

CoOportunity **Premier HSA**

FOR INDIVIDUALS AND FAMILIES

Plan Options: Bronze, Silver, Gold Including Cost Sharing Reduction Plans

Qualified Health Plans for Individuals and Families in Nebraska For coverage beginning on or after January 1, 2014







IN NEBRASKA

New World. A New Kind of Health Insurance Company.

CoOportunity Health is a new kind of health insurance company, a CO-OP — Consumer Operated and Oriented Plan — designed for the new world of health insurance created by the Affordable Care Act. CO-OPs like CoOportunity Health were created to give consumers more choice by adding new competition to the marketplace. What sets us apart from other health insurance companies are some pretty key differences. Take a look.



CoOportunity Premier HSA Plan Features

CoOportunity Premier HSA is a qualified high-deductible health plan that works in combination with a health savings account (HSA) to help you save and pay for your healthcare. CoOportunity Premier HSA is a great fit for individuals and families who are looking for tax savings and a PPO plan design that offers broad provider choice with cost savings for accessing care through in-network providers. CoOportunity Premier HSA features the Midlands Choice Premier provider network, which includes 100 percent of hospitals and 97 percent of practitioners in Nebraska.

How an HSA Works

You open up a fully-portable, tax-advantaged bank account to pay for current or future medical expenses. The yearly contributions cannot exceed the applicable limit set by the Internal Revenue Service (IRS). Federal statutory amounts for 2014 are \$3,300 for single coverage and \$6,550 for family coverage.

You use your HSA contributions to pay for qualified health expenses, giving you greater control over your healthcare dollars. HSA funds can be used for:

- Paying for qualified medical expenses before benefits begin to help satisfy the required deductible
- Pay coinsurance
- Cover other qualified medical expenses that may not be covered under the health plan, but are reimbursable under IRS guidelines
- Save for future medical expenses through investment options offered by the financial institution providing the HSA

Three Advantages of an HSA

There are three reasons why you will love an HSA:

- Contributions are made on a tax-advantaged basis
- Any unused funds carry over from year-to-year and grow tax-deferred
- When used to pay for qualified medical expenses, funds can be withdrawn tax-free

Aggregate Medical Deductible

CoOportunity Health HSA plans use an aggregate medical deductible. This means that if the plan covers more than one family member, benefits will begin for all family members once the family deductible is met.

Out-of-pocket maximum amounts are also aggregate, requiring the family out-of-pocket maximum to be met before all services are covered in full for any single family member.

Opening an HSA

An HSA can be opened when the following criteria are met:

- You are covered by a qualified high-deductible health plan such as CoOportunity Premier HSA
- You are not covered under another medical plan (including spouse's or domestic partner's)
- You are not enrolled in Medicare
- You cannot be claimed as a dependent on someone else's tax return

Three Plan Levels

We offer three levels of health insurance plans that vary according to benefit design features: Bronze, Silver and Gold. The higher the metal level, the more financial protection you will receive. A Bronze plan, for example, has a lower premium and will cover approximately 60 percent of your healthcare costs. On the other hand, a Gold plan will have a higher premium but will cover approximately 80 percent of your healthcare costs.



Understanding Your Provider Network



GO ONLINE TO FIND NETWORK PROVIDERS

It is easy to find a local or national provider.

- Go to coOportunityhealth.com
- Choose *"Help Me Find a Doctor or Hospital"* from the homepage
- Choose CoOportunity Premier as your product; you'll be able to search for providers that participate in Midlands Choice Premier — your network for Nebraska, Iowa and bordering states
- Choose National Providers if you want to search for out-ofarea providers and select PHCS and MultiPlan
- Enter your search information



Importance of Using In-Network Providers

- You'll enjoy greater value when using in-network providers:
- Lower out-of-pocket costs because your coinsurance, deductible and out-of-pocket maximum are less when using in-network providers
- Less paperwork because in-network providers file claims on your behalf and handle all notifications for you
- Savings because in-network providers agree to accept our payment for covered services and cannot balance bill you for the difference between the allowed amount and their charge



