



## TOWN OF PLAISTOW

*Providing employee benefits to New Hampshire public sector employees, retirees and their families for almost 40 years!*



*Benefits You Can Trust*



*This presentation contains summary information as of October 2023  
for Open Enrollment Plan Year - January Calendar Year 2024*

# WHY HEALTHTRUST?

## Who is HealthTrust?

A nonprofit, public risk pool dedicated to serving our Members – New Hampshire's schools, towns, cities, counties and other quasi-public entities.

- *Exceptional service with a personal touch*
- *More than 70,000 NH public sector workers and their family members choose HealthTrust for their coverage*

## Our focus is YOU!

- Quality, cost-effective, comprehensive benefit plans
- Innovative programs
- Enrollee Services Center
- Slice of Life Wellness Program
- Well-Being Programs
- Secure Enrollee Portal - [www.healthtrustnh.org](http://www.healthtrustnh.org)
- Transition Care & Survivor Care
- Vision and Hearing Discount Programs







# Engage! Get the Most from Your Benefits

## Secure Enrollee Portal (SEP) and easy to use HealthTrust Mobile

- Easy sign-on to eight vendor partner websites
- Secure Message Center
- Digital ID cards
- Access to your Coverage Documents
- Find a network provider or pharmacy
- Easy to use on a computer, tablet or smartphone!
- Available for you, your covered spouse and covered dependents age 18 or older, log in today!

Access additional resources using these apps with just a few taps on your mobile device.\*

LiveHealth Online, Benefit Advantage, CVS Caremark, Virgin Pulse, Guidance NOW

Access to vendor partner mobile apps

**Easy sign-on to these sites!**

- Anthem** MEDICAL COVERAGE
- HealthTrust Benefit Advantage** FSA & HRA PROGRAMS
- CVS caremark** PRESCRIPTION DRUG COVERAGE
- DELTA DENTAL** DENTAL COVERAGE
- Included HEALTH** SECOND OPINIONS FROM WORLD-CLASS EXPERTS
- LifeResources** EMPLOYEE ASSISTANCE PROGRAM SUPPORT FOR EVERYDAY AND LIFE-IMPACTING ISSUES
- Slice of Life WELLNESS PROGRAM** INCENTIVES FOR COMPLETING HEALTHY LIFESTYLE ACTIVITIES
- SmartShopper** REWARDS FOR COST-EFFECTIVE HEALTHCARE DECISIONS

# HealthTrust

## Well-Being Programs

*Our Well-Being Programs provide the resources you and your covered family members need to achieve optimum health.*

### Slice of Life WELLNESS PROGRAM

Powered by:  pulse

*Live Healthy,  
Earn Rewards*

Earn Pulse Cash

Health Coaching

Health Check Survey


Social Platform

Track Healthy  
Habits

### Medical Care Access

*Access Care When and  
Where You Need It*

LiveHealth<sup>®</sup>  
ONLINE

Anthem<sup>®</sup>   
24/7 NurseLine

 convenientMD  
URGENT CARE

SmartShopper<sup>®</sup>  
*Earn Rewards by Making  
Cost-Effective Health Care  
Decisions*

### Expert Medical Support

*Take Charge  
of Your Health*

 Included  
HEALTH

*Get a Second Opinion from a  
World-Class Expert*

CORIGEN<sup>™</sup>  
Medication Safety Program  
*Discover, through DNA  
Testing, if the Medications  
You Take Now – or in the  
Future – are Right for You*

### Disease Management

*Get Help Managing a  
Chronic Condition or Disease*

 CVS caremark<sup>®</sup>  
Transform Diabetes Care

Accordant<sup>®</sup>  
 CVS specialty nurse care management

 lark  
Diabetes Prevention Program


 AWARE  
RECOVERY CARE

Anthem<sup>®</sup>   
Health Management Programs

### Mental Health

*Find Support for Everyday  
and Life-Impacting Issues*

LifeResources<sup>®</sup>  
EMPLOYEE ASSISTANCE PROGRAM  
Powered by: COMPSYCH<sup>®</sup>

 KOA  
Foundations  
Mobile App  
*Computerized Cognitive  
Behavioral Therapy (CCBT)*

LiveHealth<sup>®</sup>  
ONLINE  
(Psychology and Psychiatry)

