West Linn Wilsonville SD

2020 Classified Open Enrollment

West Linn-Wilsonville
School District

WLWV SD 2020 Open Enrolment

August 1st – August 31st

- Medical
  - PacificSource (replacing HealthNet effective 10/1)
  - Kaiser
- Dental
- Vision
- Other Plans

Welcome to PacificSource

PacificSource
HEALTH PLANS

PacificSource Health Plans

- Who is PacificSource
- Plan Options for Classified Members
- Transition of Care
- Member Services
- PacificSource Support

Who is PacificSource

PacificSource Health Plans putting members first since 1933

- Get the right care, at the right time, in the right place
- No referrals required by our plan to see a specialist
- A person to answer your call, not an automated phone tree
- Based in Springfield Oregon, with local offices across Idaho, Montana, Oregon, and Washington.

Classified Plan Options

- Definitions
- Preventive Care
- Plan Comparison
- Vision

Definitions

Co-pay:
A fixed-dollar amount that you must pay for healthcare services covered by your PacificSource plan. This amount may be different for participating vs. nonparticipating providers.

Co-insurance:
This is your share of costs, after the annual deductible has been met.

Deductible:
This is the amount you must pay before the plan pays for covered services.

Out-of-pocket limit:
This is the most you'll pay for covered services in a calendar year. Out-of-pockets costs include deductibles, co-insurance, and co-pays.

Preventive Care Benefits: $0 Co-pay with In-network Providers

- Preventive care is critical to your overall health. This benefit helps to identify health problems early on so you can take action to keep them from becoming chronic conditions.

- Types of Preventive Care
  - Wellness Visits
  - Immunization Vaccines
  - Colorectal Cancer Screening
  - Breast Cancer Screening
  - Cervical Cancer Screening
  - Obesity Screening
  - Diabetes Screening
  - Depression Screening

Telemedicine

- Telehealth is an appointment with a doctor by phone or video.
- Telehealth visits for COVID-19 testing and testing-related services will be covered at no cost. All other healthcare needs using telehealth will be paid at your normal benefit level.
- Types of visits that are covered:
    - Medical visits
    - Behavioral health (including therapy and substance abuse)
    - Speech therapy
    - Occupational and physical therapy