Your National Provider Networks

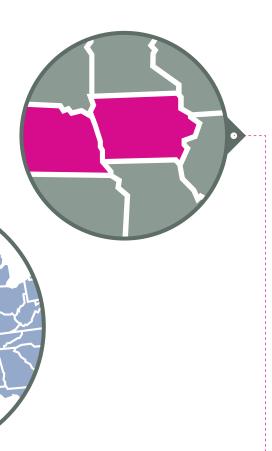
No need to worry about your health when traveling for work or while on vacation. Our seamless solution of national provider networks — the PHCS Network and the MultiPlan network — allow you to receive care from an in-network provider and receive all of the network savings.

PHCS Network

- Largest independent primary PPO network in the country with providers in all 50 states
- Includes more than 4,200 hospitals, 68,000 ancillary care facilities and 590,000 healthcare professionals

MultiPlan Network

- Nationwide network that complements the PHCS Network by giving access to an additional choice of providers at discounted rates
- Includes more than 4,600 hospitals, 93,000 ancillary care facilities and 620,000 providers



Your Local Provider Network

CoOportunity Premier HSA uses the Midlands Choice Premier network. This network includes providers in Nebraska and Iowa as well as bordering states, giving you a broad choice of in-network providers:

- 20,000 physicians and other healthcare professionals
- 320 hospitals
- 1,500 other healthcare facilities
- 100 percent of the hospitals and 97 percent of the clinicians in Nebraska and Iowa

Stay In-Network and Save

Using in-network providers is an easy way to save on your out-of-pocket costs. Look at the cost savings by staying in-network.

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Primary Care Office Visit					
	In-Network	Out-of-Network			
Office Visit Billed Charge	\$125	\$125			
Allowed Amount (amount CoOportunity Health uses to calculate payment)	\$80	\$80			
Your Cost Share After Deductible is Met	\$24 (based on 30% coinsurance off of \$80)	\$40 (based on 50% coinsurance off of \$80)			
Amount CoOportunity Health Pays	\$56	\$40			
Amount That Can Be Balanced Billed to You	\$0	\$45			
Your Total Out-of-Pocket Costs	\$24	\$85			

Outpatient Surgery						
	In-Network	Out-of-Network				
Surgery Billed Charge	\$2,000	\$2,000				
Allowed Amount (amount CoOportunity Health uses to calculate payment)	\$1,200	\$1,200				
Your Cost Share After Deductible is Met	\$360 (based on 30% coinsurance off of \$1,200)	\$600 (based on 50% coinsurance of \$1,200)				
Amount CoOportunity Health Pays	\$840	\$600				
Amount That Can Be Balanced Billed to You	\$0	\$800				
Your Total Out-of-Pocket Costs	\$360 \$1,400					

Hospital Stay						
	In-Network	Out-of Network				
Hospital Billed Charge	\$20,000	\$20,000				
Allowed Amount (amount CoOportunity Health uses to calculate payment)	\$12,000	\$12,000				
Your Cost Share After Deductible is Met	\$2,500 (\$2,000 deductible & \$4,500 out-of-pocket maximum)	\$4,000 (\$4,000 deductible & 50% coinsurance)				
Amount CoOportunity Health Pays	\$7,500	\$4,000				
Amount That Can Be Balanced Billed to You	\$0	\$8,000				
Your Total Out-of-Pocket Costs	\$4,500	\$16,000				

Information provided in the charts is for illustrative purposes only. Actual benefits, coverage and costs will vary based on the plan.

Understanding Your Pharmacy Benefits

Prescription drug coverage is included in all CoOportunity Premier HSA plans. Our prescription drug coverage features a four-tier formulary called the EnhancedRx Drug List. The copay amounts you pay for each 31-day retail supply of your covered prescription drug depends on the tier or category in which your medication is listed.

