

A photograph of a smiling woman giving a piggyback ride to a man on a rooftop. The woman is in the foreground, wearing a denim jacket, and the man is behind her, wearing a patterned shirt. They are both looking towards the right. The background shows a cityscape with buildings under a clear sky. There are large yellow and teal circular graphic elements overlaid on the image.

# ***High Deductible Health Plan***

How to use your HDHP  
with your HSA

**univera**<sup>®</sup>  
H E A L T H C A R E

# Understanding your High Deductible Health Plan

A high deductible health plan may work a little differently than other health insurance plans you’ve had in the past. A high deductible health plan or “HDHP” is designed to help keep premium costs low for you and your family. You’ll have coverage for things like:

- Choice of doctors and hospitals
- Hospitalization
- No-cost telemedicine\*
- Urgent care visits
- Doctor visits
- Laboratory coverage
- Prescription drug
- Free preventive care
- Maternity and newborn care
- Specialty care

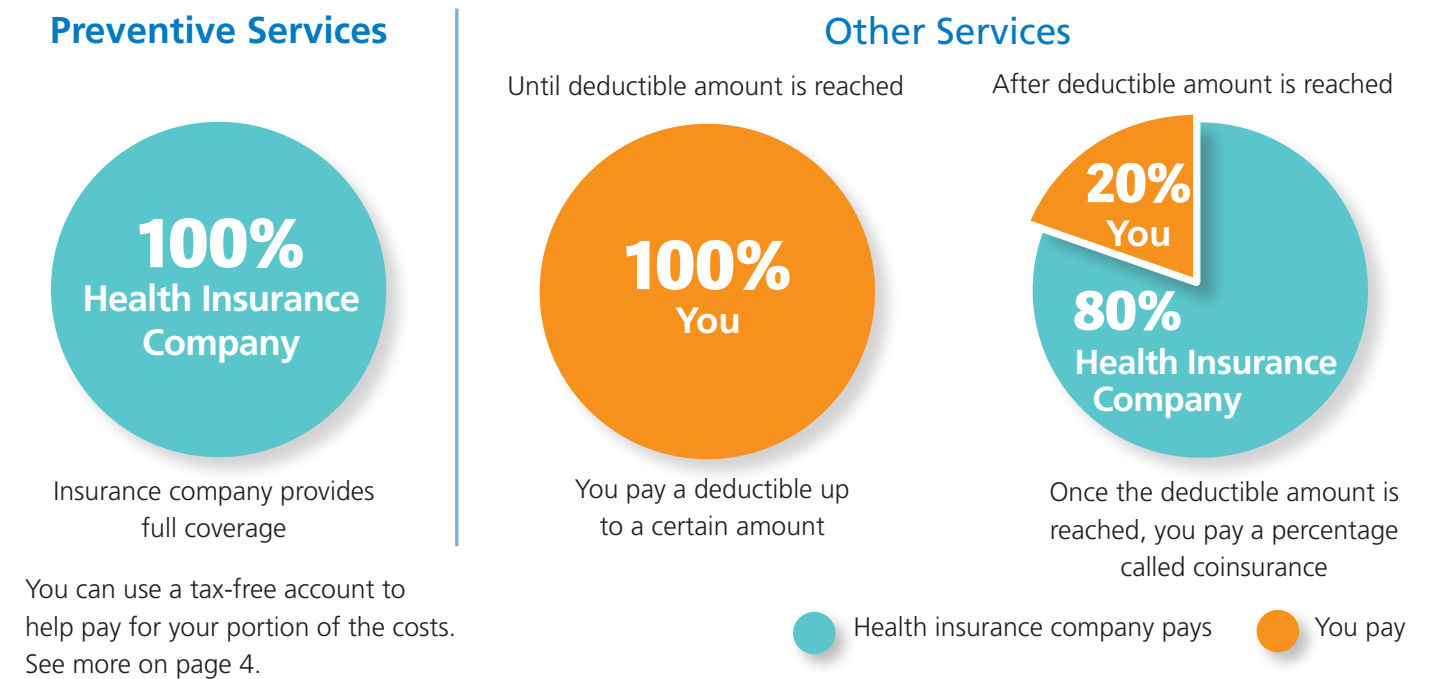
To help you understand your plan, this brochure provides explanations and examples.

## Let’s start with the basics:

Preventive care can help you avoid getting sick and improve your health. With a HDHP, preventive services such as routine physicals, screenings and vaccinations are covered in full.\*\* The deductible does not apply to preventive services; they are covered in full from day one.