Plan Name	PacificSource Pathfinder Voyager 100+10_30 S4, $15-30-50 2000 OP Rx, Alt Care (Previous HN CCN 3 Tier Plan)			PacificSource Pathfinder 100+10_10 S3, $15-30-50 2000 OP Rx, Alt Care (Previous HN EPO)		PacificSource Pathfinder 1600+25_30 S3, $15-30-50 2000 OP Rx, Alt Care (Previous HN 1500 PPO)		PacificSource Pathfinder 1600_30+Rx Non Embedded S3, Alt Care (Previous HN HDHP 1500)	
Plan Info	**In Network Tier 1**	**In Network Tier 2**	**Out of Network Tier 3**	**In Network**	**Out of Network**	**In Network**	**Out of Network**	**In Network**	**Out of Network**
Annual Deductible/Individual		$100		$100		$1,600		$1,600	$3,200
Annual Deductible/Family		$200		$200		$3,200		$3,200	$6,400
Annual Out-of-Pocket Maximum/Individual		$3,500		$3,000	NA	$5,000		$3,500	$10,500
Annual Out-of-Pocket Maximum/Family		$7,000		$6,000	NA	$10,000		$7,000	$21,000
General Services	**Member pays after Deductible (Deductible is waived when noted by *)**								
Preventive Services	Covered in Full*	Covered in Full*	50%	Covered in Full*	90%	Covered in Full*	50%*	Covered in Full*	50%*
Office Visit	$10 Copay*	50%	50%	$10 Copay*	90%	$25 Copay*	50%	30%	50%
Specialist Visit	$50 Copay*	50%	50%	$10 Copay*	90%	$25 Copay*	50%	30%	50%
Naturopaths	$10 Copay*	50%	50%	$10 Copay*	90%	$25 Copay*	50%	30%	50%
Diagnostic & Therapeutic Radiology/Lab	30%	50%	50%	10%	90%	30%*	50%	30%	50%
Advanced Diagnostic Imaging	30%	50%	50%	10%	90%	30%	50%	30%	50%
Urgent Care	$50 Copay*	$50 Copay*	$50 Copay*	$35 Copay*	90%	$50 Copay*	$50 Copay*	30%	30%
Hospital Services									
Inpatient Hospitalization	30%	50%	50%	$200 Copay per day*	90%	30%	50%	30%	50%
Outpatient Surgery	25% Ambulatory Surgery Center 30% Hospital-Based	45% Ambulatory Surgery Center 50% Hospital-Based	50%	$200 Copay per visit*	90%	25% Ambulatory Surgery Center 30% Hospital-Based	50%	25% Ambulatory Surgery Center 30% Hospital-Based	50%
Emergency Room	$250 Copay, 30%*	$250 Copay, 30%*	$250 Copay, 30%*	$150 Copay*	$150 Copay*	$150 Copay, 30%*	$150 Copay, 30%*	30%	30%
Ambulance (ground/air)	30%	30%	30%	30%	30%	30%	30%	30%	30%
Alternative Care	**$1,000 Combined Annual Max Chiro/Acup/Massage**			**$1,000 Combined Annual Max Chiro/Acup/Massage**		**$1,000 Combined Annual Max Chiro/Acup/Massage**		**$1,000 Combined Annual Max Chiro/Acup/Massage**	
Chiropractic Manipulation	$15 Copay*	$15 Copay*	50%	$15 Copay*	90%	$15 Copay*	50%	30%	50%
Acupuncture	$15 Copay*	$15 Copay*	50%	$15 Copay*	90%	$15 Copay*	50%	30%	50%
Massage Therapy	$25 Copay*	$25 Copay*	50%	$25 Copay*	90%	$25 Copay*	50%	30%	50%
Prescription Drug Benefits	**$2,000 Out of Pocket Maximum ($4000 Family)**			**$2,000 Out of Pocket Maximum ($4,000 Family)**		**$2,000 Out of Pocket Maximum ($4,000 Family)**		**Combined Medical/Rx Deductible & Out of Pocket**	
PacificSource Expanded No Cost Rx:	No Cost at In Network Pharmacy			No Cost at In Network Pharmacy		No Cost at In Network Pharmacy		No Cost at In Network Pharmacy	
At Retail: Maximum Day Supply	Up to a 90 day supply		Up to a 30 day supply	Up to a 90 day supply	Up to a 30 day supply	Up to a 90 day supply	Up to a 30 day supply	Up to a 90 day supply	Up to a 30 day supply
Tier 1 (Per 30 day supply)	$15 Copay*		90%*	$15 Copay*	90%*	$15 Copay*	90%*	20%	90%
Tier 2 (Per 30 day supply)	$30 Copay*		90%*	$30 Copay*	90%*	$30 Copay*	90%*	20%	90%
Tier 3 (Per 30 day supply)	$50 Copay*		90%*	$50 Copay*	90%*	$50 Copay*	90%*	20%	90%
Tier 4 (Per 30 day supply)	Lesser of $150 or 10%*		90%*	Lesser of $150 or 10%*	90%*	Lesser of $150 or 10%*	90%*	20%	90%
Compound Drugs - (30 day max)	$50 Copay*		90%*	$50 Copay*	90%*	$50 Copay*	90%*	20%	90%
Mail Order: Maximum Day Supply	Up to a 90 day supply			Up to a 90 day supply		Up to a 90 day supply		Up to a 90 day supply	
Tier 1 (Per 90 day supply)	$30 Copay*			$30 Copay*		$30 Copay*		20%	
Tier 2 (Per 90 day supply)	$60 Copay*		NA	$60 Copay*	NA	$60 Copay*	NA	20%	NA
Tier 3 (Per 90 day supply)	$100 Copay*			$100 Copay*		$100 Copay*		20%	
Tier 4 (Per 90 day supply)	Lesser of $300 or 10%*			Lesser of $300 or 10%*		Lesser of $300 or 10%*		20%	

Transition of Care

- Deductible and Out of Pocket
- Prescriptions
- Upcoming Visit/Procedures/Treatment
- WLWV SD PacificSource Website
- Provider Search

Deductible and Out of Pocket Credit

- HealthNet will be providing a report for all members and all Deductible and Out of Pocket credits will be applied to members by November 15.
- If a member has met the HealthNet plan of $100 deductible and the PacificSource plan is a $200 deductible, the member will need to meet the additional $100. Same applies to Out of Pocket amounts.
- All Deductible, Out of Pocket and annual limits will reset on January 1.