Generic Formulary Drugs	Formulary Preferred Brand-Name Drugs	Non-Formulary Brand-Name Drugs	Specialty Drugs
\$10 copay after deductible met	\$40 copay after deductible met	\$80 copay after deductible met	\$150 copay after deductible met

Save by Using In-Network Pharmacies

MedImpact is the pharmacy benefits manager (PBM) for our prescription drug program. Here are some of the advantages of using one of the more than 66,000 retail pharmacies across the United States that contract with MedImpact:

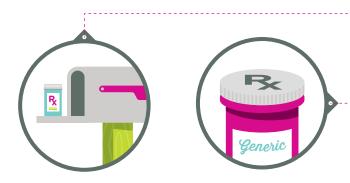
- The pharmacist files the claim electronically for you; no paperwork is required
- The pharmacist can check for drug interactions for prescriptions filled at other network pharmacies and can see if prior authorization is needed or if there are quantity limits
- You pay the appropriate cost share based on your benefits when you pick up your prescription

Mail Order Saves Time and Money

The CoOportunity Health mail order service is another easy way to save time and money for long-term maintenance drugs. Mail order allows you to receive a 93-day supply of medication for \$20 for Tier 1 generic drugs and \$80 for Tier 2 brand-name formulary drugs after deductible is met. Mail order is perfect for drugs you take on an ongoing basis such as cholesterol drugs or high blood pressure drugs. Tier 3 non-formulary drugs are available for a 93-day supply for a \$240 copayment after deductible is met.







Specialty Drug for Complex Conditions

CVS Caremark Specialty Pharmacy is the CoOportunity Health specialty drug vendor. Specialty drugs are high-cost drugs used to treat complex or rare conditions. Specialty drugs must be obtained through CVS Caremark Specialty Pharmacy.

Save by Using Generics

Choosing generic drugs over brand-name drugs is one of the easiest ways to save on your out-of-pocket costs. If you choose a brand-name drug when a generic is available, you will have to pay the copayment and the difference in cost. Always ask your doctor or pharmacist if a generic drug is available and appropriate for your situation.

Rewards & Perks for Members

healthy rewards

As a member of CoOportunity Health, we want to support you in a lifetime of healthy living. All of our health plans include the CoOportunity Healthy Rewards program. You'll get more information on how to participate when you become a member. Here's a sneak peek:



Rewards for Healthy Living

When you complete two simple steps, you'll receive a one-time \$100 Healthy Rewards gift card.*

Physical Exam: Make an appointment with your primary care physician and complete a physical exam. Building a relationship (a medical home) with a provider you trust and receiving appropriate preventive care are important in managing your overall health and well-being.

Complete Online Health Assessment: Sign up for access to the CoOportunity Health secure Member website at coOportunityhealth.com/member.
Once you're registered, log on and complete an online health assessment. Knowing your numbers like blood pressure, body mass index (BMI), and cholesterol (LDL and HDL) are helpful to complete the assessment. View your personalized report and gain access to information and programs available to you.



Discounts to Help You Save

Soon after you become a member, we'll send you a Healthy Rewards card that gives you access to discounts from popular retail and online services.

- Prescription savings program for drugs not covered through your health plan
- Vision services including eye exams, glasses and contacts
- LASIK eye surgery
- Hearing tests and supplies including namebrand hearing aids

- Diabetic supplies and drugs
- Laboratory services including blood tests
- Gym and fitness club memberships
- Weight-loss programs
- Lifestyle health coaching
- Exercise equipment and programs