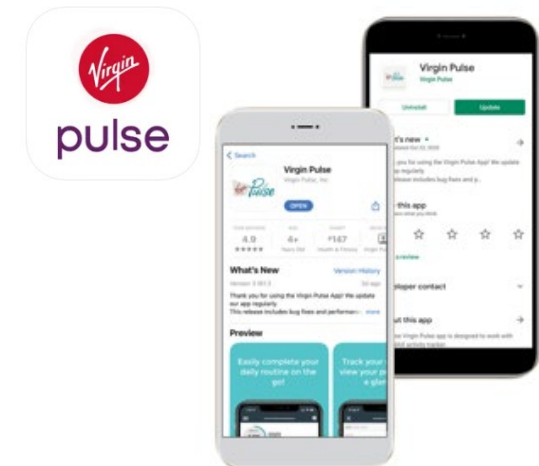
 Aspire365  
LIVE WORK THRIVE WHILE RECOVERING

HealthTrust Secure Enrollee Portal – Covered Individuals' Gateway to Well-Being Programs

# LET'S DO THIS TOGETHER!

*Ready for some fun!*

- **Who is Eligible:** HealthTrust Medical Enrollees, covered spouses and Retirees are eligible to participate and earn up to **\$475** in Pulse Cash each year.
- **To Register:** Log in or create your HealthTrust Secure Enrollee Portal account at [www.healthtrustnh.org](http://www.healthtrustnh.org) and click on Slice of Life tile or download the Virgin Pulse app.
- **Rewards your way!** You decide when and what to redeem Pulse Cash for including gift cards, a health and wellness item from the Virgin Pulse store or donate to charity.



# HEALTHY ACTIONS = REWARDS!

Effective January 2024



## How to earn rewards:

It's simple! Do healthy things, earn points and get rewards! The points you earn will accumulate each quarter. As you reach a new level, your rewards grow!

## Quarterly Earning Opportunities

	Points	Pulse Cash
LEVEL 1	3,000	\$10
LEVEL 2	8,000	\$20
LEVEL 3	15,000	\$35
LEVEL 4	24,000	\$45
Maximum rewards per quarter		\$110

## 2024 Annual Key Action Rewards: \$35

- Complete the Health Check for \$10 Pulse Cash & 500 Points
- Complete three Health Coaching Sessions to earn \$25 Pulse Cash
- Complete a Biometric Screening and earn 1,000 points



## Essential Services ALL HealthTrust Medical Plans Cover



### *Comprehensive Medical Coverage:*

- Preventive Services (including, Routine Eye Exams)
- Physician Office Visits and Consultations
- Medical and Surgical Care
- Inpatient Hospital Care
- Durable Medical Equipment (DME)
- Prescription Medications
- Behavioral Health and Substance Use Care
- Emergency or Urgent Care
- Worldwide Coverage for Unforeseen or Emergency Care



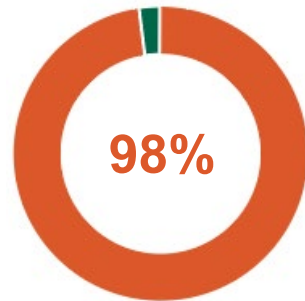
# ACCESS BLUE HMO AND SITE OF SERVICE PLANS

- **Network includes all six New England States**
- **Choose a PCP** from any New England State
- **No PCP referral needed in Network**
- **PCP referral needed** to see **Out-of-Network** specialists