For services other than preventive care, you are responsible for paying out of your pocket until you meet your deductible. The deductible amount will vary based on your plan, so make sure you know what that amount is. Once you reach your deductible, you will pay a percentage of cost, called coinsurance. Coinsurance is your share of the costs of a covered health care service, calculated as a percent. You will have to pay a percentage of that service and the health insurance company will pay the rest.

## The diagram illustrates how this works:\*\*\*



\*Subject to the deductible where applicable.

\*\*In accordance with the PPACA preventive care regulations, full coverage (no cost share) will be applied for those services meeting the requirements as outlined in Grade A and B. Recommendations of the United States Preventive Services Task Force.

\*\*\*Note: for illustrative purposes only - plan options vary



## For example:

Let's say your deductible is **\$2,000.**



You go to your doctor for low back pain.  
**You pay \$100 for the visit.**

You still have to pay **\$1900** more to reach your deductible.



Your doctor orders an **MRI** of your lower back.  
**You pay \$1,000 for the MRI.**

You still have to pay **\$900** more to reach your deductible.



After a series of visits to your doctor and a chiropractor, you have **\$0** left to reach your deductible. Now you will pay a percentage of cost, **called coinsurance.**



If your coinsurance is **20%**, and the next time you visit your doctor your bill is **\$100**, then **you'll pay \$20 and we will pay \$80.**

To help you with your costs, there is an out-of-pocket maximum which is an annual limit on the amount of money that you would have to pay for health care services, not including your monthly premiums. Remember preventive care is covered in full and is not subject to the deductible.

## Important terms to know:

- ▶ **Deductible** - The amount of money you have to pay before the health insurance company will make any payments towards health care services. Your deductible amount varies and is based on the type of plan you have.
- ▶ **Co-payment** - This is a fixed amount you pay each time you use a medical service, such as a doctor's office visit, prescription refill or a hospital stay. For example, if your prescription drug coverage includes a \$20 copay, you pay \$20 for each prescription and your insurance pays the balance.
- ▶ **Coinsurance** - Your share of the costs of a covered health care service, calculated as a percent. Coinsurance is similar to a copay, but instead of a fixed dollar amount, it is a percentage of the total bill. For example, if a visit to your doctor's office is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance company would pay the rest, or \$80.
- ▶ **Covered in full** - 100% of the total cost is covered by the health insurance company and you do not have to pay anything.
- ▶ **Out-of-pocket maximum** - An annual limit on the amount of money that you would have to pay for health care services, not including your monthly premiums.



# Tax-Free Funding account

You have the option to set up a unique account called a Health Savings Account or HSA to help you cover the costs associated with a high deductible health plan.



## What is an HSA?

An HSA is a tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more.

- ▶ The money you put into your HSA is not subject to federal income tax when you make the deposit.
- ▶ There are limits to how much you can contribute. The federal government sets annual limits to how much you can contribute.
- ▶ If you're under 65 and you withdraw money from your HSA for non-qualified medical expenses, you will be taxed at your income tax rate plus have to pay a tax penalty.

### Health Savings Account (HSA)

Overview	A tax-free account owned by you that works with a high deductible health plan to help you pay for qualified medical expenses
Who owns the account?	You
Who funds the account?	You and/or your employer
Are there contribution limits?	In 2020, the maximum is \$3,550 for single coverage and \$7,100 for family
Can I transfer the account?	Yes, you own the account

Talk to your HR or benefits representative about the account options that might be available.

## What will a Health Savings Account pay for?

Acupuncture	FICA and FUTA tax paid for medical care services	Osteopath
Alcoholism treatment	Fluoridation unit	Oxygen
Ambulance	Gynecologist	Pediatrician
Anesthetist	Hearing aids and batteries	Physician
Arch supports	Hospital bills	Physiotherapist
Artificial limbs	Hydrotherapy	Postnatal treatments
Blood tests	Insulin treatments	Licensed practical nurse for medical services
Blood transfusions	Lab tests	Prescription medicines
Braces	Laser eye surgery	Psychiatrist
Cardiographs	Metabolism test	Psychoanalyst
Chiropractor	Neurologist	Psychotherapy
Contact lenses	Nurse (including board and meals)	Registered nurse
Crutches	Obstetrician	Spinal fluid test
Dental treatment	Operating room costs	Sterilization
Dental x-rays	Ophthalmologist	Stop-smoking aids
Dentures	Optician	Surgeon
Dermatologist	Optometrist	Therapy equipment
Diagnostic fees	Oral surgery	Vaccines
Drug addiction therapy	Orthopedic shoes	Wheelchair
Drugs (prescription)	Orthopedist	X-rays
Eyeglasses		
Fees paid to health institute prescribed by a doctor		



For a list of qualified medical expenses, visit [IRS.gov](https://www.irs.gov). Please note: coverage of all services is subject to the terms of your HDHP.