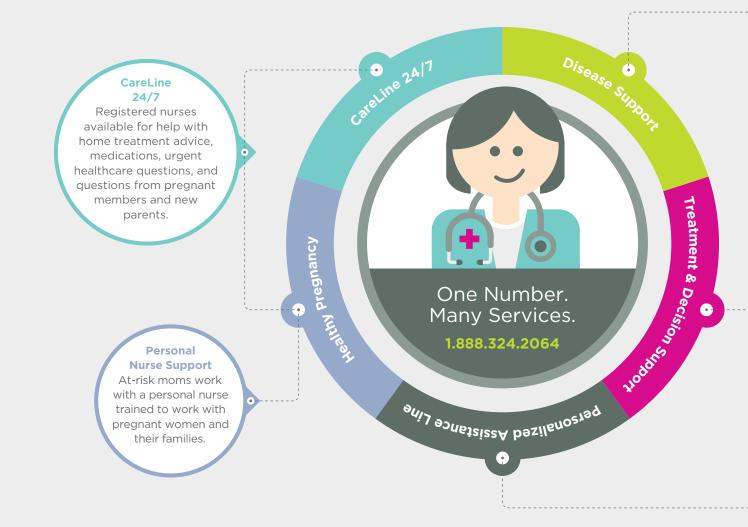
Visit our website for more information about the program at coOportunityhealth.com/healthyrewards

*Available to members 18 years of age and older. Health Assessment available in Spanish through Member Services.



Personal Health Support. At Your Service.

Every CoOportunity Health member has access to personal health support to ensure that you receive extra support when you need it. One toll-free number, 1.888.324.2064, puts you in touch with personalized services customized to fit your needs. Some of our members may simply need access to quick and knowledgeable help from our CareLinesm 24/7 nurses who can help with home treatment advice, pregnancy or new baby questions or urgent healthcare questions. Other members may work long-term with a personal nurse to help with disease or condition management. Personal health support is one of the ways CoOportunity Health is different with important services to guide members through their healthcare and health insurance experience.



Personal Nurse Support

If you're living with a condition like asthma, diabetes, heart disease or depression, our nurses will partner with you to help you follow your treatment plan, find balance in your life, build skills and knowledge about your condition and serve as an extension to your clinical care team.

> Clinical **Navigators** Ready to assist you with decision support and coordination of care questions for medical and pharmacy issues.

Personalized Assistance Line (PAL) Service Assistance in finding a mental health or chemical dependency healthcare professional or questions about coverage.

Convenient Web and Mobile Account Access

Personalized Member Website



key features:

Registering for coOportunityhealth.com Member website gives you access to personalized, real-time account information. Registration is easy and takes just a few minutes. Think of it as your dashboard that gives you access to these

- Access LiveChat with Member Services
- Look up your medical and pharmacy benefits
- See claims including deductible details and other cost breakdowns
- Read and respond to secure email messages
- Search for local and national network providers
- Save your personal providers to your homepage
- Use decision support tools to help choose care
- Access health and well-being resources including your health assessment
- Access your ID card and sign up for online delivery of health plan documents



Resources on Your Mobile Phone

You're mobile, so are we. You can access our most popular online tools from your smartphone. Simply go to coOportunityhealth.com from your smartphone browser.

Bookmark to your phone's homepage for easy return access.

- "Help Me Find" tools: Doctors and Hospitals, Pharmacies, Drug List
- Secure account tools: Claims lookup
- View and use your "virtual" ID card
- Call: Member Services or CareLine 24/7
- Symptom Checker and Health A-Z Library

Connect With Us for Questions



Member Services

Access to a member services representative is just a phone call away. Call toll-free 1.888.324.2064 Monday through Friday, 7 a.m. to 6 p.m. (TTY at 1.888.850.4762.)

- Questions about your health plan benefits or claims
- Help with network access or pharmacy benefits
- Check detailed account information
- Or, speak with a representative via email or live chat

Understanding the New Health Insurance Marketplace

Shop for Insurance Online

The Nebraska Health Insurance Marketplace (Exchange) is a new way to buy health insurance online. The Marketplace allows you to see the costs and benefits for various health plans so that you can easily compare options before enrolling and find the best coverage that fits your situation and your budget. You also can receive help paying for your insurance through the Marketplace.





How to Enroll

To receive the tax credit, you'll need to enroll in insurance on the Nebraska Health Insurance Marketplace.

