

2023 Individual & Family Coverage Book for Illinois

Your **local** health
coverage partner



WellFirst Health[®]
provided by SSM Health Plan

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Have questions?
We are here to help

Call

Call our Customer Care Center for questions about benefits and more.

866-514-4194 (TTY: 711)

Monday – Thursday, 7:30 am – 5 pm

Friday, 8 am – 4:30 pm

Click

Visit wellfirsthealth.com/get-help

Enroll

Find the best plan for you!

Visit wellfirsthealth.com/enroll2023

For additional ways to enroll, see page 10.



WellFirst Health — Provided by SSM Health Plan — Coverage Focused on Health Care

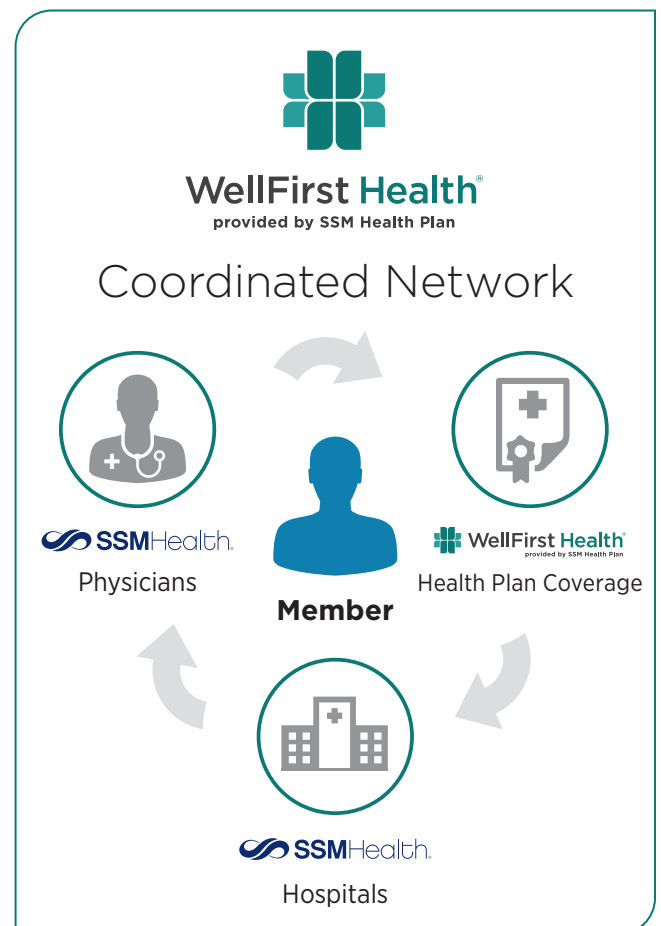
Traditionally, health plans and physicians measure success quite differently.

This dynamic has led to a health care system that focuses more on illness than wellness. WellFirst Health — Provided by SSM Health Plan — changes that.

It's a true collaboration between health care experts, hospital partners and health plan coverage, leading to a more affordable and beneficial experience for members, one that is truly focused on them. And because we were developed right here by local health care and health coverage professionals, the plan is designed specifically to help our communities flourish.

Coordinated, Physician-led Coverage and Care

We address the challenge of creating a long-term, sustainable health care solution by transforming the health care model. With our coordinated approach and focus on the doctor-patient relationship versus health plan profits, we bring an innovative model of care and coverage to Illinois. Primary care physicians and specialists across our network collaborate to provide the best personalized care possible. It's health coverage that members can feel great about.



Health coverage with YOU in mind

WellFirst Health — Provided by SSM Health Plan — is dedicated to our members' well-being.

We give members peace of mind financially and the confidence that their health care is of the utmost quality. We offer preventive care and wellness education through early diagnosis, groundbreaking treatment and rapid recovery.

Choose benefits that go above and beyond like free SSM Health Express Virtual Care on most plans, urgent care visits that cost no more than your primary care physician visits, free digital wellness programs and more.



Preventive Services

We do more than help pay the medical bill. At the heart of our preventive care philosophy is a promise you will get the support needed to remain healthy.



Care from Anywhere

SSM Health Express Virtual Care is available to all our individual and family plan members, with e-visits free of charge for certain plans. See plan options or visit wellfirsthealth.com/evisit for more details.



Powerful Tools

Get access to online accounts, like MyChart, designed to assist you with communicating with your physician, viewing claims and accessing prescription history.