Transition for Prescriptions

- Provide your pharmacies your NEW PacificSource ID card for all services after 10/1/20.
- If you use mail order services currently, please notify the current vendor and complete the setup with CVS Caremark Mail order
- 90 day transition period for any prescriptions that require Prior Authorization to allow for required communications.

Upcoming Visit/Procedure/Treatment

- Provide your providers your NEW PacificSource ID card for all services after 10/1/20.
- If you have upcoming care planned/approved with Healthnet, we can work with providers to ensure information is transitioned over.
- Complete the care coordination form available on the West Linn Wilsonville SD PacificSource website
  - https://www.pacificsource.com/members/groups/WLWSD

  Or
  - Email/Call the PacificSource team

Get our latest COVID-19 information and updates. Visit our blog

PacificSource HEALTH PLANS

Find a: Doctor | Drug

Search

Shop Plans Members Producers Providers Resources Careers Contact Us Log in

West Linn-Wilsonville School District employee health plan information

Open enrollment is August 1st-31st

West Linn-Wilsonville School District employees now have the option to choose PacificSource Health Plans as their health insurance provider. New plans will be effective on October 1, 2020.

See below for some of our benefits highlights, but for a complete benefit summary of each plan, please visit the school district benefits page.

All employee group classes are eligible for a plan, including Administrative, Confidential, Licensed, and Classified.

Employees need to log in to the benefits portal to elect which health insurance option they prefer. Employees who wish to opt-out of coverage still need to sign in to the portal and follow the instructions for waiving coverage.

How to enroll

To get started, use the West Linn-Wilsonville School District BenefitElect enrollment system.

Log in

PacificSource HEALTH PLANS

Find a: Doctor | Drug

Search

Shop Plans · Members · Producers · Providers · Resources · Careers · Contact Us · Log in

Quick links to popular benefits

Getting care

Mail order pharmacy

Maximize my Rx savings

Vision

Connect to care options, including our Provider Search and educational videos.

Online Tools

Sign up for InTouch

Download our app:

GET IT ON Google Play · Available on the App Store

Connect to our Member InTouch Portal log in page and print temp ID cards.

Flexible Spending Account

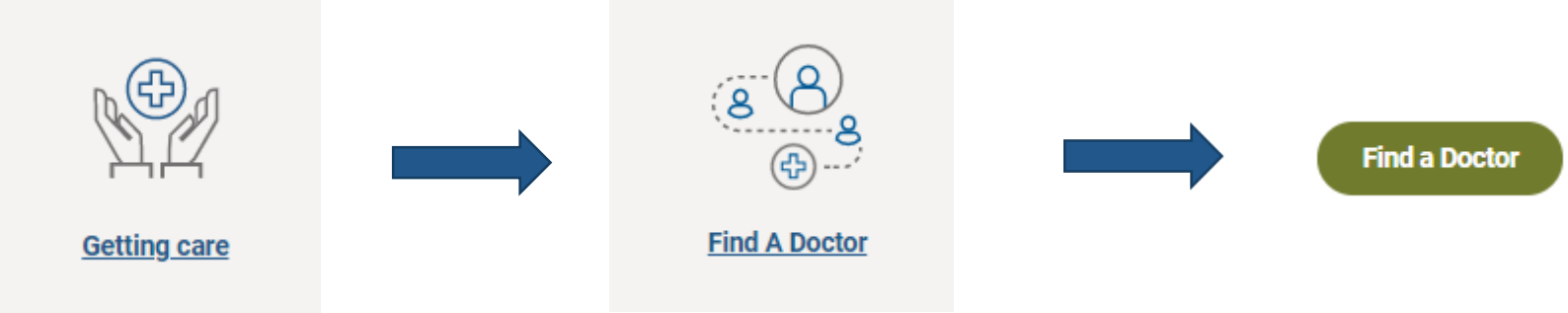
From our affiliate organization, PacificSource Administrators