If you do not qualify for a tax credit, there are three ways you can compare plans and enroll in our health insurance:

1 Directly from CoOportunity Health — call our Individual Sales Hotline toll-free at 1.866.217.6111; we're open Monday through Friday from 8 a.m. to 6 p.m. CT

2 Or on our website at coOportunityhealth.com

3 From your local broker or agent who is appointed with CoOportunity Health

4 On the Nebraska Marketplace (Exchange)

How Do I Know If I Qualify for Assistance?

Follow these easy steps to find out if you can get help with costs:

Go to healthcare.gov to fill out an application to find out if you can receive help to pay for your insurance costs or if you qualify for other insurance programs such as Medicaid

2 After you send in your application, you'll find out if you'll receive help paying for your health insurance based on your income, family size and age

The money to help you pay for your health insurance is called a tax credit; if you receive a tax credit, you'll need to purchase your health insurance on the Nebraska Health Insurance Marketplace (Exchange)







Types of Enrollment

Single Coverage: Provides coverage to the policyholder only.

Family Coverage: Provides coverage to the policyholder and eligible family members.

When You Can Enroll

Open Enrollment Period

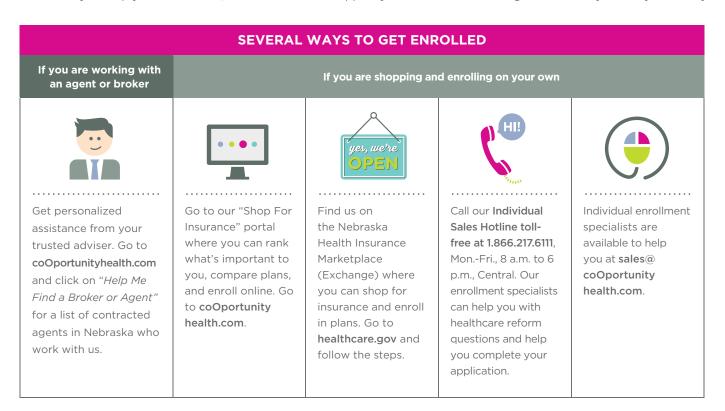
There is an initial open enrollment period from October 1, 2013, through March 31, 2014. Future open enrollment periods will begin on October 15 and continue through December 7 to enroll for the following year. January 1, 2014, is the earliest coverage will begin.

If your application is submitted by the 15th of the month, coverage will start the first day of the next month. If your application is submitted on or after the 16th of the month, coverage will start the first day of the following month. For example, an application submitted on January 15 will have a February 1 effective date. An application submitted on January 16 will have a March 1 effective date.

When open enrollment is closed (between March 31 and October 15), special enrollment periods apply if you or your dependents have a qualifying event. Check the CoOportunity Premier HSA Outline of Coverage for a detailed listing or visit our website at **coOportunityhealth.com**.

Ready to Choose a Health Plan?

Thank you for considering CoOportunity Health. Selecting the right insurance plan for you and your family can be a confusing process, particularly with all the new changes in products, tax credits and cost sharing, and ways to enroll. We stand ready to help you with advice, education and the support you need to make the right choice for you and your family.





CoOportunity Premier HSA Plan Comparison Chart

Out-of-Pocket Costs for CoOportunity Premier HSA Qualified Health Plans Available on the Nebraska Health Insurance Marketplace (Exchange) and Off-Exchange