Pharmacy Drug Formulary

We use a drug formulary, which is a list of prescription drugs that help you understand what is and isn't covered. The drug formulary is reviewed every month and updated on a regular basis. Our drug formulary breaks the list into different tiers that are organized by the level of cost sharing between you and the health plan. Learn more about our formulary, our mail-order pharmacy and cost-saving options at wellfirsthealth.com/medications



Exceptional Support

When you have coverage questions or needs, our knowledgeable Customer Care Team is just a call away.



Care Around The Clock

Our 24-hour Nurse Advice Line is available any time you need a little health advice. Our staff is available **365 days of the year.**



Preferred Diabetic Supply Savings

Preferred Diabetic Supply Savings \$0 member cost share* on preferred diabetic supplies (for example, preferred test strips, lancets, syringes, needles, etc.)



Out-of-Area Care

Both urgent and emergency care are covered by the health plan when you are traveling and unable to return to the service area.



Preferred Insulin Savings

\$35 maximum member cost share* on preferred insulin (tier 2) per one-month supply as part of your standard pharmacy benefit.

* HDHP members do not have to meet their deductible first.

Provider Network

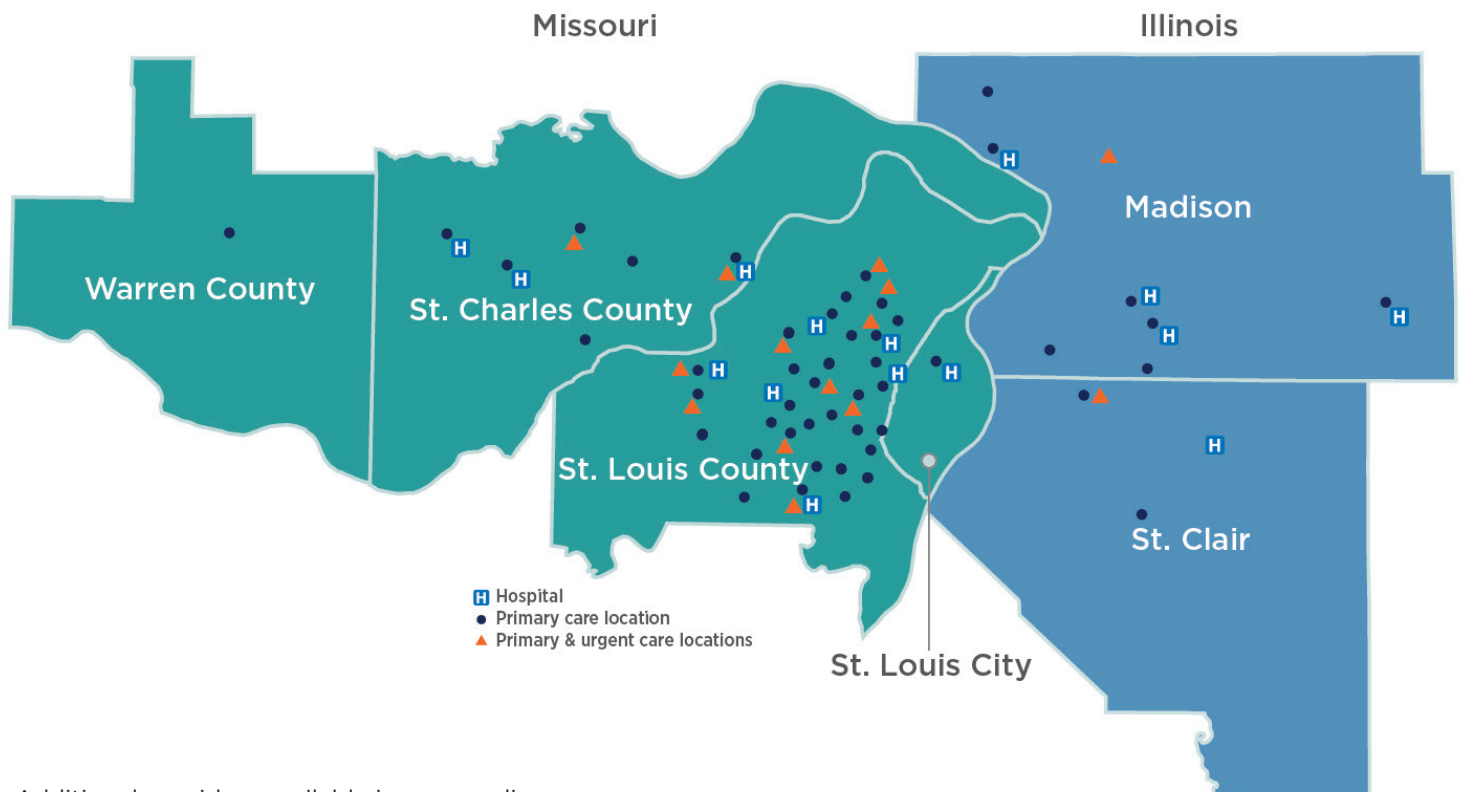
Featuring the quality providers of  SSMHealth.

