Benefits Overview

Regional Healthcare Clinic, Inc DBA Katy Trail

Dedicated Website
KatyTrailBenefits.com
Dedicated Phone Number
844-617-1890





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 over 40 years.



Manage your health benefits without all the headaches

Download the free myHealthEZ app to view your benefits, manage and pay bills, locate care providers near you, and access your digital insurance cardright from your phone.



Tap. Pay. Done.

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



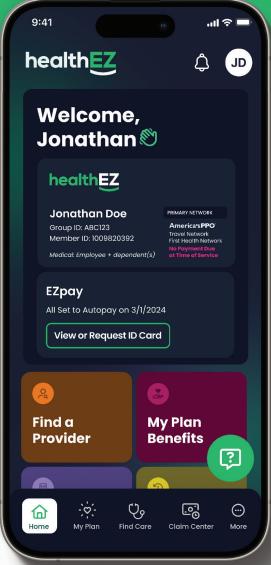
$\mathbf{\nabla}_{\mathbf{0}}$ Find a provider

Search local healthcare professionals and filter results by location and specialty to find the right care provider for you and your family.



EZchoice

EZchoice makes provider choice easy and medical costs transparent so you can be confident that you are not overspending on your medical care.



Tap into your health benefits

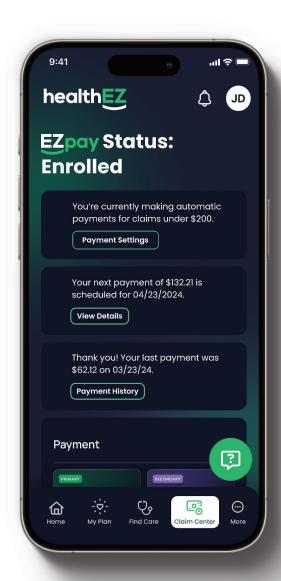
Scan the QR code with your device's camera to download the myHealthEZ app and put the power of hassle-free health benefits management at your fingertips.













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, we will notify you via email each time we process a bill of yours. Your options are:

- Approve Payment
- Decline Payment
- · Do not respond

If you do not respond and have a card on file, EZpay will pay your portion automatically. The automatic payment is processed:

- Two days for bills under \$250
- Five days for bills over \$250

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.





Care Advocacy

Helping you when you need it the most.

If you require services like a surgery, hospital stay or you are diagnosed with a complex medical condition, **you may receive a call, text or email from someone on the HealthEZ care management team.**

The advocate is there to help you:

- Understand your treatment options
- Coordinate services among your doctors
- Make sure you have everything you need for a quick recovery with the right care

Boost Your Baby

Promoting healthy pregnancies and happy moms.

HealthEZ offers maternity support by providing education and resources to promote a healthy pregnancy through postpartum.

- Expectant mothers and fathers will have a dedicated one point of a contact throughout their pregnancy journey.
- Providing tips on how to stay happy and healthy during and post pregnancy
- Maternity support offered through pregnancy until 6 months postpartum



Chronic Conditions Management

Our Livongo programs offer a whole-person approach to chronic condition management. Livongo's digital health platform provides actionable, personalized and timely support that make it easier to stay healthy, including:

- Lifestyle behavior change tools
- Medication optimization
- Expert health coaching

- Provider coordination
- Cellular-connected devices
- Personalized plans for reaching health goals

The program is offered at no cost to you and all family members with coverage through your health plan.

Register at <u>be.livongo.com/HEALTHEZ/register</u> or call (800) 945-4355 with code: <u>HEALTHEZ</u>

LIVONGO FOR DIABETES



Connected blood glucose meter, unlimited testing strips, personalized insights, 24/7 expert support and custom alerts.

LIVONGO FOR HYPERTENSION



Connected blood pressure monitor, personalized insights, shareable reports and access to expert health coaches.