Plan Benefits	Bronze HSA		Silver HSA		Gold HSA	
Deductible (Individual/Family)	\$4,500/\$9,000		\$2,000/\$4,000		\$1,500/\$3,000	
Coinsurance	40%		30%		20%	
Out-of-Pocket Max (Individual/Family)	\$6,350/\$12,700		\$4,500/\$9,000		\$2,000/\$4,00	00
Medical Benefits	✓= Deductible Applies		✓= Deductible Applies		✓= Deductible Applies	
Preventive Care/Screenings/ Immunizations	\$O		\$0		\$0	
First Three Office Visits Free	No		No		No	
Primary Care Visits	40%	~	30%	~	20%	~
Specialist Visits	40%	~	30%	~	20%	~
Behavioral Health (inpatient)	40%	~	30%	~	20%	~
Behavioral Health (outpatient)	40%	~	30%	~	20%	~
Habilitative & Rehabilitative Services (Physical Therapy, Occupational Therapy, Speech Therapy)	40%	~	30%	~	20%	~
Laboratory Services (outpatient)	40%	~	30%	~	20%	~
X-Ray/Diagnostic Imaging	40%	~	30%	~	20%	~
High-Tech Imaging (MRI/CT/PET)	40%	~	30%	~	20%	~
Emergency Room Services (waived if admitted)	\$250 plus coinsurance	~	\$250 plus coinsurance	*	\$250 plus coinsurance	~
Home Health Care	40%	~	30%	~	20%	~
Inpatient Admission	40%	~	30%	~	20%	~
Outpatient Services	40%	~	30%	~	20%	~
Skilled Nursing Care	40%	~	30%	~	20%	~
Hospice	40%	~	30%	~	20%	~
Durable Medical Equipment	40%	~	30%	~	20%	~
Temporomandibular Disorders (TMD) (Inpatient & Outpatient)	\$2,500 Benefit Period Maximum	~	\$2,500 Benefit Period Maximum	*	\$2,500 Benefit Period Maximum	~
Prescription Drug Benefits	✓= Deductible A _l	oplies	✓= Deductible Applies		✓= Deductible Applies	
Generic Drugs	\$10	~	\$10	~	\$10	~
Preferred Brand Drugs	\$40	~	\$40	~	\$40	~
Non-Preferred Brand Drugs	\$80	~	\$80	~	\$80	~
Specialty Drugs	\$150	~	\$150	~	\$150	~
Routine Pediatric Vision Services	✓=Deductible A	oplies	✓= Deductible Applies		✓ = Deductible Applies	
Eye Exam	\$0		\$0		\$0	
Prescription Glasses & Frames (limit one pair per year)	40%	~	30%	~	20%	~
Out-of-Network Benefits						
Deductible (Individual/Family)	\$10,000/\$20,000		\$4,000/\$8,000		\$3,000/\$6,000	
Coinsurance	50%		50%		40%	
Out-of-Pocket Max (Individual/Family)	\$20,000/\$40,000		\$9,000/\$18,000		\$4,400/\$8,800	

CoOportunity Premier HSA plans do not include pediatric dental services. This coverage is available on the Nebraska Health Insurance Marketplace and can be purchased as stand-alone coverage.

The entire family deductible must be met before benefits are paid for any family member with the exception of routine preventive services. Deductibles, copays and coinsurance apply toward the out-of-pocket maximum.

CoOportunity Premier HSA Plan Comparison Chart

Out-of-Pocket Costs for CoOportunity Premier HSA Cost Sharing Reduction Qualified Health Plans Available ONLY Through the Nebraska Health Insurance Marketplace (Exchange)

CoOportunity Premier benefit designs displayed below are available for enrollment ONLY through the Nebraska Health Insurance Marketplace. You must meet income requirements in order to enroll in these plans.