Visit wellfirsthealth.com/doctors

WellFirst Health — Provided by SSM Health Plan — brings an innovative model of care and coverage to your neighborhood.

Primary care physicians and specialists across our network collaborate with health plan experts to provide the best personalized care possible, giving members a better value with their coverage. It's coverage that members can feel great about.

Looking for a primary care provider (PCP)? Visit wellfirsthealth.com/doctors to search our online provider directory for an available primary care provider. You can filter your search so you only see providers in your network. Then select a provider to learn about his or her education, specialty, certification and more.



Additional providers available in surrounding counties. Please visit our online directory for more details.

For assistance with reading this map, please call
1-866-514-4194 (TTY: 711)

Be A Healthier You

Your comprehensive wellness program



LivingHealthy
POWERED BY WebMD | health services

WellFirst Health – Provided by SSM Health Plan – in partnership with WebMD offers a variety of programs focusing on the whole person across eight dimensions of wellness, making healthy living achievable and fun.

Wellness Programs and Features

Health Assessment

Based on your individual questionnaire results, WebMD provides recommendations for each lifestyle category. A variety of interactive self-management tools are customized to your needs.

Case Management

Provides support through complex health situations.

Wellness Care Package

A monthly brochure highlighting programs, education and health observances.

Partner Perks

Discounts for gyms, spas, golfing, devices, equipment, nutrition and more.

Nicotine Cessation

Nicotine cessation and vape free programs for families. Free medications may be available.

R.E.A.L. Goals (Realistic, Easy, Attainable, Life Goals)

Preset goals covering all eight dimensions along with tips and trackers to help you achieve success.

Preventive Health Toolkits

Download our toolkits that include education and awareness for many national observances and seasonally-appropriate topics.

Events Calendar

Access live monthly Book Club discussions, Move with a Doc, Learning Lofts, and more webinars covering the eight dimensions of wellness. Events are virtual, and you can attend from anywhere. Learn more at wellfirsthealth.com/events

Nutrition

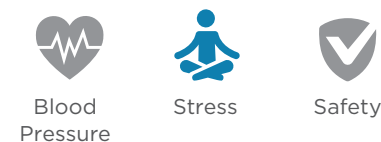
Members can access WebMD resources, challenges, webinars and a monthly Made from Scratch newsletter.



Your lowest risks are...



You should work on...



Optimal YOU is 100

You scored a 41 out of 100



Health Assessment Example

Additional Wellness Programs

Learn more at...

wellfirsthealth.com/wellness

Resources and rewards to help you achieve your health and wellness goals.

■ Behavioral Health

1 in 5 adults experience mental illness in their life. If you or someone you know needs help, know you are not alone. Our health plan offers a spectrum of support, services and treatment options within our network. Visit wellfirsthealth.com/behavioralhealth to access our resources.

■ Living Healthy Rewards:

A focus on Preventive Health Services

Prevention or early detection of common diseases is the best way to be the healthiest you and earn up to **\$150 in rewards!** Earn points and money for taking care of you!

Here's how it works:

1. Choose the healthy activities you want to complete
2. Each completed activity is worth reward points (example: 500 points = \$50)
3. Earn up to 1,500 points for a maximum of \$150* per calendar year (before December 31, 2023)
4. Rewards come in the form of gift card(s) of your choice to many national retailers, restaurants and other popular merchants

■ Preventive Health Services

Prevention or early detection of common diseases is the best way to be the healthiest you. The list below includes some of the more common preventive and screening services proven to improve health, but it is important to check with your primary care provider to determine which tests are appropriate for you, based on your medical history and family history. Earn points for taking care of you!

- **Immunizations:** Influenza, Varicella, Tetanus, Meningococcal and Pneumococcal
- **Cancer screenings:** Mammogram, Colon Cancer (FIT testing, Cologuard, Colonoscopy) and PAP smear
- **Other screenings:** Chlamydia, Gonorrhea, HIV, Hepatitis C, Diabetes and Depression

* Only health plan members, ages 18 and older, are eligible for Living Healthy Rewards

LivingHealthy

POWERED BY **WebMD** | health services



Sync device with your Living Healthy account



Join a wellness challenge



Check in with your mental health



Engage in your community

Visit wellfirsthealth.com/livinghealthy to access your resources and start your Health Assessment today!