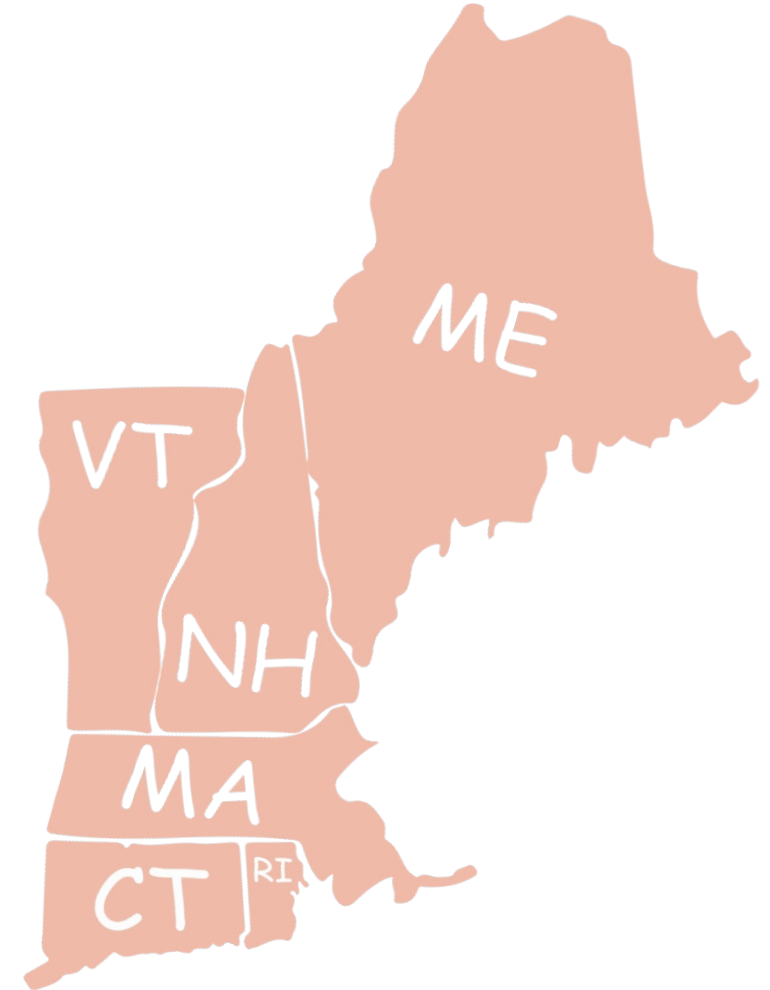
## *New Hampshire Statistics:*



PCPs and  
Hospitals in  
Network



Specialists in  
Network





# LUMENOS PLAN

- High Deductible Health Plan (HDHP) that qualifies to be used in conjunction with a Health Savings Account (HSA) or Health Reimbursement Arrangement (HRA).
- All covered medical and prescription expenses, except in-network preventive care services, are subject to the deductible.
- Nationwide Network, no referrals required.

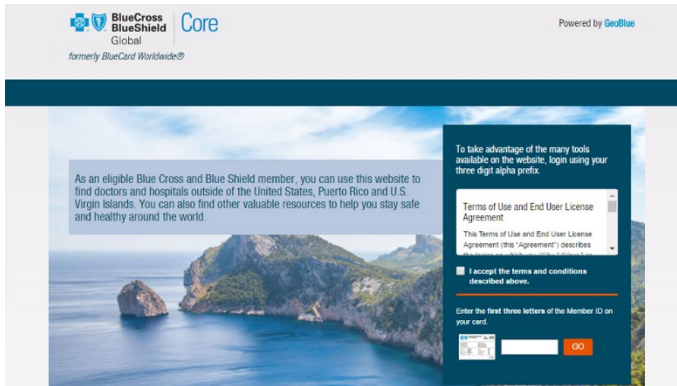


# COVERAGE ANYWHERE ANYTIME

## Worldwide Coverage

*You have convenient access to your medical benefits and coverage all around the world!*

[www.bcbsglobalcore.com](http://www.bcbsglobalcore.com)  
800.810.2583



BCBS Global Core



## Away From Home Care Program (HMO & SOS Plans)

- This program offers Enrollees and their covered family members to have a Guest Membership in **select states** when residing outside the network service area for 90 consecutive days or more.
- For availability, information on how to enroll and the states that participate, contact Anthem using the phone number on your ID card.

*A Guest Membership is designed to address your healthcare needs if you have one of the following situations:*

- **Students** – Typically used for students requiring ongoing medical care while they are away at school.
- **Families Apart** – Available to qualified spouses and dependents residing in different HMO service areas.
- **Long Term Travelers** – Available to qualified Enrollees, spouses and dependents who are temporarily away from their home HMO service area.