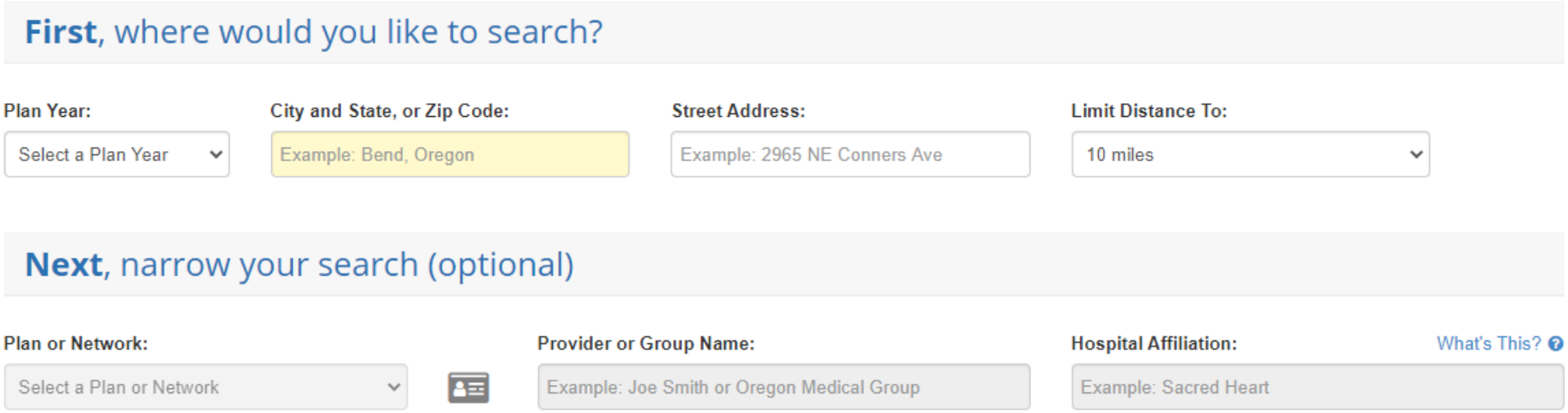
Download our app:

GET IT ON Google Play · Available on the App Store

Connect to the PacificSource Administrators site for your FSA portal.