** WellFirst Health members age 18 and older are eligible for Living Healthy rewards. Check with your plan administrator for reward offerings specific to your plan. Covered adult children (ages 18 and older) can earn up to \$100 per year. Visit wellfirsthealth.com/livinghealthy for full details.*

Where to go for Care

Still not sure of the type of care you need?

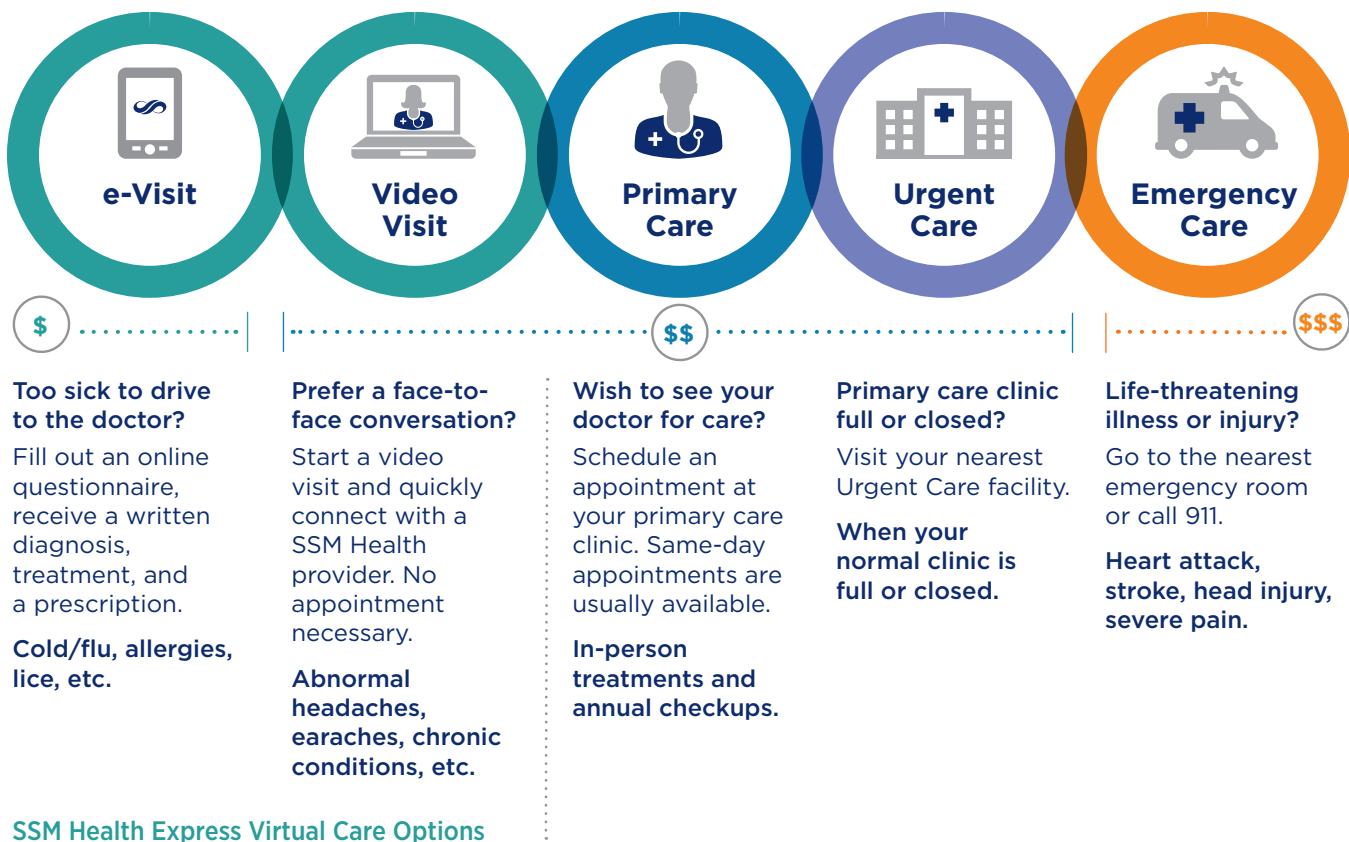
Members can call the 24-Hour Nurse Advice Line at **833-925-0398**.

A nurse is ready to help 24/7/365.

As a member, you will have a variety of ways to receive care no matter what day of the week it is, whether it's during regular office hours or the middle of the night. Knowing your care options in advance is not just good for your health, but it can also save you money.