LIVONGO FOR WEIGHT MANAGEMENT AND DIABETES PREVENTION



Connected smart scale, automatic weight and steps tracking, food logging, CDCapproved lessons and access to expert health coaches.



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 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.



Your medical network is First Health National Network for members in FL or CO.

Your medical network is HealthLink Open Acess III with Freedom Select for members in MO or KS.







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.

What if I go outside of my medical network?

There may be times when you decide to visit a doctor or clinic that is out-of-network. The costs for these visits and services are often higher than seeing doctors that are in-network. You will be responsible for paying the difference between the provider's fuOh II charge and the amount your health insurance plan pays. This is called balance billing.

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

Please visit your dedicated Benefits Website and click "Find Care."



Your Pharmacy Benefit Manager is SmithRx. Smi+hRx

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 SmithRx's mail order service.

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>SmithRx.com.</u>

Summary of Medical Benefits

| Base Plan | | | | | | | | |
|---|--|--|--|--|-----------------------------------|--------------------------------|----------------|-------------------------------|
| Embedded Deductible Embedded Out-of-Pocket Maximum | | | Tier 1 In-Network | | Tier 2 In-Network | | Out of Network | |
| Deductible | | | | | | | | |
| Individual Coverage | | | N/A | | \$! | \$5,000 | | \$5,000 |
| Individual under Family Coverage | | | N/A | | \$! | \$5,000 | | \$5,000 |
| Family Coverage | | | N/A | | \$1 | 510,000 | | \$10,000 |
| | | Out- | of-Pocket Max | kimum | | | | |
| Individual Coverage | | | N/A | | \$(| \$6,500 | | \$13,000 |
| Individual under Family Coverage | | | N/A | | \$(| \$6,500 | | \$13,000 |
| Family Coverage | | | N/A | | \$1 | \$13,000 | | \$26,000 |
| | | | | | | | | |
| Preventive Care Services | | | No Charge | | No Charge | | | 40%* |
| Primary Office Visit | | | No Charge | | \$40 | \$40 Copay | | 40%* |
| Specialist Office Visit | | | No Charge | | \$80 Copay | | | 40%* |
| Chiropractic Visit | | | Not Available | | \$80 Copay | | | 40%* |
| Urgent Care Services | | | Not Available | | \$40 Copay | | | \$80 Copay |
| Complex Imaging: MRI/CT/PET Scans | | | Not Available | | \$400 Copay | | 40%* | |
| Complex imaging. MRI/CT/FET Scans | | | Not Available | | \$400 | Сорау | | 40% |
| Inpatient Hospital Care Facility Fee Physician Fee | | | Not Available Not Available | | 20%* 20%* | | | 40%* 40%* |
| Outpatient Procdures Facility Fee Physician Fee | | | Not Available Not Available | | 20%* 20%* | | | 40%* 40%* |
| Emergency Room Services | | | Not Available | | \$100 Copay, then 20% Coinsurance | | | |
| Emergency Medical Transportation | | | Not Available | | 20%* | | | |
| | | | | | | | | |
| Mental Health/Chemical Dependency - Inpatient | | | Not Available | | 20%* | | | 40%* |
| Mental Health/Chemical Dependency - Office Visit | | | No Charge | | \$80 Copay | | | 40%* |
| Summary of Pharmacy Benefits | | | | | | | | |
| Prescription Drug Coverage | | | | | | | | |
| | Retail (per 30 Day supply) | Retail (per 90 Day supply) | Retail (per 30 Day supply) | Retail (p supply) | oer 90 Day | Retail (per 30 supply) | Day | Retail (per 90 Day supply) |
| | Katy Trail Pharmacy and Katy Trail Prescriber | Katy Trail Pharmacy and Katy Trail Prescriber | Katy Trail Pharmacy and Non-Katy Trail Prescriber | Katy Tro Pharma Non-Ka Prescrib | cy and ty Trail | Non -Katy Trail Pharmacy | | Non -Katy Trail Pharmacy |
| Generic | No Charge | No Charge | \$5 Copay | \$10 Copay | | \$20 Copay | | \$50 Copay |
| Preferred Brand | No Charge | No Charge | \$20 Copay | \$40 Copay | | \$45 Copay | | \$113 Copay |
| Non-Preferred Brand | No Charge | No Charge | \$50 Copay | \$100 Copay | | \$80 Copay | | \$200 Copay |
| Preferred Specialty Drugs | No Charge | Not Covered | 20% Coinsurance up to \$500 | Not Covered | | 20% Coinsurance up to \$500 | | Not Covered |
| Non-Preferred Specialty Drugs | No Charge | Not Covered | 30% Coinsurance up to \$500 | Not Covered | | 30% Coinsurance up to \$500 | | Not Covered |
| All specialty prescriptions must be filled at Katy Trail pharmacies, unless the medication is not available | | | | | | | | |

