bills with your payment of choice, including credit and debit cards, and HSA accounts.

After you set up EZpay, every time we process a bill of yours, we will send you an email asking you to approve the payment for the amount due.

EZpay will pay the bill by default if you do not respond to the email in:

- 2 business days for bills under \$250
- 5 business days for bills over \$250

EZpay will combine your payment with payment from your health insurance so that we pay your healthcare provider in full.

One simple statement

We consolidate all of your monthly healthcare expenses into one simple statement. This statement eliminates confusion and provides information about year-to-date deductible and out-of-pocket maximums, and itemized transactions during the current billing period.







Medical ID cards

If you are new to the HealthEZ plan, keep an eye out for your medical ID card. Once you recieve that, you can setup your myHealthEZ account.

If you are a current HealthEZ member, please note that you will be receiving a new medical ID card after open enrollment has closed.

If you need a replacement card, log into to your myHealthEZ account and request a new card be printed and mailed, or download a digital copy directly to your device!

Dependents over the age of 19 can create their own myHealthEZ account to manage their plan and request a replacement ID card or download their ID card directly to their own devices.



If you reside in MN and Western WI, your network will continue to be America's PPO.

America's PPO

If you reside elsewhere, your new network will be Aetna.



What is a medical network?

Your medical network is a group of healthcare providers. It includes doctors, specialists, hospitals, surgical centers and other facilities. These healthcare providers offer services at a lower rate than out-of-network providers, which you will see reflected on your statements as a discount.

How do I know if my provider is in-network?

Please visit JHTNABenefits.com, and click "Find a Doctor."





Your Pharmacy Benefit Manager is CVS Caremark.



What is a Pharmacy Benefit Manager?

Pharmacy Benefit Managers (PBMs) reduce prescription drug costs and improve convenience and safety for consumers. Your PBM administers your prescription drug plan and offers a network of pharmacies that offer more affordable medications.

What is Mail Order?

If you take maintenance medications for long-term conditions like arthritis, asthma, diabetes, high blood pressure or high cholesterol you could save money with CVS Caremark's mail service pharmacy. Visit JHTNABenefits.com for more information on how to get started and to download the CVS Caremark mail service forms.

What is Step Therapy and Prior Authorization?

Step Therapy is a program that requires members to initially try preferred, medically proven and less expensive prescription drugs before "stepping up" to more expensive drugs.

Prior Authorizations promote the use of safe, effective and reasonably-priced drug therapy. Your healthcare provider is required to provide medical information to determine coverage.

For questions on Step Therapy or your Prior Authorization, contact CVS Caremark at 1-866-818-6911.

What are Generic drugs?

Generic drugs are copies of brand-name drugs and are the same as those brand-name drugs in dosage form, safety, strength, route of administration, quality, performance characteristics and intended use. Although generic drugs are chemically identical to their branded counterparts, they are typically sold at substantial discounts from the branded price. To find out if there is a generic equivalent for your brand-name drug, talk to your doctor or visit <u>Caremark.com</u>.

CVS Caremark Member Portal

Your member portal is a great resource for tools - such as a pharmacy locator, drug price check, formulary list, and more. Your custom member page is tailored to the specifics of your prescription benefit plan. To get the most out of your prescription benefit, visit <u>Caremark.com</u>.





Maternity support

Our Boost Your Baby program matches moms-to-be with a Mommy Mentor to support a healthy pregnancy. It's a non-clinical support system for future moms to use throughout their pregnancy. We promise to: provide good and honest information, be supportive when you need us, make life easy and simple (at least the parts we can), and respect mom & dad's wishes.

Benefits of program include monthly support from a mommy mentor, free breast pump and gifts, nurses available 24/7 for any medical advice or high risk care, and miscarriage support.

Visit boostyourbaby.com, or call 800-808-4848 to learn more.

Care management

If you need a medical service like a surgery or hospital stay, or your doctor diagnoses you with a complex medical condition, a HealthEZ nurse may contact you. The nurse will help you understand your treatment options, coordinate services among your doctors and ensure you have everything you need for a quick recovery and are receiving the right care in the right setting.

We provide tips to members living with chronic health conditions, like diabetes, hypertension and high cholesterol. We can also provide these members with referrals to healthcare providers. Our team of doctors and nurses believe that the key to lasting change is partnering with you to offer realistic advice and support.



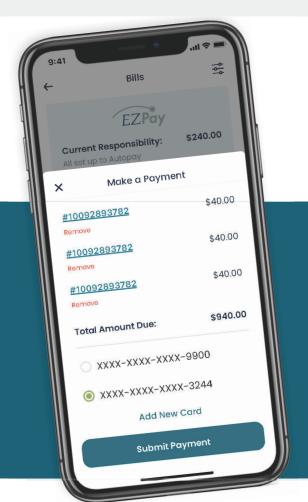
Health Savings Account

A Health Savings Account (HSA) is a type of savings account that lets you set aside money on a pre-tax basis to pay for qualified medical expenses.