## How do I use my HSA when I need health care services?

### What do I do when I go to the doctor's office?

When you go to the doctor's office, let them know you are using a Health Savings Account. The doctor will bill us. Once the bill has been processed, you and your doctor will get a letter that summarizes the costs associated with that visit. It will also show how much goes towards your deductible and how much you have to pay your doctor. Your doctor will send you a bill for the balance. You can use money from your Health Savings Account to pay that bill.

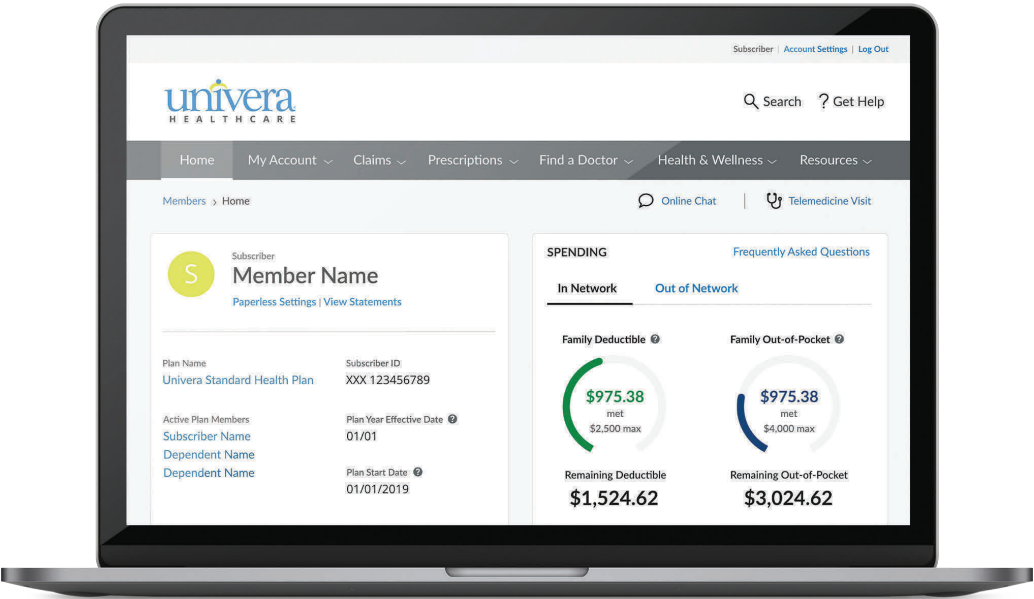
**Please note:** Your physician may bill you, up front, at the time of service, if the deductible is not met.

### What do I do when I need a prescription?

The pharmacy system processes in real-time so the pharmacist will be able to tell you exactly what you owe when you pick up your prescription.

# Simpler health plan? Check.

You know that feeling when you check the last thing off your to-do list? We do, too. That's why we've made it easier to save time, save money, and get things done by creating your Univera Healthcare online member account. Sign up today and keep tabs on your plan from any device.



1

### My Account

Create an online account to access your member card, view a summary of benefits and coverage, claims, go paperless, and more.

2

### Find a Doctor/Dentist

Locate a provider in our extensive 39 county regional network.\*

3

### Spending

Get a breakdown of your health care spending.

4

### Coverage & Benefits

View a summary of your plan details.

5

### Claims

View and submit claims.

6

### Get Rewards

Enjoy quick access to spending and rewards programs.