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

^{*} Coinsurance after deductible ** Covered as in-network in true-emergency

Summary of Medical Benefits Buy Up Plan **Embedded Deductible** Tier 1 In-Network Tier 2 In-Network **Out of Network** Embedded Out-of-Pocket Maximum Deductible N/A Individual Coverage \$1,000 \$1,000 N/A \$1,000 \$1,000 Individual under Family Coverage N/A \$2,000 \$2,000 Family Coverage Out-of-Pocket Maximum N/A Individual Coverage \$4,000 \$8,000 N/A Individual under Family Coverage \$4,000 \$8,000 **Family Coverage** N/A \$8,000 \$16,000 **Preventive Care Services** No Charge No Charge 50%* Primary Office Visit No Charge \$30 Copay 50%* Specialist Office Visit No Charge \$60 Copay 50%* 50%* Chiropractic Visit Not Available \$60 Copay **Urgent Care Services** Not Available \$30 Copay \$60 Copay 50%* Complex Imaging: MRI/CT/PET Scans Not Available \$400 Copay Inpatient Hospital Care **Facility Fee** Not Available 20%* 50%* Physician Fee Not Available 20%* 50%* **Outpatient Procdures Facility Fee** Not Available 20%* 50%* Physician Fee Not Available 20%* 50%* Not Available **Emergency Room Services** \$100 Copay, then 20% Coinsurance **Emergency Medical Transportation** Not Available 20%* Mental Health/Chemical Dependency - Inpatient Not Available 0%* 50%* Mental Health/Chemical Dependency - Office Visit 50%* No Charge \$60 Copay **Summary of Pharmacy Benefits Prescription Drug Coverage** Retail (per 30 Retail (per 90 Retail (per 30 Day Retail (per 90 Day Retail (per 30 Day Retail (per 90 Day Day supply) Day supply) supply) supply) supply) supply) Katy Trail Katy Trail Katy Trail Katy Trail Pharmacy Pharmacy Pharmacy and Pharmacy and Non -Katy Trail Non -Katy Trail and Katy Trail and Katy Trail Non-Katy Trail Non-Katy Trail Pharmacy Pharmacy Prescriber Prescriber Prescriber Prescriber Generic No Charge No Charge \$5 Copay \$10 Copay \$20 Copay \$50 Copay Preferred Brand No Charge \$40 Copay No Charge \$20 Copay \$45 Copay \$113 Copay Non-Preferred Brand No Charge No Charge \$50 Copay \$100 Copay \$80 Copay \$200 Copay

20% Coinsurance

30% Coinsurance

All specialty prescriptions must be filled at Katy Trail pharmacies, unless the medication is not available

up to \$500

up to \$500

Not Covered

Not Covered

20% Coinsurance

30% Coinsurance

up to \$500

up to \$500

Not Covered

Not Covered

Not Covered

Not Covered

No Charge

No Charge

Preferred Specialty

Non-Preferred

Specialty Drugs

Drugs

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

^{*} Coinsurance after deductible ** Covered as in-network in true-emergency