The Right Care for Your Needs

Knowing your care options before you need them saves you time and money



Understanding the Basics of Health Coverage

Health coverage is complicated, so we're going to walk you through the basics.

■ Essential Health Benefits

are defined as the ten benefits that individual plans must cover. Depending on the type of plan you purchased, services associated with Essential Health Benefits may still require cost sharing in the form of copays, coinsurance and deductibles.

- Preventive (below), wellness and disease management services
- Emergency care
- Hospitalization
- Ambulatory care
- Maternity and newborn services
- Prescription drug coverage
- Pediatric services
- Laboratory services
- Rehabilitative and habilitative services
- Mental health and substance abuse services, including behavioral health treatment



■ Preventive Services

are services provided with no copays, coinsurance or deductibles when delivered by a network provider, and when all preventive services criteria are met.

- Routine vaccines
- Flu & pneumonia vaccines
- Preventive care visits
- Blood pressure, cholesterol and diabetes screenings
- Colorectal cancer screening (50+)
- Mammography screenings (once per year for 40 years of age and older)



For a more comprehensive list, visit wellfirsthealth.com/preventivecare

■ Prescription Coverage

includes programs to make filling prescriptions easier and save you money along the way. Prescription coverage benefits vary from plan to plan.



For more information visit wellfirsthealth.com/medications

Enrolling in Individual and Family Coverage

Enroll today at

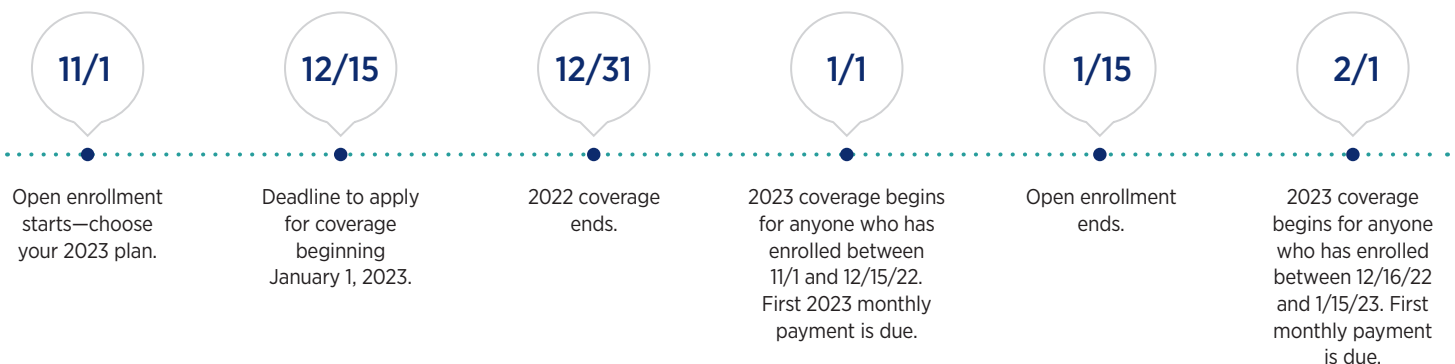
wellfirsthealth.com/enroll2023

We have health coverage plans to fit your lifestyle and budget. Whether you're looking for a lower-premium plan, to limit your overall out-of-pocket, or even just for a catastrophic safety net plan, we're here for you.

Open Enrollment vs. Special Enrollment

You can enroll for individual and family coverage during open enrollment that begins on November 1, 2022. After that, you will need to wait for the next open enrollment period in November 2023, unless a qualifying event occurs and you are eligible for special enrollment (job loss, marriage, divorce, a baby or a move to a new coverage area).

Learn more at wellfirsthealth.com/specialenrollment



What are my next steps?

The process to make changes to your plan depends on where you purchase your health insurance.

Enroll

There are a variety of ways to enroll in a new individual and family plan, both digitally or with the help of an agent. Learn more at wellfirsthealth.com/enroll2023

To enroll in a Marketplace plan with WellFirst Health — Provided by SSM Health Plan, visit wellfirsthealth.com/marketplace or:

- Enroll with a licensed Health Insurance Agent
- Enroll online at the ACA Marketplace at healthcare.gov



