



WellFirst Health™

Personal Insurance Kit
Member Guide & Organizer



1

GET STARTED

I'M A NEW MEMBER.
WHAT SHOULD I DO?.....4-5

I HAVE AN INSURANCE
QUESTION OR CONCERN 6

I HAVE A MEDICAL
QUESTION OR CONCERN 7

I WANT WELLNESS REWARDS.....8-9

2

THE BASICS

WHERE SHOULD I GO FOR CARE?10-11

I NEED TO FIND A DOCTOR
OR A PRIMARY CARE PROVIDER12

I'M GOING TO BE TRAVELING SOON.
WHAT SHOULD I KNOW?12-13

I'M NOT SICK BUT I NEED PREVENTIVE CARE
(LIKE AN EXAM OR IMMUNIZATION)13

I NEED TO SEE A SPECIALIST14-15

I TAKE MEDICATION OR WAS RECENTLY
PRESCRIBED SOME BY MY DOCTOR16-17

I NEED TO PAY MY PREMIUM OR BILL.....18-19

3

PLAN DETAILS

I'VE HAD BIG CHANGES IN MY LIFE.
WHAT SHOULD I DO?.....20

I'M ELIGIBLE FOR MEDICARE OR
HAVE ANOTHER INSURANCE POLICY.....20

I'D LIKE TO FILE A GRIEVANCE
OR APPEAL.....21

WHAT SHOULD I KNOW
ABOUT PRIVACY ?.....21

4

WORKSHEETS

KNOWING THE INS AND OUTS
OF YOUR NEW HEALTH INSURANCE22

FINDING AND CHOOSING YOUR NEW
PRIMARY CARE PROVIDER.23

GETTING READY FOR YOUR
PRIMARY CARE VISIT..... 24

TAKING MEDICATIONS TO KEEP
YOU HEALTHY.....25

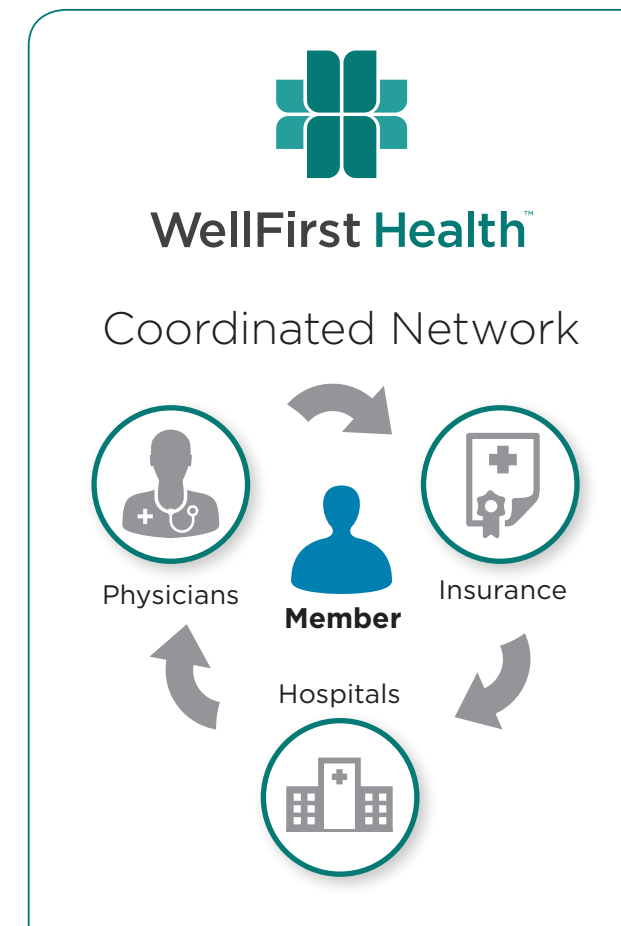
CHILD APPOINTMENT TIPS
AND VACCINE TRACKER 26

We're so happy You chose WellFirst Health!

Count on WellFirst Health to have your back so you can stay healthy and get the most out of your plan. As a member, you now have access to valuable resources to manage your health and empower you to take control of your care. That means benefits you can understand, tools that save you time and most importantly, support from our friendly staff whenever you need us.

Coordinated, physician-led coverage and care.

WellFirst Health Insurance addresses the challenge of creating a long-term, sustainable health care solution by transforming the health care model. With its coordinated approach and focus on the doctor-patient relationship versus insurance company profits, WellFirst Health brings an innovative model of care and coverage to Missouri. Primary care physicians and specialists across WellFirst Health's network collaborate to provide the best personalized care possible. It's insurance that members can feel great about.



Go online, click and voilà – information at your fingertips. Find a wealth of health insurance information, benefit details and so much more when you visit

wellfirstbenefits.com

Starting a new health plan can be complicated. We make it easy.

Complete these steps to unlock resources and take important actions so you can get the most out of being a member. Check out wellfirstbenefits.com/newmember for other helpful tips.

1

Activate your FREE accounts.

- Schedule appointments, send secure messages to your provider and more through your **MyChart** account. Start achieving your goals for a healthy lifestyle and earn rewards along the way through your **Living Healthy** account.
- These online accounts were designed to keep you informed, connected, and healthy. *See pages 6–9 for details.*
- Access your insurance details, view and pay your premium bill and more through your Member Portal account.

2

Decide where you'd prefer to receive your primary care.

- Doing this makes it easier to schedule a visit when the time comes that you need one. Just visit wellfirstbenefits.com to find a primary care clinic near you.



See page 24 for a helpful decision-making worksheet to help you choose a Primary Care Provider.

3

Schedule a visit when you need one.