By using untaxed dollars in an HSA, you may be able to lower your overall health care costs.

This account belongs to you, regardless of your employment or medical coverage changed. Funds in this account can grow tax free and rollover from year to year.

You are eligible for a Health Savings Account if are enrolled in the \$3,500 HSA Eligible Plan.



2022 Maximum Annual Contribution Amounts*

Employee Only: \$3,650 Family Coverage: \$7,300

*Individuals age 55 or older are eligible to contribute an additional \$1,000 per year.

Add your HSA to EZPay!

Add your Health Savings Account (HSA) to your EZPay account within myHealthEZ to quickly pay your portion of medical bills. Setup payment priority with up to 5 credit and debit cards, and HSA accounts.

EZpay will combine your payment with payment from your health insurance so that we pay your healthcare provider in full.





Summary of Medical Benefits \$1,000 PPO Plan				
Calendar Year Deductible Employee only Family	\$1,000 \$2,000	\$2,000 \$4,000		
Coinsurance	10%	30%		
Out-of-Pocket Maximum Employee only Family	\$2,500 \$5,000	\$6,000 \$12,000		
Preventive Care	100% Covered	30%*		
Office Visits Primary & Specialist Services (ages 0-18) Primary & Specialist Services (ages 18+)	100% Covered \$30 Copay	30%* 30%*		
Hospital Services	10%*	30%*		
Emergency Services** Emergency Room Emergency Medical Transportation	\$200 Copay 10%*			
Urgent Care Services Urgent Care Services (ages 0-18) Urgent Care Services (ages 18+)	100% Covered \$30 Copay	\$30 Copay \$30 Copay		
Chiropractic Services	\$30 Copay	30%*		
Mental Health/Chemical Dependency Inpatient Outpatient (ages 0-18) Outpatient (ages 18+)	10%* 100% Covered \$30 Copay	30%* 30%* 30%*		
Summary of Pharmacy Benefits				
Prescription Drug Coverage	Retail 30 Day Supply	Mail Order 90 Day Supply		
Generic Preferred brand Non-preferred brand Specialty	\$10 Copay 25% Coinsurance up to \$50 50% Coinsurance up to \$80 \$100 Copay	\$20 Copay 25% Coinsurance up to \$100 50% Coinsurance up to \$160 Not available		

Note: Please refer to your Summary Plan Description for actual coverage, limitation, and exclusion provisions.



^{*} After deductible

^{**} Covered as in-network in true-emergency



Summary of Medical Benefits \$2,500 PPO Plan				
\$2,500 \$5,000	\$3,500 \$7,000			
Coinsurance	20%	30%		
Out-of-Pocket Maximum Employee only Family	\$3,500 \$7,000	\$6,000 \$12,000		
Preventive Care	100% Covered	30%*		
Office Visits Primary & Specialist Services (ages 0-18) Primary & Specialist Services (ages 18+)	100% Covered \$30 Copay	30%* 30%*		
Hospital Services	20%*	30%*		
Emergency Services** Emergency Room Emergency Medical Transportation	\$200 Copay 20%*			
Urgent Care Services Urgent Care Services (ages 0-18) Urgent Care Services (ages 18+)	100% Covered \$30 Copay	\$30 Copay \$30 Copay		
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Summary of Medical Benefits

\$3,500 HSA Eligible Plan

	In-Network	Out-of-Network
Calendar Year Deductible Employee only Family	\$3,500 \$7,000	\$5,000 \$10,000
Coinsurance	20%	50%
Out-of-Pocket Maximum Employee only Family	\$7,000 \$14,000	\$10,000 \$20,000
Preventive Care	100% Covered	50%*
Office Visits Primary & Specialist Services (ages 0-18) Primary & Specialist Services (ages 18+)	20%* 20%*	50%* 50%*
Hospital Services	20%*	50%*
Emergency Services** Emergency Room Emergency Medical Transportation	20%* 20%*	50%* 50%*
Urgent Care Services Urgent Care Services (ages 0-18) Urgent Care Services (ages 18+)	20%* 20%*	50%* 50%*
Chiropractic Services Chiropractic Services (ages 0-18) Chiropractic Services (ages 18+)	20%* 20%*	50%* 50%*
Mental Health/Chemical Dependency Inpatient Outpatient (ages 0-18) Outpatient (ages 18+)	20%* 20%* 20%*	50%* 50%* 50%*

Summary of Pharmacy Benefits

Prescription Drug Coverage	Retail 30 Day Supply	Mail Order 90 Day Supply
Generic	\$12 Copay*	\$24 Copay*
Preferred brand	\$45 Copay*	\$90 Copay*
Non-preferred brand	\$90 Copay*	\$180 Copay*
Specialty	20%*	Not available

Note: Please refer to your Summary Plan Description for actual coverage, limitation, and exclusion provisions.



^{*} After deductible

^{**} Covered as in-network in true-emergency

Connect with us

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- service@healthez.com
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