# MEDICAL BENEFIT OPTIONS

## January Plan Year (1/1 through 12/31)

Medical Plan Type	Access Blue New England HMO	Medical Plan Type	High Deductible Health Plan (HSA Qualified)
Plan Name	AB20	Plan Name	LUMENOS2500
Visit Copay	\$20	Standard Deductible	\$2,500 per person / \$5,000 per 2-person or family (1)
Specialty Visit Copay	\$20	Standard Coinsurance	0% (In-Network); 30% (Out-of-Network)
Walk-In Center Copay	\$20	Coinsurance Maximum	N/A (In-Network); \$2,500 / \$5,000 (Out-of-Network) (1)
Urgent Care Copay	\$50	Chiropractic Visits	Unlimited / Standard Deductible and/or Coinsurance
ER Copay	\$100	Therapy Visits (PT/OT/ST)	60 Visits / Standard Deductible and/or Coinsurance
Standard Deductible (per person/per family)	\$0	Acupuncture Visits	Unlimited / Standard Deductible and/or Coinsurance
Chiropractic Visits/Copay	Unlimited / \$20	Durable Medical Equipment	Standard Deductible and/or Coinsurance
Therapy Visits (PT/OT/ST)/Copay	60 / \$20	Prescription Drugs	Standard Deductible and/or Coinsurance