- If you need care before your Annual Preventive Office Visit, just call your preferred primary care clinic for immediate assistance.
- A few months before you're due for your Annual Preventive Office Visit, call your preferred primary care clinic for an appointment. This is a good time to tell the clinic which primary care provider you'd like to see.

Before you come in for your first visit, it's a good idea to have your medical records transferred from your previous primary care clinic to your new one. Contact your previous clinic to obtain and complete an Authorization to Release Protected Health Information Form. The form allows your previous clinic to send your medical records to your new clinic so your medical team can best continue your care.

Additional Member Info

Review important member documents.

- Your Member Certificate (sometimes called a "Member Policy") has information about your insurance benefits and coverage, and it lists general limitations and exclusions to your plan.
- Your Summary of Benefits and Coverage is an easy-to-read grid that lists the details of plan coverage, along with a basic cost estimate of your financial responsibilities for common medical services.*
- Take a moment to review common health insurance terms on pages 18–19 so you better understand your coverage and visit your member portal at wellfirstbenefits.com/member-portal for links to these member documents.**
- The Pharmacy Drug Formulary is a list of prescription drugs that help you understand what is and isn't covered by your insurance.

I have other insurance coverage besides WellFirst Health.

- Your WellFirst Health policy has a Coordination of Benefits (COB) provision – a fancy way of saying we'll need to sort through situations where you are covered by another health insurance company (such as through an employer or Medicare).
- Please let us know by contacting the Customer Care Center. See page 6 for contact details.

I have a chronic condition or a health concern.

- We're here to support you if you have a serious condition or have a complex health care need.
- Visit wellfirstbenefits.com/livinghealthy and click on "Complex Case Management" to learn how we can help, or contact the Customer Care Center. *See page 6 for contact details.*

* Your financial responsibilities may come in the form of a copay, coinsurance or deductible. The terms stated in these documents may change at your annual policy renewal, and we would send you an outline of any changes at that time.

** These documents are also available by contacting the Customer Care Center to request copies be mailed to you. See page 6 for contact details.



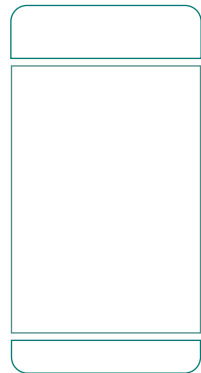
We're sharing helpful insurance tips, informative videos and much more. Go to facebook.com/wellfirsthealth to join the conversation all year long.



LIKE | JOIN
US? | US!

Health insurance support Is just a tap or click away.

You shouldn't have to be a rocket scientist to figure out health insurance. We offer innovative tools to help you sort through all your information. And if you need a little help along the way, we're standing by.



Member Portal

Manage your health insurance information with your secure and convenient Member Portal account.

- View your insurance plan details
- Request member ID cards or download a digital copy
- Change your primary care clinic
- Review past claim details and more
- View and pay your premium bill

Visit wellfirstbenefits.com/Account-Login and use your member number from your ID card to activate your account.



Customer Care Center

Our friendly Customer Care Specialists are here to turn health insurance confusion into clarity.

- Get answers to benefit and coverage questions
- Figure out what your financial responsibility is for a bill
- Learn the details about a provider

866-514-4194 (TTY: 711)*
Monday – Thursday, 7:30 am – 5 pm
Friday, 8 am – 4:30 pm

CALL

CLICK

Visit wellfirstbenefits.com and send us a message.

*Please call 866-514-4194 if you purchased your coverage from the Health Insurance Marketplace.

Health care support is always At your beck and call.

Time is precious. That's why we offer technology so you can keep tabs on what's most important – your health. And when health concerns come up, call our nurses for real insight into your specific situation instead of generalities found on various internet sites.



MyChart

Manage your medical world – all from a computer or smart phone. MyChart is designed for the way you live today.

- Send and receive secure messages with your primary care provider
- Schedule appointments
- Get lab results
- Request prescription refills and more
- View and pay your medical bill

Visit wellfirstbenefits.com/Account-Login to activate your account.

Some features of MyChart may not be available at all primary care clinic locations.



Virtual Visit

Get help for common illnesses like flu or sinusitis by connecting to a local provider via smart phone or computer. Visit wellfirstbenefits.com/virtualvisit.



Nurse Advice Line

Take the guesswork out of getting the health care you deserve. A nurse is ready to help 24/7/365.

- Talk with an experienced registered nurse from SSM Health
- Get help figuring out where to go for care
- Get answers to your health-related questions or concerns

Call **833-925-0398**

Save our number in your phone so you can call us anytime.



Save our number in your phone!
833-925-0398

Achieve your goals and Earn up to \$150 along the way.

We believe that with the right tools, information and motivation, you can achieve your goals for a healthier lifestyle on your own terms. That's what Living Healthy is all about.



LivingHealthy
POWERED BY **WebMD** health services

Your Comprehensive Wellness Program

Living Healthy is centered on you so you can get involved and informed on your own terms.

- Get up to \$150 for your healthy activities (see right for details)
- Set health goals and track your progress
- Take advantage of resources to end your tobacco use
- Receive extra support if you have complex or chronic health conditions

Living Healthy Portal

Your online portal is interactive and personalized to your unique needs and goals.

- Take a health assessment and begin your journey toward improved health
- Access resources and interactive tools to help you live a healthy lifestyle
- Access \$150 in Living Healthy rewards

Visit wellfirstbenefits.com/livinghealthy to personalize your Living Healthy portal account today.

