



Green Imaging Direct is a full-service direct care radiology network. Our mission is to provide high quality of service at a fair price.

We work with patients to schedule their appointments at our partner facilities. Exams are performed at the location that's best for the patient and we make sure the doctor gets all the information needed to continue care.



Going Green Imaging Direct

Your easy access to our direct radiologist care.



- Exam Order** After you have acquired a signed order from your referring doctor, contact Green Imaging Direct to find the best imaging center for your exam:
 - Call our schedulers at (855) 447-3362
 - Email verify@greenimaging.net
- Verification** Green Imaging Direct scheduling advocates verify your benefits. Green Imaging Direct forwards a confirmation of your benefits and your contact information to the appropriate facility.
- Appointment** The imaging facility contacts you to coordinate an appointment.
- Payment** Green Imaging invoices your employer directly for the exam. You will not be billed separately unless you have a patient payment responsibility.
- Report** Exams are read by the radiologists at the facility, and reports are delivered directly to your referring physician. The medical process remains the same.

**WISCONSIN
ILLINOIS**

SENIOR HOUSING INC.

2020 BENEFITS OPEN ENROLLMENT

IMPORTANT CONTACT INFORMATION

maestro health™
800-228-1803
Coverage Verification, ID Cards, Patient Advocacy, Precertification

E H I M
Pharmacy
800-311-3446

Lincoln
Financial Group®
Dental & Life
877-275-5462 www.lfg.com

eyemed
Vision
866-723-0514
eyemedvisioncare.com

ROCKY MOUNTAIN
reserve
Flexible Spending Accounts
888-722-1223
rockymountainreserve.com

PBG
PRECISE BENEFITS GROUP
877-424-2366, ext. 718
wish@precisebenefits.com

The annual open enrollment period is here! We have been working hard to provide you and your family with the most comprehensive benefits package. Open Enrollment is the one time during the year you can make changes to your benefit elections unless you experience a Qualifying Event (see page 2 for details).

What's changing for 2020?

All changes are effective January 1, 2020

MEDICAL

- Maestro Health:** We changed plan administrators from Simplan to Maestro. The plan will stay exactly the same, but we're confident Maestro will administer the plan more efficiently for you.
- Green Imaging Direct** is a lower cost solution for MRIs, PET scans, CT Scans. When you schedule your imaging through Green Imaging Direct, your copay is only \$50, instead of \$300. See back of this guide for more information.

- Passive enrollment:** this year you only need to complete an enrollment form if you're making any changes or enrolling in Flexible Spending.

DENTAL & VISION

- NO CHANGES!

FLEXIBLE SPENDING

- Medical maximum has increased to \$2,750 from \$2,700
- FSA Elections must be made every year!**

401K

- The maximum limit of contributions has increased to \$19,500 from \$19,000. To enroll or change contributions, visit www.401k.com



Key Medical Plan Terms

Deductible: The amount of expenses which must be paid before insurance pays qualified expenses. Applies to each covered person each calendar year.

Maximum Family Deductible: The total deductible applied to all covered persons in one family in a calendar year, regardless of family size.

Copay: a fixed amount you are required to pay for each outpatient visit or drug prescription.

Coinsurance: Your share of the costs of a covered health care service after the deductible is met. This is typically calculated as a percentage.

Out-Of-Pocket Maximum: The highest amount you will pay (deductibles, Copays and co-insurance) before the insurance company pays 100% of covered expenses for the remainder of the calendar year, unless specifically indicated.

Explanation of Benefits (EOB): Written explanation regarding a claim, showing what the plan pays and what the patient must pay

Coordination of Benefits (COB) Form: Form which must be completed each year to verify whether or not you are covered under another plan. Failure to complete this form will delay benefit claim processing.

If you do not complete an enrollment form by December 6th, 2019, your 2019 coverage will remain the same in 2020!

MEDICAL PLAN—Vault

Type of Service	Vault \$5000/\$35/\$70
Annual Deductible	\$5000 Individual \$10,000 Family
Annual Out of Pocket Max	\$7,150 individual \$14,300 Family
Coinsurance	100%
Lifetime Maximum	Unlimited
Preventive Care	100% covered
Office Visits (Primary/ Specialty Care)	\$35 Primary Care \$70 Specialist
1-800MD Tele- Doc*	\$0 copay
Lab/X-ray	100% after deductible
Diagnostic-MRI/CT/PET	\$300 copay
Emergency Room	\$500 copay
Urgent Care	\$75 copay
Inpatient Hospital Services	100% after deductible
Prescription Drugs - Retail	\$0/\$50/\$75/25%-\$250 max

*See 1800MD flyer for more information.

Employee Monthly Contribution

*See enrollment form for rates

FLEXIBLE SPENDING ACCOUNTS (FSA)

Flexible Spending Accounts (FSAs) allow you to set aside pretax income to use for qualified medical expenses each plan year. The types of expenses that are eligible for reimbursement from an FSA are Medical, Dental, Vision and Dependent day care. Administered by Rocky Mountain Reserve.

DENTAL PLAN—Lincoln Financial

Type of Service	PPO Benefits
Annual Benefit Maximum	\$5,000 per person
Annual Deductible	\$50 individual
Preventive Services (Cleanings, x-rays, etc.)	100% Covered
Basic Services* (Extractions, Fillings, etc.)	80% Covered
Major Services* (Root Canals, Crowns, etc.)	50% Covered
Orthodontia for Children *	50% Covered
Orthodontia Lifetime Max	\$1500

*subject to 12 month wait unless proof of prior creditable coverage

Employee Monthly Contribution

Coverage Level	Full Time	Part Time
Employee Only	\$27.14	\$39.14
Employee + Spouse	\$63.23	\$75.23
Employee + Child(ren)	\$71.08	\$95.08
Employee + Family	\$107.55	\$131.55

LIFE/AD&D — Lincoln Financial

Employer Paid

Employer provides \$50,000 Life & AD&D per eligible employee after 1 year of service.

Voluntary Life/AD&D

	Guarantee	Max Amount
EE	\$150,000	Increments of \$10k up to the lesser of 5x annual salary or \$500k
Spouse	\$25,000	Increments of \$5k up to \$100k but not to exceed 50% of employee's amount
Child	\$10,000	Flat amounts \$1k - \$10k not to exceed spouse amount

VISION PLAN—EyeMed

Type of Service	In-Network Benefits
Exam Copayment	\$10
Exam Frequency	Every 12 months
Frames	\$130 allowance Every 24 months 20% off retail over \$130
Lenses	\$25 copay Every 24 months
Contacts Frequency (Contacts are in place of lenses & frames)	\$130 allowance Every 12 months 15% off retail over \$130

Voluntary Insurance—Colonial Life



Colonial Life offers voluntary, employee-paid Hospital Confinement, Specified Disease, Accident and Short Term Disability insurance. These plans are customized to each employee's personal needs. To enroll, please see your HR manager for more information.

ELIGIBILITY

Who is Eligible and When?

Employees must work a minimum of 30 hours per week in order to be considered Full-time and eligible for many of these benefits. Coverage becomes available to new Full-time employees the first day of the month following 60 days of employment.

Eligible dependents: Your legal spouse, common law spouse, domestic partner and dependent children to age 26.

Open Enrollment

Open enrollment takes place in November with all enrollments and changes effective January 1.

Qualifying Events

With the exception of qualifying events, open enrollment is the only time benefit changes may be made. Some examples of qualifying events include the following family status changes:

- Marriage, divorce or death of a spouse or domestic partner
- Birth or adoption
- Involuntary loss of prior coverage
- Expiration of coverage under COBRA