

YOU **LOVE** WHAT YOU DO
NOW, **TAKE CARE**
OF YOU

Minimum Essential Coverage Plans



Pam Compagnola, RN
BAYADA Nurse since 2004

Employee Benefits

BAYADA Home Health Care values the contributions of our employees. In appreciation of your dedicated service, BAYADA Home Health Care offers a Minimum Coverage Plan. In addition to the Minimum Coverage Plan, employees can elect to purchase an Enhanced Minimum Coverage Plan.

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For questions about enrollment and eligibility, please call the Benefits office at **877-291-3000** or email benefits@bayada.com.

For questions about a claim, please call Nationwide at **855-495-1190**.

About Your Coverage Choices

Minimum Coverage Plan

- Provides 100% coverage of the preventive and wellness benefits listed by the Centers for Medicare and Medicaid Services
- Provides access to a national PPO Network, First Health
- Offers access to a discount pharmaceutical program
- Includes telephonic and online physician consultations

Enhanced Minimum Coverage Plan

- Provides 100% coverage of the preventive and wellness benefits listed by the Centers for Medicare and Medicaid Services
- Provides a specific dollar amount for basic health care needs, including doctor office visits, diagnostic tests, surgical procedures, hospital stays, etc.
- Includes key features such as, no deductibles, pre-existing condition limitations, waiting periods, and is guarantee issue
- Provides access to a national PPO Network, First Health
- Offers access to a discount pharmaceutical program
- Includes telephonic and online physician consultations

New This Year

Employee Assistance Program (EAP): Aetna Resources for Living

We appreciate the work you do every day and we want to provide you with the resources to live your best life. Aetna Resources for Living delivers a better way to help you and your loved ones meet your daily life challenges. This EAP is fully integrated with Aetna medical and behavioral health benefits. Designed to assist employees in resolving a wide range of issues to promote overall wellness, the Employee Assistance Program administered by Aetna includes:

- Up to 6 sessions per topic per year
- Legal (30-minute consultation per topic / 60-minute ID Theft Consultation for victims of ID theft)
- Financial (30-minute telephonic consultation per topic)
- Telephonic WorkLife Services (consultation and referrals for child care, elder care, caregiver support, school and college planning, and convenience services)
- Online WorkLife Services (articles, provider searches, orientation videos, myStrength, legal/financial tools, free will, webinars, discount center, etc.)

Minimum Coverage Plan

The Minimum Coverage Plan provides 100% coverage when using a First Health Network provider and 0% coverage when using an out-of-network provider.

This plan also includes the AWP Value Rx, First Health Network, and Teladoc. Additional information is on page 5.

Minimum Coverage Plan	
Plan Pays 100% of the ACA-required preventive services, when using a First Health Network provider	Covered services for adults and children
FIRST HEALTH NETWORK	Physician and hospital
AWP VALUE RX	\$10, \$20, \$50 tier
TELADOC	No-cost access to physicians by phone or online (registration required prior to use)
Weekly Rates	
Employee	\$5.19
Employee + spouse	\$8.42
Employee + child(ren)	\$8.20
Family	\$12.01

Below is a partial list of services covered by the Minimum Coverage plan. You can view a full list of covered services online at www.healthcare.gov/preventive-care-benefits. A copy of the plan's Summary of Benefits and Coverage (SBC) is available online at www.bayada.com/benefits. The SBC is an easy-to-understand summary of your health care plan's benefits and coverage. The coverage examples provided in the SBC give a general sense of how a plan would cover services.

Covered Services Adults

- Blood pressure screening for all adults
- Cholesterol screening for adults of certain ages or at higher risk
- Type 2 diabetes screening for adults with high blood pressure
- Colorectal cancer screening for adults over 50
- Aspirin use for men and women of certain ages
- Tobacco use screening for all adults and cessation interventions for tobacco users
- Obesity screening and counseling for all adults
- Diet counseling for adults at higher risk for chronic disease
- Depression screening for adults
- Alcohol misuse screening and counseling
- Immunization vaccines for adults - doses, recommended ages, and recommended populations vary: Hepatitis, Hepatitis B, Herpes, Herpes Zoster, Human Papillomavirus, Influenza (flu shot), Measles, Mumps, Rubella, Meningococcal, Pneumococcal, Tetanus, Diphtheria, Pertussis, Varicella
- Breast cancer mammography screenings every 1 to 2 years for women over 40
- Well-woman visits to obtain recommended preventive services
- Contraception coverage for women: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, not including abortifacient drugs

Covered Services Children

- Autism screening for children at 18 and 24 months
- Behavioral assessments for children of all ages, from birth through 17 years
- Depression screening for adolescents
- Immunization vaccines for children from birth to age 18 - doses, recommended ages, and recommended populations vary: Diphtheria, Tetanus, Pertussis, Haemophilus influenzae type b, Hepatitis A, Hepatitis B, Human Papillomavirus, Inactivated Poliovirus, Influenza (flu shot), Measles, Mumps, Rubella, Meningococcal, Pneumococcal, Rotavirus, Varicella
- Obesity screening and counseling
- Vision screening for all children
- Iron supplements for children ages 6 to 12 months at risk for anemia
- Medical history for all children throughout development, from birth through 17 years
- Oral health risk assessment for young children, from birth through 10 years
- Developmental screening for children under age 3, and surveillance throughout childhood
- Height, weight and body mass index measurements for children, from birth through 17 years
- Fluoride chemoprevention supplements for children without fluoride in their water source
- Hearing screening for all newborns
- Hematocrit or Hemoglobin screening for children

Enhanced Minimum Coverage Plan

The Enhanced Minimum Coverage Plan provides specific dollar amounts for covered events. The plan includes the same benefits as the Minimum Coverage Plan (details on page 2) as well as additional benefits for basic health care services, including doctor office visits, diagnostic tests, and hospital stays. This plan also includes the AWP Value Rx, First Health Network, and Teladoc. Additional information is on page 5.