Living Healthy Rewards*

Get up to \$150 per calendar year by completing and logging healthy activities:

- Take a 10-minute health assessment within your Living Healthy portal
- Activate your MyChart account
- Have an Annual Preventive Office Visit
- Get your annual flu vaccine
- Submit Advance Directive forms to your physician OR Volunteer your time
- And more – visit wellfirstbenefits.com/livinghealthy for a list of healthy activity reward options

Here's how it works:

- Choose the healthy activities you want to complete
- Each completed activity is worth reward points
- Earn up to 1,500 points for a maximum of \$150 per calendar year
- Get your reward in the form of gift cards to your choice of many national retailers, restaurants and other popular merchants
- All rewards must be redeemed before December 31, 2020


* You must complete the online health assessment in order to earn reward points for other healthy activities. Check with your plan administrator for reward offerings specific to your plan. Only WellFirst Health members, ages 18 and older, are eligible for Living Healthy rewards. Covered adult children can earn up to \$100 per year for completing healthy activities. Your health information is protected by federal law and will not be shared with your employer. Living Healthy rewards are not available to Federal Employee Health Benefits (FEHB) Program members.



Try a Virtual Visit!

Get care for certain common illnesses from the comfort of home via smart phone or computer. Reach trusted SSM Health providers when you need them most. Receive a diagnosis, a treatment plan and a prescription, via [wellfirstbenefits.com/virtualvisit](https://www.wellfirstbenefits.com/virtualvisit).

Get the right care, in the right place At the right cost.



Primary Care

Whenever you need care (except emergencies), start by calling your primary care clinic for the soonest available appointment. Don't wait for your health conditions to get worse. Same-day appointments are usually available, even for urgent medical needs.

Common reasons to visit include: _____


The lower-cost option.



Urgent Care

If a same-day appointment is not available to treat your illness or injury at your primary care clinic, you may be directed to Urgent Care.

Possible higher copay option.



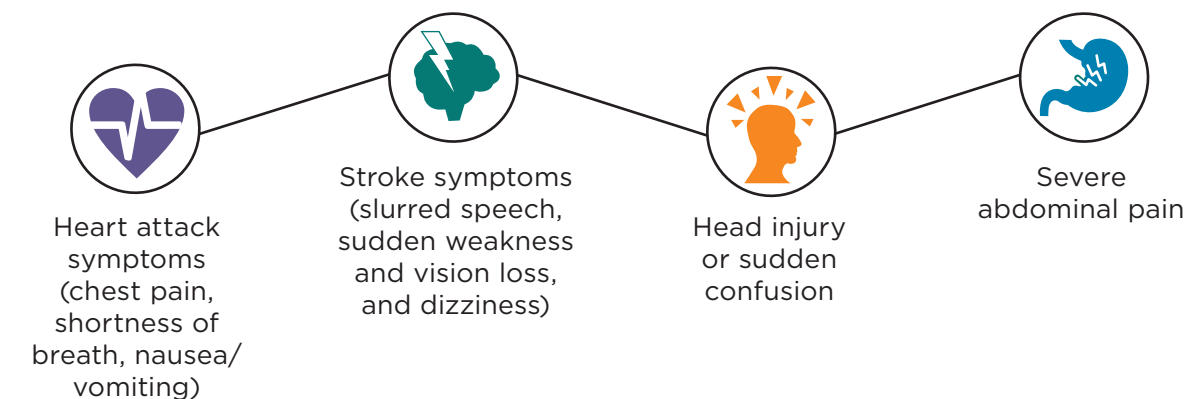
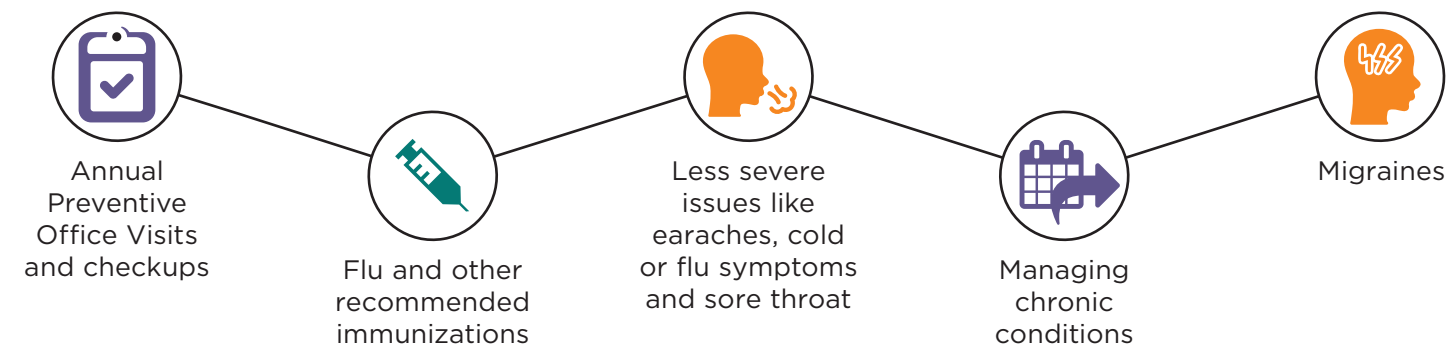
Emergency Care

For a life-threatening illness or injury, go to the nearest emergency room or call 911. Make sure to tell your primary care provider that you went to the emergency room. He or she might determine that you need follow-up services.

Common reasons to visit include: _____

The high-cost option.

We understand it can be confusing to navigate through the health care system. Knowing your care options in advance is not just good for your health but it's also better for your budget.



Still not sure of the type of care you need?
We'll assess your symptoms and guide you.