	Available only on Nebraska Health Insurance Marketplace						
Plan Benefits	HDHP Silver CSR94*		HDHP Silver CSR87*		HSA Silver CSR73		
Deductible (Individual/Family)	\$250/\$500		\$600/\$1,200		\$2,000/\$4,000		
Coinsurance	10%		10%		30%		
Out-of-Pocket Max (Individual/Family)	\$400/\$800		\$1,300/\$2,600		\$2,750/\$5,500		
Medical Benefits	✓ = Deductible Applies		= Deductible Applies		= Deductible Applies		
Preventive Care/Screenings/ Immunizations	\$0		\$0		\$0		
First Three Office Visits Free	No		No		No		
Primary Care Visits	10%	~	10%	~	30%	~	
Specialist Visits	10%	~	10%	~	30%	~	
Behavioral Health (inpatient)	10%	~	10%	~	30%	~	
Behavioral Health (outpatient)	10%	~	10%	~	30%	~	
Habilitative & Rehabilitative Services (Physical Therapy, Occupational Therapy, Speech Therapy)	10%	*	10%	~	30%	~	
Laboratory Services (outpatient)	10%	~	10%	~	30%	~	
X-Ray/Diagnostic Imaging	10%	~	10%	~	30%	~	
High-Tech Imaging (MRI/CT/PET)	10%	~	10%	~	30%	~	
Emergency Room Services (waived if admitted)	\$250 plus coinsurance	~	\$250 plus coinsurance	~	\$250 plus coinsurance	~	
Home Health Care	10%	~	10%	~	30%	~	
Inpatient Admission	10%	~	10%	~	30%	~	
Outpatient Services	10%	~	10%	~	30%	~	
Skilled Nursing Care	10%	~	10%	~	30%	~	
Hospice	10%	~	10%	~	30%	~	
Durable Medical Equipment	10%	~	10%	~	30%	×	
Temporomandibular Disorders (TMD) (Inpatient & Outpatient)	\$2,500 Benefit Period Maximum	~	\$2,500 Benefit Period Maximum	~	\$2,500 Benefit Period Maximum	~	
Prescription Drug Benefits	🗸 = Deductible A	pplies	= Deductible Applies		✓ = Deductible Applies		
Generic Drugs	\$10	~	\$10	~	\$10	~	
Preferred Brand Drugs	\$40	~	\$40	~	\$40	~	
Non-Preferred Brand Drugs	\$80	~	\$80	~	\$80	~	
Specialty Drugs	\$150	~	\$150	~	\$150	~	
Routine Pediatric Vision Services	🗸 = Deductible A	pplies	✓ = Deductible Applies		✓ = Deductible Applies		
Eye Exam	\$O		\$O		\$0		
Prescription Glasses & Frames (limit one pair per year)	10%	~	10%	~	30%	~	
Out-of-Network Benefits							
Deductible (Individual/Family)	\$1,500/\$3,000		\$2,000/\$4,000		\$4,000/\$8,000		
Coinsurance	30%		30%		50%		
Out-of-Pocket Max (Individual/Family)	\$2,500/\$5,000		\$3,000/\$6,000		\$5,500/\$11,000		

*Because of the low deductibles, the HDHP Silver CSR94 and HDHP Silver CSR87 are not HSA compatible and do not qualify as HSA-qualified HDHPs The entire family deductible must be met before benefits are paid for any family member with the exception of routine preventive services. Deductibles, copays and coinsurance apply toward the out-of-pocket maximum.

For individuals and families of American Indian or Alaskan Native ethnicity

If you are a member of a federally-recognized Indian tribe or Alaska native tribal entity, you qualify to enroll in unique, low cost health insurance products that are only available to American Indians or Alaska Natives. CoOportunity Health offers these special plans on the Health Insurance Marketplace (Exchange). Please go to the Nebraska Health Insurance Marketplace at **healthcare.gov** to enroll.

Benefits Loaded With Value

Many people think health insurance is to protect them when they are sick. At CoOportunity Health, we believe health insurance should also help you stay healthy. That's why our plans have a strong foundation of preventive care and primary care with rewards for healthy behaviors. When you choose a CoOportunity Health plan, you receive immediate value from your health insurance.

No-Cost Benefits Ready for You Day One

You have 100 percent coverage for preventive care services. There's no cost-sharing and your deductible doesn't apply as long as you use in-network providers, including:*

- Routine exams and periodic health assessments
- Appropriate immunizations for men, women and children
- Routine screening for colorectal, breast and cervical cancer

- Routine prenatal and postnatal services, exams, screenings, tests and counseling
- Routine and appropriate screenings for adults and children
- Routine eye and hearing exams for children
- Obesity screening and nutrition counseling for adults and children
- Screenings and cessation interventions for tobacco users

*A detailed listing of ACA-required preventive services provided at no cost-share for adults, women and children is available at **coOportunityhealth.com**.