Getting to the Care you need

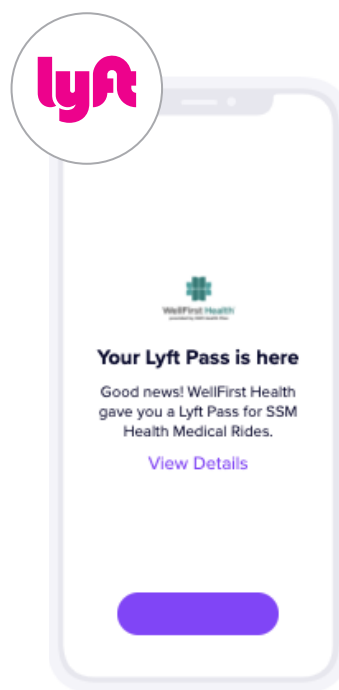
Learn more at...

wellfirsthealth.com/lyft

We know that getting access to care when you need it is important, which is why we are proud to partner with Lyft to make it easier to get to your medical appointments.

■ What you need to know

- Lyft Passes provided by the health plan **are for medical rides only.**
- To use this benefit, you will need to download the **Lyft app** from your Apple App Store or your Android Play Store.
- **Once you create your account, you will be required to enter a credit card to keep on file in order to register for a Lyft account.** However, you will not be charged for any rides while using the Lyft Pass for Health Plans.
- Your new **Lyft code** can be applied to your personal Lyft account for quick access.
- Each month, your code is re-loaded with credit to get you to all the rides you need for the month.
- To get your Lyft Code, call our Customer Care Team **866-514-4194 (TTY:711)**



■ Requesting a Ride

Once your Lyft account is all setup, and you have your pass code, you're ready to request your first ride!

On the home page of your Lyft app, you can enter your destination by name or by address in the search bar. A banner will appear under the ride, displaying **WellFirst Health — Provided by SSM Health Plan — Lyft Pass with a FREE ride.** Click **"Select Lyft"** to request your ride.

Help Choosing the Best Plan for You

Find the best plan to fit your needs!

Visit wellfirsthealth.com/enroll2023

WellFirst Health — Provided by SSM Health Plan — is all about options, so pick the plan option that's best for you.

One route is to select a plan with lower premiums and higher copays. Another may have higher premiums and lower copays.

We can help if you have questions. Whichever plan you choose, it will fall into a metal category. These help categorize plans according to how much you can expect to pay in monthly premium and when you receive medical services. See page 15 for more information.



Copay Plus

Get the coverage you need and the cost predictability you prefer! You don't like surprise bills? This may be the plan for you. The Copay Plus plans feature:

- Low copays for office visits and many prescription drugs
- Affordable deductible and coinsurance options
- An easy way to build a relationship with a provider



Copay PCP

The best value for the care you receive the most!

You keep yourself healthy with regular visits to your PCP. Our Copay PCP plans keep your premiums low, and offer you the best value for your regular PCP visits and generic prescription drugs.

- Affordable primary care and generic drug copays to cover your health concerns and maintenance
- Affordable deductible and coinsurance options
- An easy way to maintain or build your relationship with your provider
- Lower monthly premium savings



Value Copay

Perhaps you prefer the lower premiums of a high-deductible plan as well as low out-of-pocket costs when you visit the doctor. We have you covered with our Value Copay Plan options.

- Three affordable office visit copays to cover unexpected health concerns
- Lower copays on generic prescription drugs with most plans
- Overall monthly premium savings while making it easy to establish a relationship with your provider



Standard

Simplify your shopping experience with standard plans.

Standard plans make it easy to shop across all of the important services you need. Our standard plans are offered at every network type, metal tier, and in every service area that we offer coverage.



Safety Net

Your goal is to protect yourself from medical bankruptcy in the event of an unexpected catastrophic illness or injury. Consider jumping into our Safety Net Plan that offers a high deductible and three **FREE** office visits. Remember that government affordability programs are not available with the Safety Net Plan.

Our Safety Net Plan is available for those who:

- are under age thirty
- or meet certain income guidelines
- and are comfortable with their health status



HSA-eligible

Looking to save even more?

You're a saver and prefer to take advantage of a Health Savings Account (HSA) to cover your medical bills. We have excellent choices for you! Eligible individuals can combine a qualifying high-deductible health plan (HDHP) with an HSA for more financial freedom and flexibility. Just visit **wellfirsthealth.com** and purchase one of our HSA-eligible Individual & Family plans. For questions regarding an HSA plan, call us at **866-514-4194 (TTY: 711)**.

- Provide multiple options for combining a qualifying HDHP with an HSA
- Grow health care savings — no “use it or lose it” rule
- Receive tax savings

Health Coverage Affordability Programs

Financial help is available!