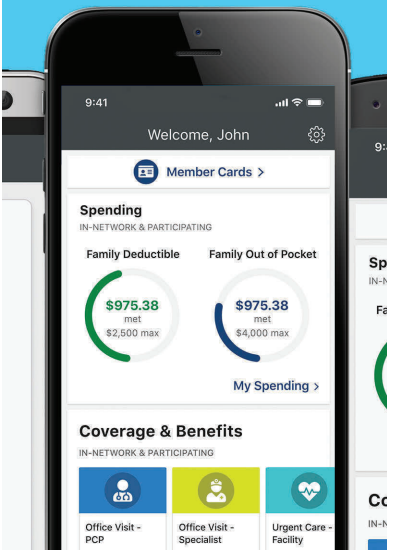
7

### Estimate Medical Costs

Research and get a personalized estimate of out-of-pocket medical costs for over 1,600 treatments and over 400 procedures.

**Download the  
Univera Healthcare App.**

Take your health plan  
with you for on-the-go  
access 24/7.



View your member card.

Track deductibles and  
out-of-pocket spending.

Find a provider or  
medical facility.

Access your benefits  
and claims information.



**Visit [Member.UniveraHealthcare.com](https://Member.UniveraHealthcare.com) to register today.**

## **Notice of Nondiscrimination**

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, national origin, age, disability, or sex. The Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or gender.

The Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, please refer to the enclosed document for ways to reach us.

If you believe that the Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Advocacy Department  
Attn: Civil Rights Coordinator  
PO Box 4717  
Syracuse, NY 13221  
Telephone number: 1-800-614-6575  
TTY number: 1-800-421-1220  
Fax: 1-315-671-6656

You can file a grievance in person or by mail or fax. If you need help filing a grievance, the Health Plan's Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 1-800-537-7697 (TDD)  
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



Attention: If you speak English free language help is available to you. Please refer to the enclosed document for ways to reach us.

Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意: 如果您说中文, 我们可为您提供免费的语言协助。  
请参见随附的文件以获取我们的联系方式。

Внимание! Если ваш родной язык русский, вам могут быть предоставлены бесплатные переводческие услуги. В приложенном документе содержится информация о том, как ими воспользоваться.

Atansyon: Si ou pale Kreyòl Ayisyen gen èd gratis nan lang ki disponib pou ou. Tanpri gade dokiman ki nan anvlòp la pou jwenn fason pou kontakte nou.

주목해 주세요: 한국어를 사용하시는 경우, 무료 언어 지원을 받으실 수 있습니다. 연락 방법은 동봉된 문서를 참조하시기 바랍니다.

Attenzione: Se la vostra lingua parlata è l'italiano, potete usufruire di assistenza linguistica gratuita. Per sapere come ottenerla, consultate il documento allegato.

אויפמערקזאם: אויב איר רעדט אידיש, איז אומזיסטע שפראך הילף אוועילעבל פאר אייך ביטע רעפערירט צום בייגעלייגטן דאקומענט צו זען אופנים זיך צו פארבינדן מיט אונז.

নজর দিন: যদি আপনি বাংলা ভাষায় কথা বলেন তাহলে আপনার জন্য সহায়তা উপলভ্য রয়েছে। আমাদের সঙ্গে যোগাযোগ করার জন্য অনুগ্রহ করে সংযুক্ত নথি পড়ুন।

Uwaga: jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Patrz załączony dokument w celu uzyskania informacji na temat sposobów kontaktu z nami.

تنبيه: إذا كنت تتحدث اللغة العربية، فإن المساعدة اللغوية المجانية متاحة لك. يرجى الرجوع إلى الوثيقة المرفقة لمعرفة كيفية الوصول إلينا.

Remarque : si vous parlez français, une assistance linguistique gratuite vous est proposée. Consultez le document ci-joint pour savoir comment nous joindre.

نوٹ: اگر آپ اردو بولتے ہیں تو آپ کے لیے زبان کی مفت مدد دستیاب ہے۔ ہم سے رابطہ کرنے کے طریقوں کے لیے منسلک دستاویز ملاحظہ کریں۔

Paunawa: Kung nagsasalita ka ng Tagalog, may maaari kang kuning libreng tulong sa wika. Mangyaring sumangguni sa nakalakip na dokumento para sa mga paraan ng pakikipag-ugnayan sa amin.

Προσοχή: Αν μιλάτε Ελληνικά μπορούμε να σας προσφέρουμε βοήθεια στη γλώσσα σας δωρεάν. Δείτε το έγγραφο που εσωκλείεται για πληροφορίες σχετικά με τους διαθέσιμους τρόπους επικοινωνίας μαζί μας.

Kujdes: Nëse flisni shqip, ju ofrohet ndihmë gjuhësore falas. Drejttojuni dokumentit bashkëlidhur për mënyra se si të na kontaktoni.