Acupuncture Visits/Copay	Unlimited / \$20	Maximum Out-of-Pocket (per person/per family; medical and RX expenses combined)	\$2,500 / \$5,000 (In-Network); \$5,000 / \$10,000 (Out-of-Network) (1)
Durable Medical Equipment	You pay 20%	(1) For LUMENOS2500: If you are enrolled at the 2-person or family level, eligible expenses incurred by you or any of your enrolled family members count toward satisfying the entire 2-person/family deductible and/or coinsurance.	
MRI, CT scan, PET, MRA	You pay \$0		
X-Rays and Ultrasounds	You pay \$0		
Labs (including allergy testing)	You pay \$0		
Maximum Out-of-Pocket (per person/per family; medical and RX expenses combined)	\$3,000 / \$6,000		



# HOW TO FIND AN ANTHEM NETWORK PROVIDER

**Log in to your Secure Enrollee Portal (SEP) account at [www.healthtrustnh.org](http://www.healthtrustnh.org) and click on the Anthem button.**

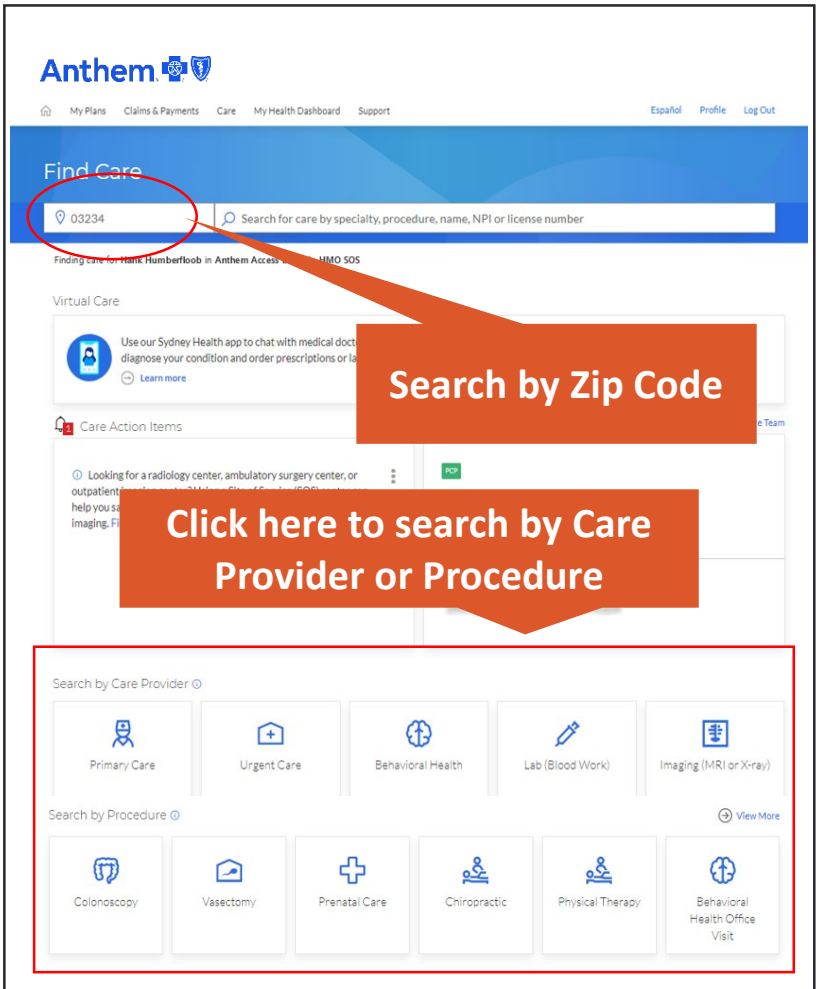
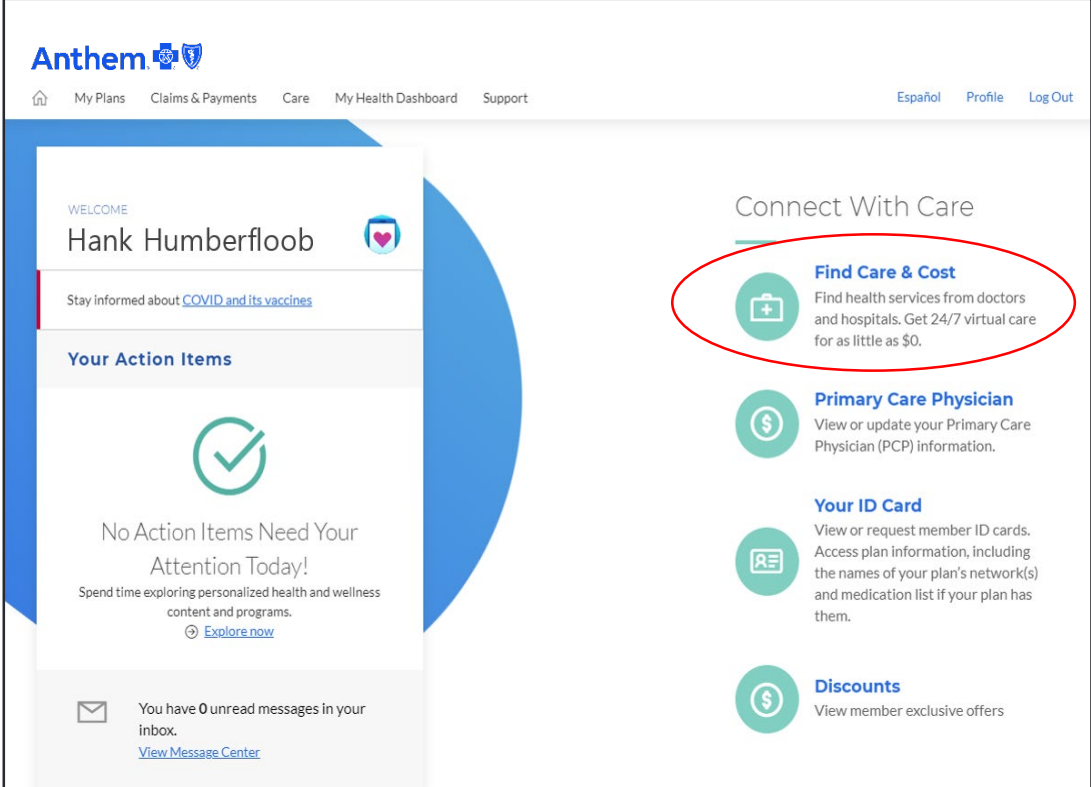
**Start here!**