Enhanced Minimum Coverage Plan	
MINIMUM COVERAGE PLAN	Plan Pays 100% of the ACA-required preventive services, when using a First Health Network provider
PHYSICIAN'S OFFICE	Plan pays \$75 per day, 6 days per person, per year
TELADOC	No-cost access to physicians by phone or online (registration required prior to use)
OUTPATIENT DIAGNOSTIC LAB	Plan pays \$75 per testing day, 3 days per person, per year
OUTPATIENT DIAGNOSTIC X-RAY	Plan pays \$75 per testing day, 3 days per person, per year
EMERGENCY ROOM SICKNESS	Plan pays \$75 per day, 4 days per person, per year
SURGICAL <ul style="list-style-type: none"> • Daily inpatient • Daily inpatient maximum • Daily outpatient • Daily outpatient minor • Outpatient benefit maximum 	<ul style="list-style-type: none"> • Plan pays \$500 per day • 1 day per person per year • Plan pays \$250 per day • Plan pays \$50 per day • 1 day per person per year
ANESTHESIA	Plan pays 30% of surgical cost
DAILY INPATIENT HOSPITAL INDEMNITY	Plan pays \$100 per day, 500 day lifetime maximum
INTENSIVE CARE UNIT	Plan pays \$200 per day, 30 days per person, per year
SUBSTANCE ABUSE	Plan pays \$50 per day, 30 days per person, per year
MENTAL ILLNESS	Plan pays \$50 per day, 30 days per person, per year
SKILLED NURSING	Plan pays \$50 per day, 60 days per person, per stay
FIRST HEALTH NETWORK	Physician and hospital
AWP VALUE RX	\$10, \$20, \$50 tier
Weekly Rates	
Employee	\$15.29
Employee + spouse	\$33.67
Employee + child(ren)	\$26.38
Family	\$38.43

Additional Medical Plan Features

First Health Network

Members have access to the First Health Network, which provides savings on physician and hospital services. By visiting a First Health provider, you can reduce your out-of-pocket expenses. Members enjoy:

- Access to over 490,000 provider locations across the country
- A simplified claims process; network providers submit claims for you

To locate a provider online, visit www.FirstHealthLBP.com

AWP Value Rx* - Provided by Phoenix Benefits Management

The AWP Value Rx program is designed to provide substantial savings on your prescription drug expenses. This plan will help you identify affordable generic and brand name drugs by therapeutic class. Benefits include:

- Select generic and brand name drugs available for \$10, \$20, \$50, or less
- Discounted generic and brand name drugs
- Access to over 56,000 participating pharmacies nationwide
- No maximum annual benefit, deductibles, or claim forms

To view drug prices or locate a pharmacy, visit www.AWPValueRx.com

*The AWP Value Rx is a non-insurance discount program

Teladoc

Teladoc provides 24/7 on-demand access to a national network of US board-certified doctors through the convenience of phone, video, or mobile app visits. Teladoc doctors can diagnose, treat, and prescribe medication, when necessary, for a variety of issues. It's more convenient access to quality health care, when and where you need it. You can:

- Receive medical care from anywhere without taking time off work
- Enjoy fast treatment; most calls returned in 10 minutes or less
- Save money by avoiding expensive urgent care or ER visits for non-emergency issues

State Requirements

- Arkansas: Initial consultation required to be done via video
- Delaware: Initial consultation required to be done via video
- Idaho: Consultations are only available via video

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TOOLS AND TIPS:

You can visit a First Health or out-of-network provider for service and the Fixed Indemnity Plan will pay the same benefit amount.

NOTES

Closing Disclaimer

This document is intended to merely highlight or summarize certain aspects of the employer's benefit program(s). It is not a Summary Plan Description (SPD) or an official plan document. Your rights and obligations under the program(s) are set forth in the official plan documents. All statements in this summary are subject to the terms of the official plan documents, as interpreted by the appropriate plan fiduciary. In the case of an ambiguity or outright conflict between a provision in this summary and a provision in the plan documents, the terms of the plan documents control. The employer reserves the right to review, change, or terminate the plan, or any benefits under it, for any reason, at any time, and without notice to any person.

Disclosures

Minimum Coverage Plan: This plan is designed to provide plan participants with minimum essential coverage under the federal income tax rules. However, while you are enrolled in this plan, you will not be eligible for a federal tax credit though a federal or state exchange (sometimes referred to as the insurance marketplace). If you do not enroll in this plan, you may be eligible for a federal tax credit that lowers your monthly premium. If you do not enroll, you may receive a reduction in certain cost-sharing if you enroll in a health insurance plan through the federal or state exchange. Please note that this plan is NOT minimum essential coverage for purposes of the individual health coverage requirements in MA.

This program is not intended nor recommended to replace any comprehensive program of insurance in which you currently participate, or intend to participate. This plan is not designed to replace or provide major medical or catastrophic coverage. This brochure is for summary purposes only. The insurance benefits of the fixed indemnity plan are offered by Nationwide Life Insurance Company. Additional information will be provided upon enrollment in the program. Plan exclusions and limitations apply.

New Hampshire and Vermont residents are not eligible for the Enhanced Minimum Coverage Plan offered by BAYADA Home Health Care.

Massachusetts residents are eligible for the Minimum Coverage Plan and Enhanced Minimum Coverage plans, but these plans do NOT meet Minimum Creditable Coverage standards required by the state of Massachusetts.