Learn more at wellfirsthealth.com/calculator

Having health coverage means peace of mind in knowing you have coverage.

Depending on your income and personal situation, you may be eligible for a variety of discounts and subsidies, too. Visit wellfirsthealth.com/calculator for more information and to find out if you are eligible.

■ Tax Credits

Tax credits lower the monthly premium you pay for health coverage. Depending on your household income level, these credits can pay for a considerable amount of your premium.

You can use your tax credit on most Marketplace plans. When you visit wellfirsthealth.com/calculator and begin shopping plans, your tax credit allowance will be calculated for you.



■ Cost Sharing Reduction Plans

These plans are only available on **silver plans** for those who make **\$33,975 or less** for a single person. These plans can lower the amount you pay on services. We offer a variety of options for silver plans that are eligible for cost-sharing reduction plans.

- Lower the amount you pay on services
- Most members who applied last year qualified



■ Lower Out-of-Pocket Costs

There are three levels of cost sharing reduction based on Federal Poverty Level (FPL) income brackets:

- 1 100-150 percent of FPL
- 2 151-200 percent of FPL
- 3 201-250 percent of FPL

■ Cost-sharing Maximums




The plan you purchase will include a limit on the out-of-pocket expenses you have to pay for health care per year. Once this limit is reached, your health coverage plan begins to pay 100 percent of the cost.









Metal Tiers

You can use metal tiers to help determine which type of plan is right for you. No matter where you purchase your plan, it will be categorized using metal tiers.

Metal Tiers				
				
	Platinum	Gold	Silver	Bronze
Monthly cost	\$\$\$\$	\$\$\$	\$\$	\$
Cost when you get care	\$	\$\$	\$\$\$	\$\$\$\$
Maximum out-of-pocket expenses	\$	\$\$	\$\$\$	\$\$\$\$
Good option if you...	Plan to use a lot of health care services	Want to save on monthly premiums while keeping out-of-pocket costs low	Need to balance monthly premium with out-of-pocket costs	Don't plan to need a lot of health care services

Federal Poverty Level (FPL)

It's important to check if you qualify for one or more of these programs based on your income level. The following table shows the FPL guidelines, but an agent or one of our representatives can help you if you're not sure.

2022 Federal Poverty Level Guidelines			
Size of Household	Percentage of Federal Poverty Level		
	100%	250%	400%
1 	\$13,590	\$33,975	\$54,360
2 	\$18,310	\$45,775	\$73,240
3 	\$23,030	\$57,575	\$92,120
4 	\$27,750	\$69,375	\$111,000
Coverage Information	May qualify for cost-sharing reductions and advance premium tax credits	May qualify for cost-sharing reductions and advance premium tax credits	May qualify for advance premium tax credits

WellFirst Health — Provided by SSM Health Plan — is Here For You

Once you become a member, we make things simple to help you take control of your health.

As a member you will receive a member ID card and a member guide after enrollment to walk you through your health plan.

From finding out-of-area care while traveling to discussing prior authorization with our Medical Affairs team, we pride ourselves on helping you make the most of your health.

■ Privacy

WellFirst Health —Provided by SSM Health Plan — is required by law to maintain the privacy of your personal health and financial information (collectively referred to as “nonpublic personal information”) and provide you with written notification of our legal duties and privacy practices concerning that information.

For additional information please visit [wellfirsthealth.com/privacy](https://www.wellfirsthealth.com/privacy) or call **866-514-4194** to request a copy.

For more information on coverage, benefits, and processes for your plan, please visit [wellfirsthealth.com/newmember](https://www.wellfirsthealth.com/newmember) or call 866-514-4194.

■ Grievances & Appeals

Your input matters, and we encourage you to reach out with any concerns you may have regarding your health coverage. Visit [wellfirsthealth.com/appeals](https://www.wellfirsthealth.com/appeals) for details on how to file a grievance or appeal, or for more information about these procedures.

Contact the Customer Care Center with any questions about the process by calling **866-514-4194**.



Have questions? We are here to help

Call

Call our Customer Care Center for questions about benefits and more at **866-514-4194 (TTY: 711)**

Monday – Thursday, 7:30 am – 5 pm

Friday, 8 am – 4:30 pm

Click

Visit wellfirsthealth.com/get-help

General Limitations & Exclusions

All benefits are subject to limitations and exclusions as described in your Schedule of Benefits and in your Policy and Benefit Summary (“Policy”).

The following list is not exhaustive and may vary based on your Policy. For a complete listing refer to your Policy.