Provider Search



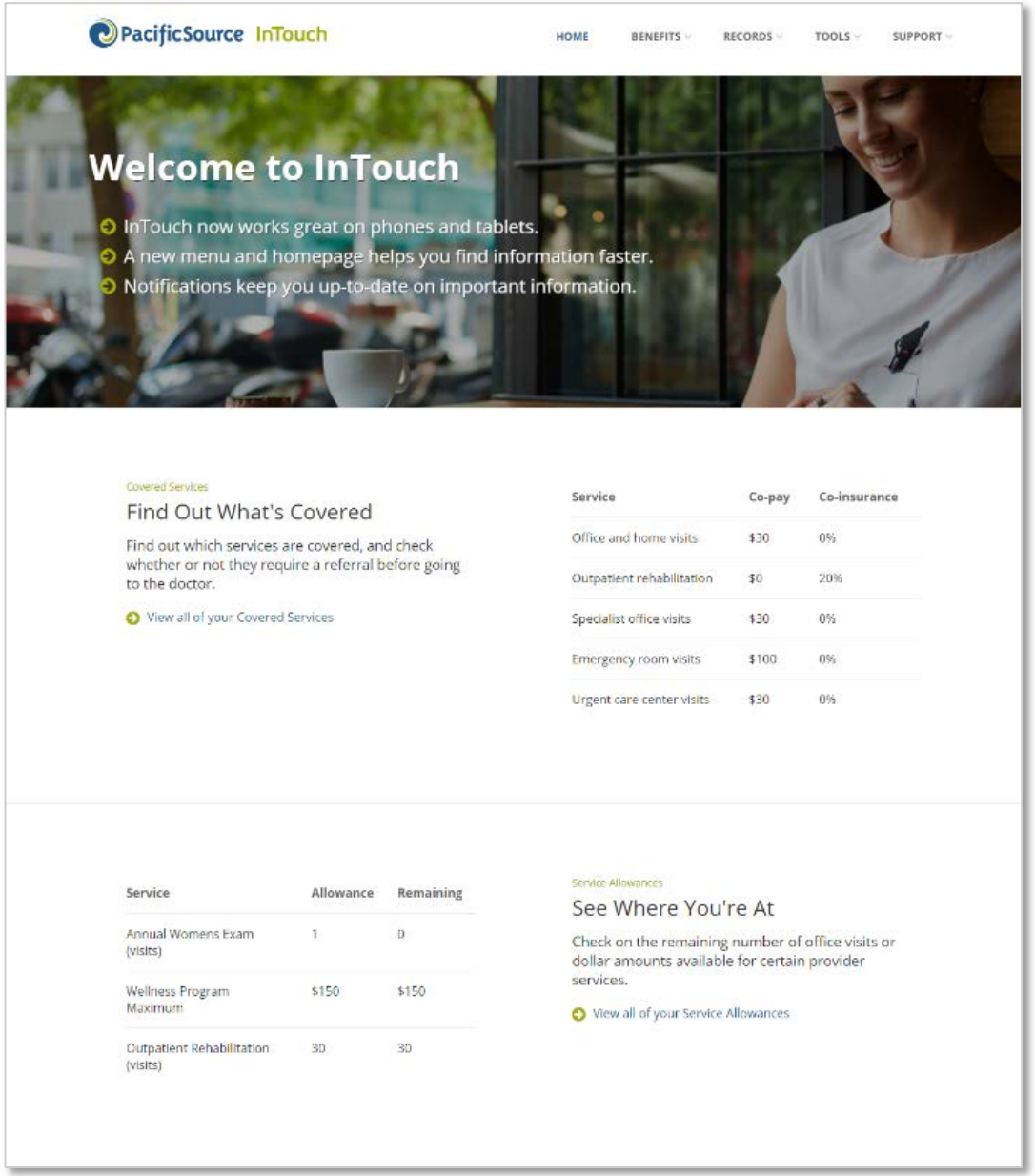


Member Services

- Online Tools
- Resources
- Additional Wellness & Care Management Programs

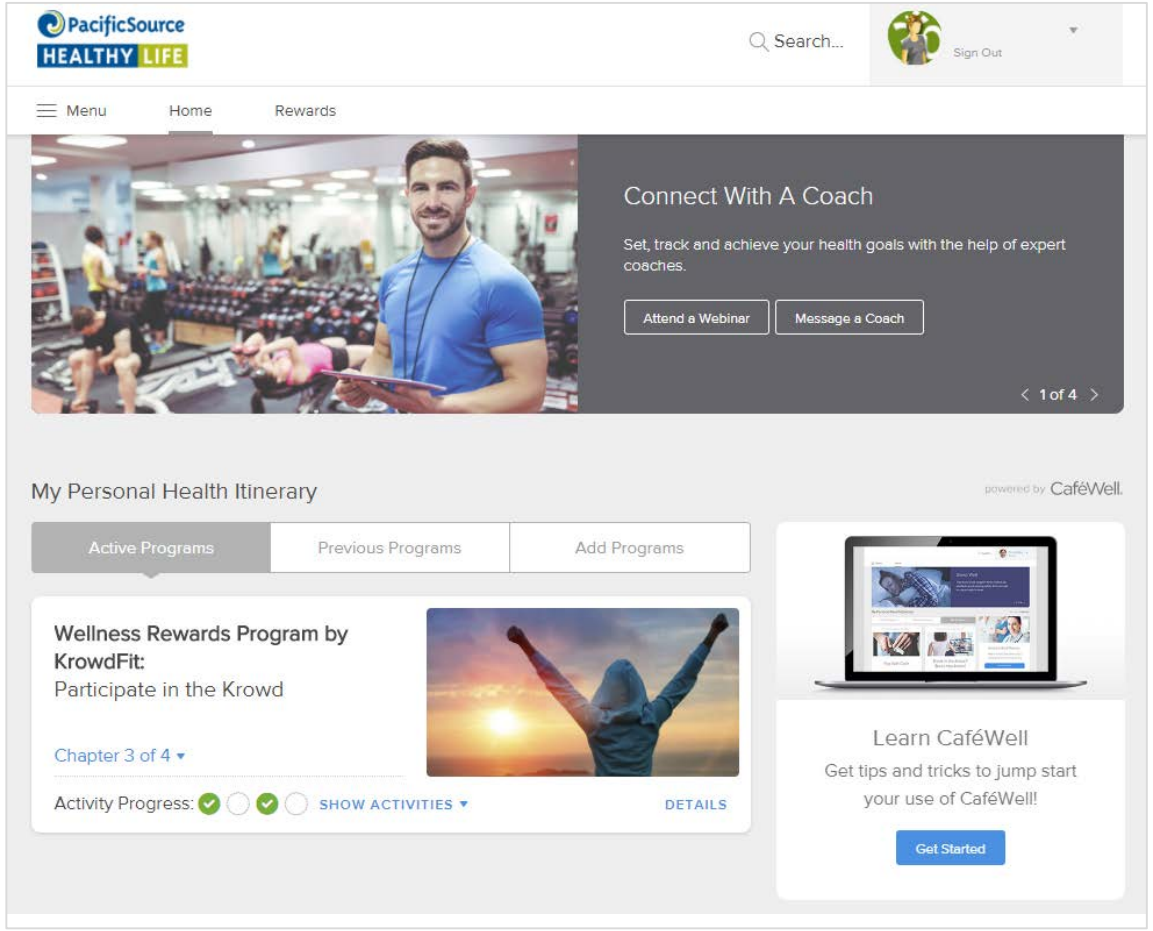
Secure online access, 24/7, with **InTouch for Members**