**SECURE LOGIN**  
Access the SEP, SMP, and WCP

↓

**Anthem**

→

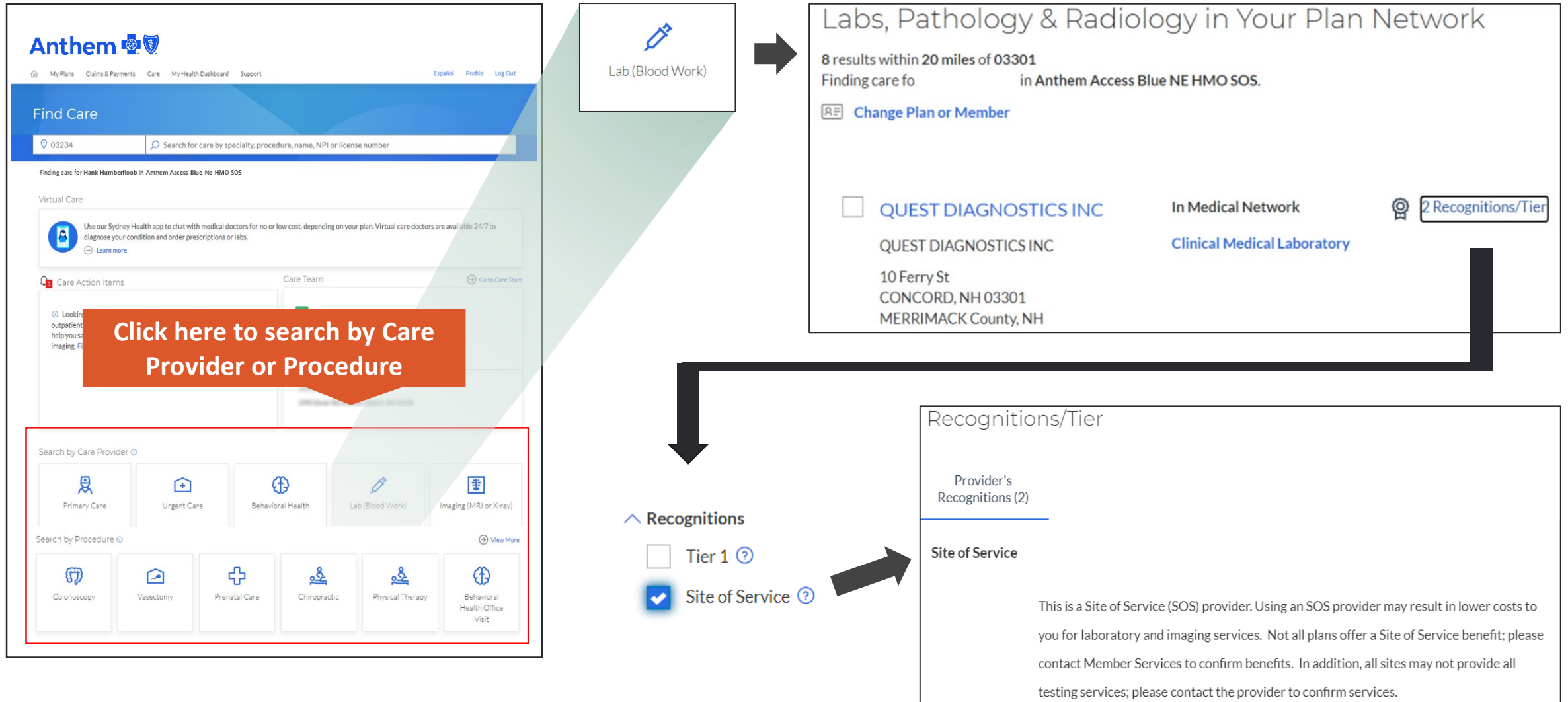


**Search by Zip Code**

**Click here to search by Care Provider or Procedure**

***Please always contact the provider directly to confirm the services available are Site of Service (SOS) for the location.***

# HOW TO FIND AN ANTHEM NETWORK PROVIDER



# PRESCRIPTION BENEFIT OPTION



Prescription Plan	Your Cost Per RX
RX10/20/45	Retail / Maintenance Choice Copays: \$10 generics \$20 preferred brands \$45 non-preferred brands <b><i>\$0 for Certain Preventive Medications and Contraceptives</i></b>

**Retail Pharmacy: Up to a 34-day supply - Choose from over 68,000 network pharmacies nationwide!**

Short-term medication needs (i.e. antibiotics, pain relief, creams, etc.)

**Maintenance Choice (Mail Service or CVS Retail Pharmacy): ONE Copay for Up to a 90-day supply**

Long-term medications\* taken regularly for chronic conditions (i.e. high blood pressure, asthma, diabetes, high cholesterol, etc.)



**CVS Caremark Mail Service Pharmacy®** – Enjoy convenient delivery to the location of your choice.



**CVS Pharmacy®** – Pick up your medication at a time that is convenient for you whether here in New Hampshire or nationwide (including Target locations).

***\*Please note: You may fill your long-term medications (one initial plus two refills) at any network retail pharmacy for up to a 34-day supply, then you will need to use mail service or a CVS Pharmacy for additional supplies.***



# PRESCRIPTION BENEFITS



## Covered Medications

- Your coverage is based on a list of covered medications known as a formulary.
- A prescription drug formulary is a list of preferred drugs established to encourage the use of safe, effective generic and brand-name medications while helping to control prescription drug costs.
- Certain prescription drugs, such as those that have a direct generic or brand-name therapeutic equivalent medication available, may be excluded from coverage.
- The formulary list will be reviewed quarterly and is amended from time to time.

## How It Works?

- Providers will have electronic access to the formulary at the point of prescribing and will be able to prescribe covered medications based on this information.
- If there are documented medical reasons why you must take a medication that is not on the formulary, your provider can request a coverage review by calling **855.240.0536**.
- Log in to your Secure Enrollee Portal (SEP) at [www.healthtrustnh.org](http://www.healthtrustnh.org) to access the most up-to-date coverage and formulary information.



# PRESCRIPTION BENEFITS



## Specialty Medications:

- Specialty medications are used for the treatment of complex conditions, such as cancer, multiple sclerosis, rheumatoid arthritis, and are often injected or infused.
- Exclusively filled by CVS Specialty Pharmacy® with 24/7 access to specifically trained pharmacists and nurses to help manage complex conditions and treatment.
- You can have your specialty medications available for pickup at any CVS Pharmacy retail location, or you can have your medications delivered to your home or location of your choice.
- To get started, call a CVS Specialty representative at **800.237.2767** or register online at **[CVSSpecialty.com](https://www.CVSSpecialty.com)**.