866-514-4194

Find a care location near you:
[wellfirstbenefits.com](https://www.wellfirstbenefits.com)

The best relationships Include a healthy dose of trust.

We know health care is a very personal – and at times, intimidating – experience. That's why our Primary Care Providers work so hard to earn and keep your trust. No judgments. Just compassion.



Primary Care Provider (PCP)

Your PCP is committed to working with you to build a relationship of trust. Trust combined with his or her training and experience means you have a true health advocate who cares.

- Provides care for a wide range of preventive and long-term health care
- Helps you stay healthier with regular visits, immunizations and screenings
- Handles your immediate care needs
- Coordinates needed specialist care
- Coordinates your health care with other medical experts



See page 24 for a helpful decision-making worksheet to help you choose a PCP.



Types of PCPs

Your PCP can be any of these medical professionals who are trained to provide a wide range of health care services such as Family Medicine, Internal Medicine, General Practice and more.

- Physician – Medical Doctor (MD) and Doctor of Osteopathic Medicine (DO)
- Certified Physician Assistant (PA-C)
- Advanced Practice Nurse Prescriber (APNP)

Visit wellfirstbenefits.com/doctors to search our online provider directory for an available primary care provider. You can filter your search so you only see providers in your network. Then select a provider to learn about his or her education, specialty, certification and more.

Getting sick happens. Staying healthy? We make that happen too!

We do more than pay the medical bill. At the heart of our preventive care philosophy is a promise that you'll get the support you need to remain as healthy as possible and help prevent disease.



Annual Preventive Office Visit

This type of visit can bring to light health concerns so they can be addressed before they get worse. That's what preventive care is all about.

- Allows your primary care provider to get to know you and your health care needs
- Helps you prevent or manage illnesses, diseases or other health problems
- Includes important preventive services, such as immunizations, cancer screenings and patient counseling (see below for examples)



Preventive Care*

In addition to an Annual Preventive Office Visit for all ages, we encourage and cover:

- Immunizations - doses and age-specific vaccines vary
- Screenings for breast, cervical and colon cancer
- Annual Sexually Transmitted Infection (STI) counseling for adults and adolescents
- Cholesterol screening for all ages and more

Visit wellfirstbenefits.com for a complete list of covered preventive services.

* Information presented here is meant to supplement - not replace - the advice and care of health care professionals. To see your specific preventive care coverage details, please review your Member Certificate (sometimes called a "Member Policy") and Summary of Benefits and Coverage documents. Details for covered preventive services may change. For coverage questions, contact the Customer Care Center. See page 6 for contact details.



Traveling? Here's what you need to know.

You don't need to take insurance coverage worries with you on your vacation. We have you covered for urgent and emergency care worldwide.

- We'll cover services provided in an urgent care facility and/or emergency room while you're out of the WellFirst Health service area, subject to policy copayments, coinsurance, deductibles and maximum allowable fees. No referral or prior authorization needed. If you are unable to get to an in-network work plan provider, please go to the nearest urgent care or emergency center for treatment. **Please notify us as soon as possible by calling the Customer Care Center at 866-514-4194.**
- An in-network provider should resume all follow-up care. If you are out of the area and not able to see an in-network plan provider, call your primary care provider to discuss the urgent/emergent services you received and the recommended follow-up with an out-of-network provider. You must have an approved prior authorization for services to be covered. Your primary care provider will submit a request for medically necessary services with the out-of-network provider.

Specialty care is everywhere When you need it.

In addition to primary care providers, our network includes a variety of medical specialties. Your primary care provider can help you find the specialist who is right for you.



Specialty Care 101

Talk with your primary care provider if you think you need to be seen by a specialist. He or she may even recommend you seek specialty care.

- Examples of specialty care include physical therapy, podiatry, chiropractic services and dermatology
- There are many specialists affiliated with WellFirst Health, including but not limited to SSM Health providers
- You should be seen by a specialist within the WellFirst Health network of providers

Visit wellfirstbenefits.com/doctors for a comprehensive list of our specialty providers, behavioral health services and hospitals.



Prior Authorization

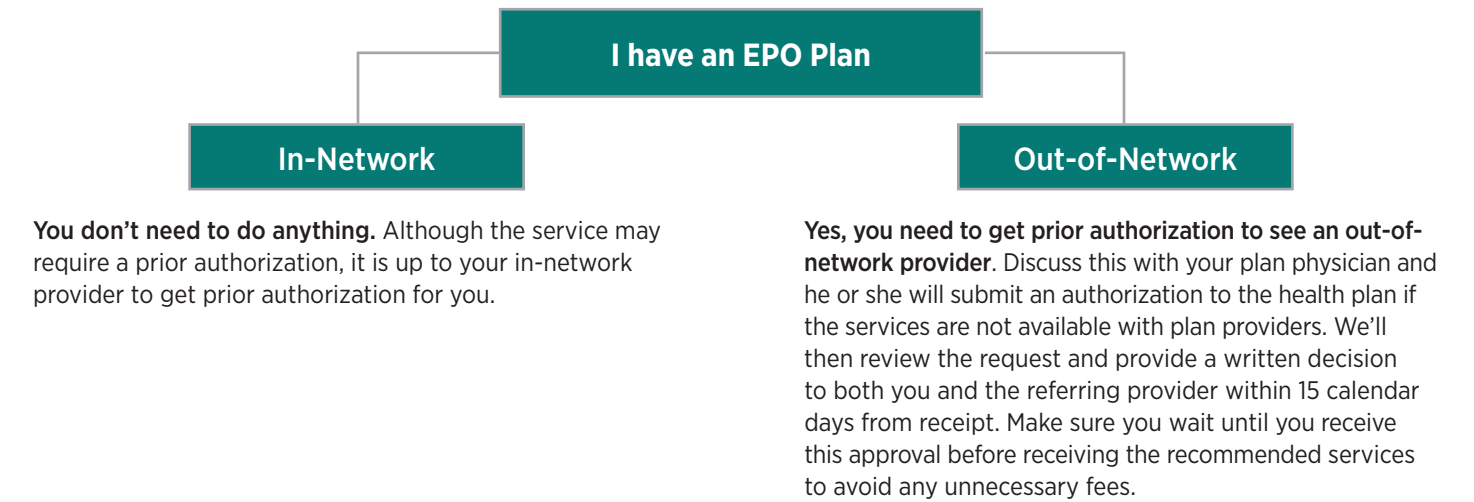
Certain medical services or specialty care services from a specialty provider might require you to get prior authorization.*