- Review benefits and preauthorization information
- View explanation of benefits (EOB)
- Print a temporary ID card
- Estimate medical costs
- ***Available on 10/1/2020***



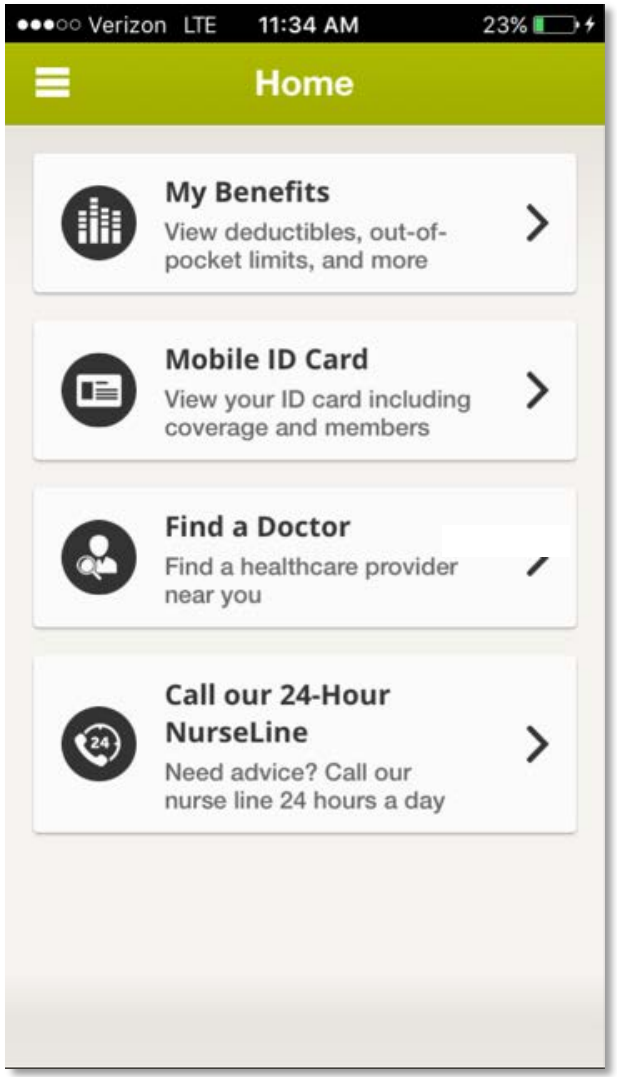
Personalized Guidance and Support through CaféWell