- Cytotoxic testing and sublingual antigens associated to allergy testing
- Hair analysis (unless lead or arsenic poisoning is suspected)
- Preimplantation genetic testing of embryos and gametes
- Convenience items for a Member or a Member’s family, unless stated otherwise in this Policy
- Drugs provided or administered by a physician or other provider, except those drugs that meet the definition of Professionally Administered Drugs
- Outpatient prescription drugs, except those prescriptions otherwise covered under this Policy
- Oral Nutrition: Oral nutrition is not considered a medical item. We do not cover nutritional support that is taken orally (i.e., by mouth), unless mandated by state law or covered under our medical policy for a specific condition. Examples include, but are not limited to, over-the-counter nutritional supplements, infant formula, and donor breast milk
- Replacement of an item if the item is lost, stolen, unusable or nonfunctioning because of misuse, abuse, or neglect
- Sexual dysfunction supplies, including but not limited to medications and injections
- Charges directly related to a non-covered service, such as hospitalization charges, except when a complication results from the non-covered service that could not be reasonably expected and the complication requires medically necessary treatment. The treatment of the complication must be a covered benefit
- Autopsy
- Cosmetic services, including cosmetic surgery
- Experimental or investigational services, treatments, or procedures, and any related complications as determined by us, unless coverage is required by state or federal law
- Hospital or medical service not listed in this Policy
- Items that can be purchased over the counter and considered to be for comfort, convenience and/or personal hygiene, examples include, but are not limited to: seasonal affective disorder light units, disposable undergarments, wigs and modification to a Member’s home such as ramps, grab bars, stair lifts and bench/chair lifts
- Medical and surgical treatment of excessive sweating (hyperhidrosis)
- Podiatry services or routine foot care rendered provided when there is no localized illness, injury, or symptoms. These include, but are not limited to: 1. the examination, treatment, or removal of all or part of corns, calluses, hypertrophy or hyperplasia of the skin or subcutaneous tissues of the feet; 2. the cutting, trimming, or other non-operative partial removal of toenails; or 3. for any treatment or services in connection with any of these
- Obesity-related services, including any weight loss method, surgical treatment or hospitalization for the treatment of obesity, unless specifically covered under this policy
- Reversal of voluntary sterilization and related procedures
- Services, treatment, and supplies provided to a Member while the Member is held or detained in custody of law enforcement officials, or imprisoned in a local, state, or federal penal or correctional institution
- Services and supplies furnished by a government plan, hospital, or institution the law requires you to pay
- Services or supplies associated to a denied Prior Authorization



- Services or supplies associated to a denied admission
- Services or supplies not Medically Necessary, not recommended or approved by a provider, or not provided within the scope of a provider's license
- Services or items provided as a result of war or any act of war, insurrection, riot or terrorism
- Services or supplies provided for an injury sustained while performing military service
- Services or supplies for which a Member receives or is entitled to receive any benefits, settlement, award, or damages, or following any claim under, any Workers' Compensation Act, employer's liability insurance plan, or similar law or act. "Entitled" means the Member is actually insured under Workers' Compensation
- Sexual dysfunction treatment and services including, but not limited to surgery
- Take home drugs and supplies unless a written prescription is obtained and filled at a network pharmacy
- The company shall not be liable for any loss to which a contributing cause was the insured's commission of or attempt to commit a felony or to which a contributing cause was the insured's being engaged in an illegal occupation.
- Travel immunizations
- Acupuncture
- Chelation therapy for atherosclerosis
- Coma stimulation programs
- Alternative medicine, not otherwise listed in the Policy
- Low level light therapy
- Massage therapy
- Prolotherapy
- Swim or pool therapy, unless prior authorization is obtained
- Administrative examinations such as employment, licensing, insurance, adoption, or participation in athletics
- Court-ordered care, unless medically necessary and otherwise covered under this Policy
- Educational services, except for diabetic self-management classes
- Internet consultations, including all related charges and costs, except as defined by our medical policy
- Missed appointment charges
- Telephone consultation charges between providers
- Charges or costs exceeding a benefit maximum or maximum allowable fee, where applicable
- Expenses incurred before the supply or service is actually provided unless Prior Authorized by Us

This notice was last updated June 2022.



WellFirst Health[®]
provided by SSM Health Plan

Follow us on LinkedIn and Facebook
and leave us a Google review



WellFirst Health — provided by SSM Health Plan — does not discriminate on the basis of disability in the provisions of programs, services or activities. If you need this printed material interpreted or in an alternate format, or need assistance in using any of our services, please contact a Customer Care Specialist at 866-514-4194 (TTY: 711).

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