## Prior Authorization:

- Prescriptions for certain medications require a prior authorization – also known as a coverage review – to ensure the medication is cost-effective and clinically appropriate.
- Required prior authorizations are subject to change from time to time.
- Your doctor will contact CVS Caremark directly for you to initiate the Prior Authorization process.

## Preventive Vaccines:

- Certain vaccines (i.e., flu, shingles, pneumonia) may be obtained at any network retail pharmacy location – choose from over 68,000 locations!
- Show your prescription ID card to receive the vaccine, at no cost.

# PRESCRIPTION COVERAGE: HIGH DEDUCTIBLE HEALTH PLANS (LUMENOS)



- Your medical and prescription expenses are both subject to your Standard Deductible and/or Coinsurance each plan year
  - You will pay \$0 for certain preventive medications, vaccines and contraceptives
- You may need to pay up front for your prescriptions
  - Especially at the start of your plan year
- You may be subject to certain requirements. Before leaving your doctor's office, ask if your medications are subject to:
  - Formulary Exclusions
  - Prior Authorization
  - Quantity Limits
  - Step Therapy
- **Questions?** Call Pharmacy Member Services at **833.267.2133.**



# PRESCRIPTION COVERAGE: HIGH DEDUCTIBLE HEALTH PLANS (LUMENOS)



- **Short-Term Medications**
  - Simply present your Anthem medical ID card at a network pharmacy
- **Long-Term Medications:**
  - You have the choice to fill up to 90-day supplies through the mail service or at a network retail pharmacy.
- **Specialty Medications:**
  - Exclusively filled by specialty pharmacy
  - Questions or to get started – call **833.255.0645**.

# DENTAL BENEFIT OPTION

## January Plan Year (1/1 through 12/31)

	Dental Plan Option
<b>Plan Coverage:</b>	<b>1S</b>
<b>Coverage A - Diagnostic &amp; Preventive:</b> Evaluations (twice in a calendar year); Cleanings (four per calendar year); X-rays (complete series or panoramic film once in a five-year period, Bitewing x-rays once in a calendar year); Fluoride (twice in a calendar year through age 18); Space Maintainers (through age 15); Sealants (once in a three-year period, per tooth, for children through age 18)	100%
<b>Coverage B - Basic Care:</b> Amalgam (silver) and/or Composite (white) fillings; Surgical and routine extractions; Root canal therapy; Periodontal treatment; Denture repair; Emergency Treatment	80%
<b>Coverage C - Major Care:</b> Removable and fixed partial dentures (bridges); Crowns; Dentures; Onlays; Implants	50%
<b>Coverage D - Orthodontics:</b> Correction of crooked teeth for dependent children up to the age of 19	50%
<b>Coverage D - Orthodontics:</b> Correction of crooked teeth for Adults age 19 and over	N/A
<b>Orthodontic Lifetime Maximum:</b> (Per Person/Per Lifetime; separate from Plan Year Maximum)	\$1,000
<b>Deductible (Coverage B and C Only):</b> (Per Person/Per Family Per Plan Year)	\$0
<b>Plan Year Maximum:</b> Per Person/Per Plan Year	\$2,000



*Disclaimer: This chart is intended for summary purposes only. Details of coverage are set forth in separate documents, which govern these plans.*

# STRETCH YOUR DOLLARS

## Go Green!



- You will get the best dollar value from your dental benefits when you choose one of **Delta Dental's PPO** dentists.
- You will also enjoy savings by using the expansive **Delta Dental Premier** Network.
- Since nearly 3 out of 4 dentists participate in one or both, you will have:
  - ✓ No Balance Billing
  - ✓ Less Paperwork
  - ✓ Direct Payment
- Log in to your SEP account at [www.healthtrustnh.org](http://www.healthtrustnh.org) to find participating dentists.

# BENEFIT ADVANTAGE – FSA

- Flexible Spending Accounts (FSAs) can help you manage your qualifying health and childcare and/or eldercare expenses while providing tax-saving benefits.
- Contributions are taken pre-tax from your paycheck in equal installments and reimbursements are tax-free (typically a **20-35% savings** for most participants).
- Your **Health FSA** election amount is available on day one! The full amount of your election is available on the first day of the plan year, giving you the peace of mind of knowing you have money available when you need it.
- **Dependent Care Account** funds are only available as they accumulate through payroll deductions.