- A good rule to remember is that any time you seek services with an out-of-network provider, you will need to get prior authorization unless your benefit plan includes an out-of-network option.
- We require prior authorization so our medical management team can review the medical necessity of the recommended service or visit and make sure you are getting appropriate care unless your benefit plan includes an out-of-network option.

* A prior authorization can only be obtained for services that are covered under your plan benefits. For example, if bariatric surgery isn't covered in your policy, prior authorization will not change the policy to cover it. If the services are covered under your plan, they remain subject to a decision regarding medical necessity and any applicable cost sharing (e.g., copays, coinsurance or deductibles).

Do I need Prior Authorization?

My PCP (or other in-network provider) recommended I visit a specialist:



Have a Question? Contact the Customer Care Center.† See page 6 for contact details.

For a plan-specific list of services that need a prior authorization, refer to your Member Certificate found at:
[wellfirstbenefits.com/
member-benefits](http://wellfirstbenefits.com/member-benefits)

† If the Customer Care Center is unable to address your authorization concerns, you will be connected to the Care Management Department. If you have an urgent need outside of business hours, leave a message with the Customer Care Center and your call will be returned within one business day.

Getting the most From your drug benefit.

Convenience and member affordability are the name of the game when it comes to WellFirst Health pharmacy services. We're here to help you manage your prescriptions and lower your expenses.



SSM Health Pharmacies & FREE Delivery

Our friendly and professional staff are available at eight convenient locations.

- Get answers to your questions and make sure your medications are right
- Refill prescriptions by phone or online
- Pickup prescriptions or receive FREE mail-order delivery to your door (within the continental US)*
- Get prescriptions filled for 90 days



See page 25
for a helpful
medication tracker.

Visit wellfirstbenefits.com/pharmacy to view your drug formulary, find nearby pharmacies and learn more about mail-order delivery, immunizations and other pharmacy services.



You split the tablet - we'll split the copay

Tablet splitting can provide significant savings for you, depending on your prescription and dose.

- You pay up to one-half of your usual copay on select medications
- For more information, talk to your Primary Care Provider or contact the Customer Care Center.

See page 6 for contact details.

*Mail-order delivery service is not available to all members. Refer to your Summary of Benefits and Coverage document or contact the Customer Care Center. See page 6 for contact details.



Specialty Pharmacy

Medications for many chronic and complex health conditions can be hard to manage. Our Specialty Pharmacy works with you and your provider to help you to manage your condition and to make sure you receive the best care possible. We offer free delivery, same-day service, refill reminders, financial assistance and more.

Drug Formulary & Management Procedures

We use a drug formulary, which is a list of prescription drugs that helps you understand what is and isn't covered. Our drug formulary breaks the list into different tiers. The tiers are organized by the level of cost sharing between you and the health plan. The drug formulary is reviewed every month and updated on a regular basis. For example, we update the drug formulary when a new generic drug is approved. There are restrictions to and procedures for your coverage in order to help keep plan costs down.*

* Restrictions to and procedures for your prescription coverage mean you may only receive drugs listed on our drug formulary (closed formulary). Certain drugs may have specialist restrictions or require you to visit a specialty pharmacy. You may also be required to have prior authorization, mandatory generic substitution, step therapy and quantity level limits for certain drugs. Be familiar with your plan's specific coverage details and visit wellfirstbenefits.com/pharmacy to review our drug formulary, along with general limitations and procedures.

Find a pharmacy location near you:
wellfirstbenefits.com/pharmacy

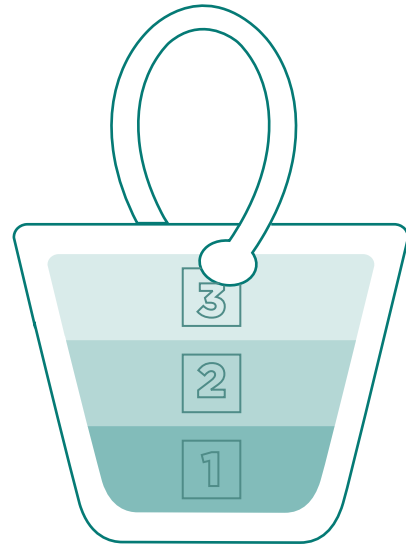
How insurance works: Health insurance 101.



See page 22 for a worksheet to help you understand your cost sharing responsibilities

We provide you with tools to learn where your health care dollars go, and we try to make it as easy as possible to understand your financial responsibilities.*

Your policy may use a system of cost sharing that can include a copay, coinsurance, deductible or any combination of the three.



1 DEDUCTIBLE

Each time you receive medical services, you'll pay the bill towards these services up to a certain amount. This amount is your deductible, which is what you must pay for covered health care services each year before we begin to pay.