Cool Features of CoOportunity Premier HSA

- Free preventive care when you use an in-network provider
- Low \$10 copay for generics after deductible is met
- Rewards for getting an annual physical and taking an online survey about your health
- Perks like discounts to popular retail and online services including fitness clubs







Important Information About CoOportunity Health Individual Plans

Summary of Health Management Programs

CoOportunity Health case and utilization management programs help ensure effective, accessible and high quality healthcare. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of healthcare services using best practice guidelines. These programs include:

- Inpatient care coordination to support timely care and ensure a safe and timely transition from the hospital
- Complex case management to provide care coordination
- The CareCheck[®] program to coordinate out-of-network hospitalizations and certain services

Prior Approvals

We require prior approval for a small number of services and procedures. For a complete list, go to **coOportunityhealth.com** or call Member Services toll-free at 1.888.324.2064.

Out-of-Network Services

You must call CareCheck[®] at 1.800.316.9807 to receive maximum benefits when using out-of-network providers for inpatient hospital stays: same-day surgery; new or experimental or reconstructive outpatient technologies or procedures: durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. We will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. Benefits will be reduced by 20 percent if CareCheck[®] is not notified.

Protecting Your Privacy and Personal Health Information

CoOportunity Health complies with federal and state laws regarding the confidentiality of medical records and personal information about our members. Our policies and procedures help ensure that the collection, use and disclosure of information complies with the law. When needed, we get consent and authorization from our members (or an approved member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable laws and standards. Our policies and practices support appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, while being sensitive to privacy. For a copy of our Notice of Privacy Practices, please visit **coOportunityhealth.com** or call Member Services toll-free at 1.888.324.2064.

Understanding Plan Coverage Details

Before choosing a health plan, please review the coverage details outlined in these important documents — provided for your consideration at the time of enrollment. You may access these documents at **coOportunityhealth.com**, view on the Nebraska Health Insurance Marketplace (Exchange), request from your agent or broker or call our enrollment hotline at 1.866.217.6111.

- CoOportunity Premier HSA Outline of Coverage
- Summary of Benefits Coverage (SBC)

When you become an enrolled member with CoOportunity Health, you will receive an ID card and information about how to access your Individual Policy and Benefits Chart. These are important contract documents that provide greater detail about coverage, limitations, exclusions, notification requirements and other information to assist you in accessing your health insurance benefits.

We Can't Wait for You to Call

We want you to be happy with your health plan. Serving our members is our number one priority! In fact, it's what sets us apart from other insurance companies. Because we are a CO-OP, we exist only to serve our member-owners.

Member Services is available to help you with benefits questions and services from 7 a.m. to 6 p.m. CT, Monday through Friday. Call toll-free at 1.888.324.2064.

Live Chat is available when you are registered for our secure Member website, 8 a.m. to 5 p.m. CT, Monday through Friday.

CareLine 24/7 services are available to help you anytime of the day, 365 days a year, at 1.888.324.2064. Call with questions about treatments, medicines, urgent healthcare advice, pregnancy and new baby questions or just about any kind of question you may have after business hours.



Confused by Health Insurance Reform?

The Affordable Care Act is complex and can be difficult to understand. We can help. Our "Consumer Guide to the New Health Insurance Marketplace" is a good place to start. Download from our website at **coOportunityhealth.com**.

1.866.217.6111

Or, call our toll-free Hotline. Our enrollment specialists are up-to-speed on the latest rules and regulations. Mon-Fri, 8 a.m. – 6 p.m., CT

For costs and further details of the coverage, including exclusions, any reduction or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. This is a solicitation for business and a response to this brochure will generate communication by a licensed producer.



For more information: coOportunityhealth.com Individual Sales Hotline: 1.866.217.6111 Email: sales@coOportunityhealth.com



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