**Quick access to your  
FSA through the Secure  
Enrollee Portal!**



---

## Town of Plaistow Specifics:

- You can contribute up to \$2,500 to Health FSA\* and \$5,000 to Dependent Care Account in 2024
- 2 ½ month grace period for both
- Funds are deducted from your paycheck in equal installments

*\*Lumenos Enrollees may participate in a Limited Purpose Health FSA for IRS-eligible dental care and vision care expenses only.*



# BENEFIT ADVANTAGE – FSA

## Health FSA:

- You can use your funds for many eligible expenses, such as:
  - Copayments, deductibles and coinsurance
  - Prescriptions
  - Dental and orthodontia services
  - Eyeglasses and contact lenses
  - Over-the-counter medications and supplies
  - And more!

**HealthTrust**  
*Benefit Advantage*



## Dependent Care Account:

- You can use your funds to pay for:
  - Childcare
  - Before-school and after-school programs (kindergarten and grade school expenses are not eligible)
  - Summer day camps
  - Adult daycare
- The care provided must be for a qualifying dependent (such as a child), and the payment made to a qualifying provider (an individual or dependent care center that is in compliance with state and local law).
- The expenses must enable a single parent or both spouses to work, look for work, or to attend school full-time.

# BENEFIT ADVANTAGE – FSA

- **There are two ways you can pay for eligible expenses:**
  - You can use a HealthTrust Benefit Advantage Debit Card.
  - You can pay for services then get reimbursed by submitting a claim reimbursement request either electronically or using a paper form.
- **Benefit Advantage Debit Card:**
  - Allows you to pay at the time of service with automatic debit from your FSA. You will be notified if a copy of the receipt is required for your purchase.
  - Charges made to the debit card are only *conditionally reimbursed* until any required receipts are received and approved by HealthTrust per IRS regulations.
- **Electronic and Paper Claims Requests:**
  - Reimbursements are made payable to you, either by direct deposit or paper check. You can submit claims in a variety of ways:
    - Online - Log in to your SEP account and click on the Benefit Advantage button.
    - Benefit Advantage mobile app.
    - Complete a paper claim form to submit via the secure Message Center in the SEP or send by mail.

## SAVE YOUR RECEIPTS!

You should keep all receipts for purchases associated with your FSA expenses. HealthTrust may request copies of your documentation to verify a debit card purchase.

### 5 Things Every Receipt Needs to Have

All receipts submitted to HealthTrust should include the following IRS-required Information:

1. Name and address of service provider.
2. Date service and expense were incurred.
3. Name of person receiving the service.
4. Detailed description of service provided.
5. Amount charged for service.



**Download the Mobile App!**



Already have the app?  
You can access it through **HT Mobile!**

**HealthTrust**  
*Benefit Advantage*

# YOUR 8-STEP ACTION PLAN!

1. **Connect! Create your HealthTrust Secure Enrollee Portal (SEP) Account today!** You can access all your benefit information (including digital ID cards!) and Well-Being programs in the SEP.
2. **Save this number – 800.527.5001** – The HealthTrust team is here to help! Or contact us by sending a secure message in the SEP.
3. **Get Checked – It's important!** Preventive care services, such as screenings, routine check-ups, vaccines, eye exams, are covered in full when you see network providers – and these services keep you healthy!
4. **Know Your Options.** You are covered for unforeseen, urgent and emergency care no matter where you are.
5. **See a Doctor without Leaving Home – for medical and behavioral health care.** Through **LiveHealth Online\***, you can consult a board certified medical doctor, therapist or psychiatrist from the privacy and comfort of home.
6. **Engage in your wellness!** Participate in Slice of Life and Well-Being programs for tools and resources to help you achieve optimum health.
7. **Get Support with your LifeResources Employee Assistance Program** – available 24/7 By calling this number 800.759.8122.
8. **Learn and Earn with SmartShopper\***. If your doctor recommends a screening test, surgery or other medical service, use SmartShopper to view your provider options and earn a reward if you choose a cost-effective facility.

*\*Individuals covered by a Medcomp Three Plan are not eligible to participate in these programs.*



# WE ARE HERE FOR YOU!



Call 800.527.5001



Send a message directly from the Secure Enrollee Portal ➡



or by email [enrolleeservices@healthtrustnh.org](mailto:enrolleeservices@healthtrustnh.org)

ID CARDS/FORMS

MESSAGE CENTER

ENROLLMENT/MEMBERSHIP INFO

SLICE OF LIFE WELLNESS PROGRAMS

SMARTSHOPPER

WATCH-READ-LEARN

## Thank you!