2 COINSURANCE[†]

Once you've paid the deductible amount, your insurance will then start splitting the cost of additional medical services with you. This is known as coinsurance, where you only pay a percentage or part of the total cost of services and we'll pay the rest.

Deductible and Coinsurance Limit – There's a dollar limit to the amount you'll pay towards your deductible and coinsurance.

3 COPAYS

A copay is a fixed dollar amount, which you pay at the time you receive medical services (for things like an office visit) and prescriptions. All your copays add up toward your Maximum Out-of-Pocket total.

Maximum Out-of-Pocket – There's a dollar limit to all your cost sharing. You reach this amount by means of your deductible, plus your coinsurance, plus your copays. Once this limit is reached, you'll pay nothing on subsequent covered medical charges for the remainder of your policy year.

* Not all of the cost-sharing terms listed here apply to all members. Refer to your Member Policy document to understand which apply to you.

† Coinsurance is your share of the costs of a covered health care service. It's calculated as a percent of the allowed amount for the service.

Payments and Claims

How can I get a cost estimate for services?

Check your Member Policy document for details about common medical services. You may also visit [wellfirstbenefits.com/members/cost-estimator](https://www.wellfirstbenefits.com/members/cost-estimator) for three tools that estimate physician, facility and pharmacy costs.

I need to make a payment.

For insurance premiums: You can pay your insurance premiums online or by mail. We also accept cash payments at a CheckFree® kiosk near you. Visit [wellfirstbenefits.com/billpay](https://www.wellfirstbenefits.com/billpay) to learn more.

For medical bills: When you are seen at a clinic location for services, you may pay a copay when you check-in. WellFirst Health will send you a bill for any copay charges not paid at the time of service or any deductibles and coinsurance for which you are financially responsible. You can pay your bill online through your MyChart account or mail your payment (check or credit card info) with the enclosed payment form. Visit [wellfirstbenefits.com/billpay](https://www.wellfirstbenefits.com/billpay) to learn more.

I need to submit a claim.

Claims are usually sent directly to WellFirst Health by providers or clinics. Sometimes – if you're traveling out of the area or have a college-age dependent, for example – it may be necessary for you to submit a claim for reimbursement. Visit [wellfirstbenefits.com](https://www.wellfirstbenefits.com) and search the phrase: "member paid claim reimbursement form." Be sure to follow these guidelines:

- Send an itemized bill from the provider of service. If services were received outside of the U.S., you will need to submit the original bill along with an itemized bill that has been translated into English and indicate the appropriate currency exchange rate at the time the services were received.
- Send the bill within 60 days (up to 12 months are allowed) after the services are received to:
**WellFirst Health, Attn: Claims Department,
P.O. Box 56099, Madison, WI 53705.**
- If you have another insurance company that is the primary payer, you will need to send the Explanation of Benefits to WellFirst Health or your health care provider.

I received an Explanation of Benefits (EOB). Is this a bill?

The EOB is not a bill. You'll receive an EOB when you use your health plan for a covered service. The EOB lists the services used, amount charged by the provider and your financial responsibility to pay toward deductibles or coinsurance. Log in to Member Portal to see your past EOBs.



Store your EOBs in the pocket folder in the back.



Get a Cost Estimate

Check your Member Policy document for details about common medical services. You may also visit [wellfirstbenefits.com/members/cost-estimator](https://www.wellfirstbenefits.com/members/cost-estimator) for helpful tools or use the **What's My Copay?** tool to calculate out-of-pocket costs for prescription drugs.

[wellfirstbenefits.com/billpay](https://www.wellfirstbenefits.com/billpay)

Need to make changes to your plan? We can help.

Special Enrollment

We understand that sometimes big events happen in your life and it means you need to make a change to your coverage with WellFirst Health. You can make changes to your plan outside of the designated open enrollment period (whether you purchased coverage on or off the Health Insurance Marketplace), but only if you have a qualifying event that would trigger a special enrollment period.* In general, a qualifying event occurs when your family, health insurance or financial status changes throughout the year. **Examples include:**

- Birth/Adoption
- Marriage
- Permanent Move
- Loss of Coverage

Typically, consumers have a specified number of days from when a qualifying event occurs to make plan changes. Since different qualifying events have different time frames, we recommend you review our special enrollment page at [wellfirstbenefits.com/speciaalenrollment](https://www.wellfirstbenefits.com/speciaalenrollment) for more information on qualifying event requirements.

*Special enrollment periods, which were created by the Affordable Care Act (ACA), give consumers a limited time period after a qualifying event to purchase new individual health insurance or make changes to an existing policy, like adding a dependent or changing plans.

Let us know if you have other coverage or Medicare.

Do you have health insurance coverage in addition to your coverage through WellFirst Health? When you have coverage through more than one source, we have to determine in what order claims will be paid, referred to as coordination of benefits. It is especially important that you notify us when you are eligible for Medicare. When you are eligible for Medicare, WellFirst Health processes your claims as if you are enrolled in Medicare, even if you choose not to enroll in Medicare Part A and/or B. This will result in you paying out-of-pocket for services that Medicare would have covered. For this reason, we strongly suggest that you enroll in Medicare Part A and B as soon as you are eligible.

We're here to help you sort it all out. If you have an Individual plan, please call the Customer Care Center at **866-514-4194 (TTY: 711)** to notify us of any other insurance coverage you have, including Medicare.

Member Information.

Member Rights & Responsibilities

You deserve the best service and health care possible. Rights and responsibilities help foster cooperation among members, providers and WellFirst Health. Visit [wellfirstbenefits.com/member-rights](https://www.wellfirstbenefits.com/member-rights) to view all of your member rights and responsibilities.

Terms & Conditions

All your benefits are subject to terms and conditions as described in your Schedule of Benefits and in either your "Member Policy" if you have individual coverage. Please refer to these important documents for complete details.

Grievance & External Independent Review Rights

We know that at times you may have questions and concerns about benefits, claims or services you have received from WellFirst Health. When a question or concern arises, we encourage you to reach out to our Customer Care Center. Our Customer Care Specialists will make every effort to resolve your concern promptly and completely. Your input matters, and we encourage you to call with any concerns you may have regarding your health care. If after contacting us, you continue to feel a decision has adversely affected your coverage, benefits or relationship with WellFirst Health, you may file a grievance (sometimes called an appeal). Visit [wellfirstbenefits.com/appeals](https://www.wellfirstbenefits.com/appeals) for details on how to file or for more information about these procedures. You may also find information in your Member Certificate or Summary. Contact the Customer Care Center with any questions about the process. *See page 6 for contact details.*

Drugs and New Medical Technology

Each year, we evaluate new and existing medical technology to determine if any updates to medical policies are needed. Drugs covered under your pharmacy benefit are also reviewed by a WellFirst Health medical director and pharmacists from SSM Health System and Navitus Health Solutions. WellFirst Health follows the review process set forth by the National Committee for Quality Assurance (NCQA) any time there is a new product or process. Based upon the results of the technology assessment, WellFirst Health will revise its medical policies if necessary.

Privacy & Confidentiality

WellFirst Health is required by law to maintain the privacy of your personal health and financial information (collectively referred to as "nonpublic personal information") and provide you with written notification of our legal duties and privacy practices concerning that information.

Please visit our website at [wellfirstbenefits.com/privacy](https://www.wellfirstbenefits.com/privacy) or give us a call at **866-514-4194** to request a copy.



For more information on qualifying event requirements:
[wellfirstbenefits.com/speciaalenrollment](https://www.wellfirstbenefits.com/speciaalenrollment)

Knowing the ins and outs Of your new health insurance.

It's important to know which network you belong to because your network informs where you can go for care.

This is my WellFirst Health member number:
If you're not sure, check your member ID card.

Here's the name and phone number of someone who helped me get my coverage:
For example, an insurance agent.

Name: _____

Phone: _____

It's important to know the coverage details of your plan. Visit wellfirstbenefits.com/benefit-center to check out your Summary of Benefits and Coverage document and write-in the following:

My deductible:*	\$ _____
My coinsurance:*	\$ _____
My deductible and coinsurance limit:*	\$ _____
My copay for a Primary Care service:	\$ _____
My copay for an Emergency Room service:	\$ _____
My monthly premium:†	\$ _____

* Not all of these terms apply to every member's insurance plan. For definitions of these terms, see page 18.

† Usually paid through your work paycheck if you've purchased a plan through your job or paid directly to us if you've purchased a plan as an individual.

Your Member ID Card



If you haven't yet received your ID card, it should be on the way!

This helpful worksheet is for your reference only. You are not required to complete it.

Finding and choosing your new Primary Care Provider (PCP).

Your PCP is your main contact for medical and preventive care. They:

- Provide care for a wide range of preventive and long-term health care
- Help you stay healthier with regular visits, immunizations and screenings
- Handle your immediate care needs and more

For more PCP information, see page 12.

You should establish a relationship with a PCP. After all, they play a major role in your health and wellbeing.

Think about the following when choosing the right one for you:

Thinking about my busy schedule, I would prefer that my PCP be located:

- Close to home Close to school Other:
- Close to work Close to daycare

I have a gender preference for my PCP:

- Male Female No preference

What are my main health goals and does this PCP seem like he or she could help?

- I want to stop smoking I want to find more enjoyment in life Other:
- I want to have children I want to lose weight

There are different areas of medicine for different stages in life. A PCP usually focuses on one area of medicine, so think about what kind of PCP would best fit your needs. I want a PCP who focuses on:

- Family medicine**
care for anyone, at any age (from newborns to the elderly), with any health condition
- Pediatrics**
care for newborn and childhood (age 19 and younger) health and development
- Internal medicine**
same care as family medicine, for anyone age 18 and older
- Family medicine with obstetrics**
care for the entire family, with an emphasis on delivering babies

Visit wellfirstbenefits.com and search with the above preferences in mind.

Once you've established a relationship with a PCP, fill in their contact information here for easy reference.

My PCP's name:	Name, location and phone number of my PCP's clinic:
My clinic's office hours:	If I had to take public transportation to the clinic, this is the best bus route:

Visit wellfirstbenefits.com/Find-A-Location to search for clinic hours and locations.

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Getting ready for a Primary care visit.



Your Primary Care Provider (PCP) is here to help you. The more he or she knows, the better treatment you'll receive. So get ready to have an honest and trusting conversation about your health and lifestyle. Fill out this worksheet ahead of time to help you prepare and bring it with you to take notes and write answers.

Bring in your current prescriptions, over-the-counter medications and supplements.

Tip: put them in a bag so you can easily carry everything.

The main reason I need a primary care visit today:

- I want an Annual Preventive Office Visit to make sure I'm healthy.
- I want to get up-to-date on my immunizations.
- Other:
- I need a refill on my medications:
- I think I might have a medical problem:

Write the top questions you want to ask during your visit:

Example questions: What is my main problem? What do I need to do and why is it important for me to do that? Will I need any tests or labs? What are my treatment options? What are the benefits of each option?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Share your top health goals with your PCP or nurse. What are your top goals?

- I want to stop smoking.
- I want to lose weight.
- Other:
- I want to have healthy children.
- I want to find more enjoyment in life.

Ask about preventive care that can keep you healthy:

- Do I need a blood pressure check?
- What foods should I avoid?
- Tell me more about checkups for depression and substance abuse.
- What immunizations are recommended?
- Where can I learn more about resources to stop using tobacco?
- Do I need any recommended cancer screenings?

If a new medication is needed:

- What is the name of the drug?
 - Will this medicine interact with medicines that I'm already taking?
 - Are there any side effects?
- ➔ See "Taking medications to keep you healthy" worksheet for more tips and questions.

Taking medications To keep you healthy.

Medications can be an important part of treatment, but incorrect use and interactions with other drugs can have unintended results. So whether you're starting a new prescription or shopping for cold medicine, remember that details do matter.

Ask the provider prescribing your medication these questions to make sure you're using it correctly:

1. What's the name of the medication?
2. What's the reason to take it (how does it help me)?
3. How often should I take it, at what dosage, and when?
4. How long should I take it?
5. What side effects are possible?
6. What should I do if side effects happen?

When you pick up the prescription, check that it is the same one you were prescribed.

Never chew, crush, break or dilute any capsules or tablets unless the directions say that you should.

Before taking over-the-counter medicine, check with your pharmacist to make sure it's safe in combination with any other medications you are taking.

Medication Tracker				
Medication	Dosage <small>How much to take Example: one pill</small>	Frequency <small>How often to take Example: once per day</small>	Prescribed by <small>Example: Dr. Smith</small>	Notes

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Child appointment tips and Vaccine Tracker.



When it comes to medical appointments for your child, a few minutes of preparation can make a big difference.

Here are some helpful tips for you and your child to have a successful experience with your child's Primary Care Provider.

- Be honest and tell your child what to expect. For example, you could say that immunizations will hurt, but only for a minute or so.
- Use a toy or musical instrument to distract your child during shots or other uncomfortable moments. Let them know it's okay to cry.
- Talk with other people who know your child well, such as a grandparent or caregiver, and ask if they have any concerns.

Does your child need to catch up on any vaccines? (See tracker below.)

Visit cdc.gov/vaccines/schedules to view the *Catch-Up Immunization Schedule* and learn more about vaccines. To learn more about important immunizations and to check which vaccines your family members have received in the past. Visit the *Wisconsin Immunization Registry* at dhfswir.org.

Name: _____

We F^rst Hea th
Vaccine & Visit Tracker
wellfirstbenefits.com

Routine Well-Child visits are important! At these visits your child's doctor will:

- Give vaccines to protect against diseases.
- Do routine screenings and labs.
- Track growth and development.
- Discuss nutrition and activity.
- Answer questions about sleep habits and overall health.

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<input type="checkbox"/> Newborn Visit <small>HepB¹ if not done at the hospital</small>	<input type="checkbox"/> 24-month Visit	<input type="checkbox"/> 11-year Visit
<input type="checkbox"/> 2-month Visit <small>DTaP / HepB / Hib / IPV / PCV / RV²</small>	<input type="checkbox"/> 30-month Visit	<input type="checkbox"/> 12-year Visit
<input type="checkbox"/> 4-month Visit <small>DTaP / Hib / IPV / PCV / RV</small>	<input type="checkbox"/> 3-year Visit	<input type="checkbox"/> 13-year Visit
<input type="checkbox"/> 6-month Visit <small>DTaP / HepB / Hib / IPV / PCV / RV</small>	<input type="checkbox"/> 4-year Visit <small>DTaP / IPV / MMR / Varicella</small>	<input type="checkbox"/> 14-year Visit
<input type="checkbox"/> 9-month Visit	<input type="checkbox"/> 5-year Visit	<input type="checkbox"/> 15-year Visit
<input type="checkbox"/> 12-month Visit <small>HepA / MMR / Varicella</small>	<input type="checkbox"/> 6-year Visit	<input type="checkbox"/> 16-year Visit <small>MCV booster</small>
<input type="checkbox"/> 15-month Visit <small>DTaP / Hib / PCV / any remaining immunizations</small>	<input type="checkbox"/> 7-year Visit	<p><small>Starting at 6 months, children should get an annual flu vaccine every fall. After age 3, annual visits are recommended.</small></p>
<input type="checkbox"/> 18-month Visit <small>HepA</small>	<input type="checkbox"/> 8-year Visit	
	<input type="checkbox"/> 9-year Visit	
	<input type="checkbox"/> 10-year Visit <small>HPV (2 or 3-dose series) / MCV / Tdap Get all by age 13</small>	

Vaccination Key:

DTaP	Diphtheria, Tetanus, Acellular Pertussis
HepA	Hepatitis A
HepB	Hepatitis B
Hib	Haemophilus Influenzae Type B
HPV	Human Papillomavirus
IPV	Inactivated Polio
MCV	Meningococcal: Meningitis
MMR	Measles, Mumps, Rubella
PCV	Pneumococcal: Pneumonia, Meningitis
RV	Rotavirus: severe diarrhea
Tdap	Tetanus, Diphtheria, Pertussis
Varicella	Chickenpox

¹ HepB: All infants should receive the first dose shortly after birth, within 12 hours if mother is HBsAg-positive or her HBsAg status is unknown.
² RV: If the vaccine given at ages 2 and 4 months is Rotarix[®], a dose at 6 months is not needed.

Customer Care Center: 866 514 4194
Go to cdc.gov to learn more about vaccines and vaccine schedules.

Nurse Advice Line 833 925 0398





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