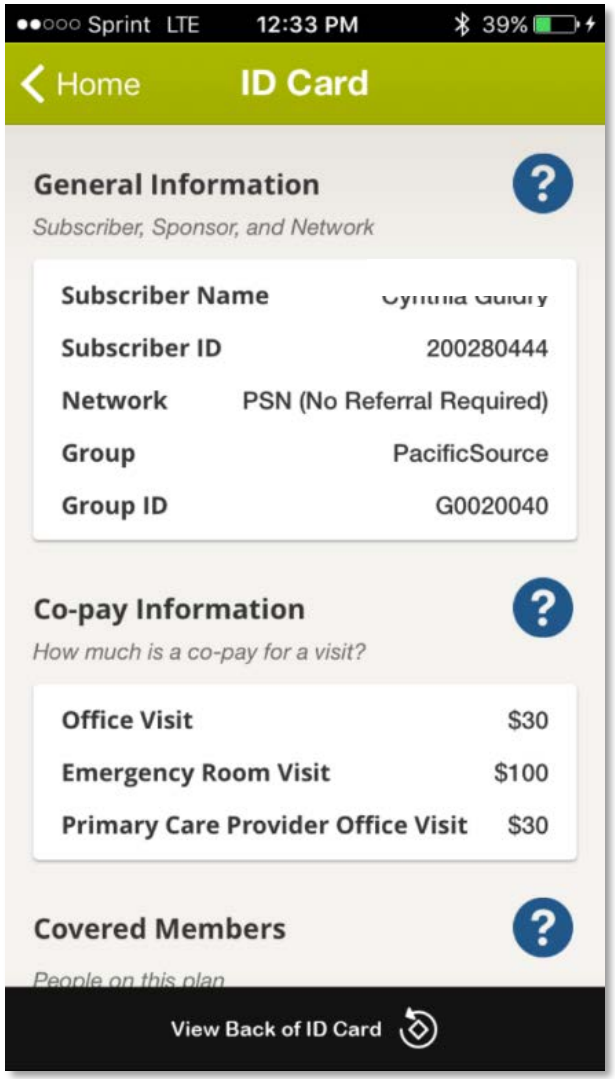
- Certified health assessment
- Personalized health resources and action plans
- Dedicated coaching
- Online community
- Health and wellness articles



Access Your Benefits, **24/7,** with **myPacificSource**

- Member ID card
- Provider directory
- Benefits Details
- Explanation of benefits
- 24-Hour NurseLine
- ***Available on 10/1/20***





Available at amazon apps

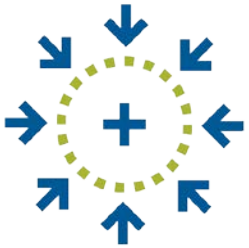
Available on the App Store

Get it on Google play

Teladoc® | Additional Access to Care

24/7/365 Access
On-demand access to board-certified providers by video, phone, or mobile app.

General Medical Care
Adult and pediatric care. Doctors may diagnose, treat, and prescribe medications (if necessary) for common health issues.



Behavioral Health Care
Treatment available for stress, anxiety, depression, addiction, and more.

Save Money
An affordable, convenient alternative to urgent care and ER visits.

How does Teladoc work?

Visit Teladoc.com to get started

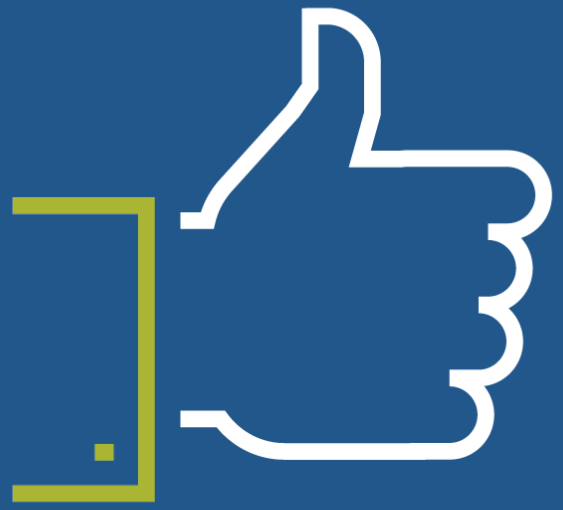
Step 1:
Set up your account. Log in to InTouch at PacificSource.com. Find the Teladoc Remote link under Tools.

Step 2:
Complete medical history, and request a visit.

Step 3:
Talk with a doctor, and resolve the issue.

Additional Wellness & Care Management Programs

- Hospital Based Education (Reimburses up to $150 annually)
- 24-Hour NurseLine
- Quit For Life® tobacco cessation
- Weight Watcher/Jenny Craig
- Prenatal Program
- Care Coordination/Condition Support
- Active & Fit Direct



PacificSource Contacts

- Email:
  - wlwv@pacificsource.com
- Phone:
  - 971-222-1054
  - 888-735-2382
- Website:
  - www.pacificsource.com/members/groups/WLWSD

Available as of August 1st to assist with transition

Healthy together

Care and coverage that fit your life

2020 Open Enrollment Presentation for

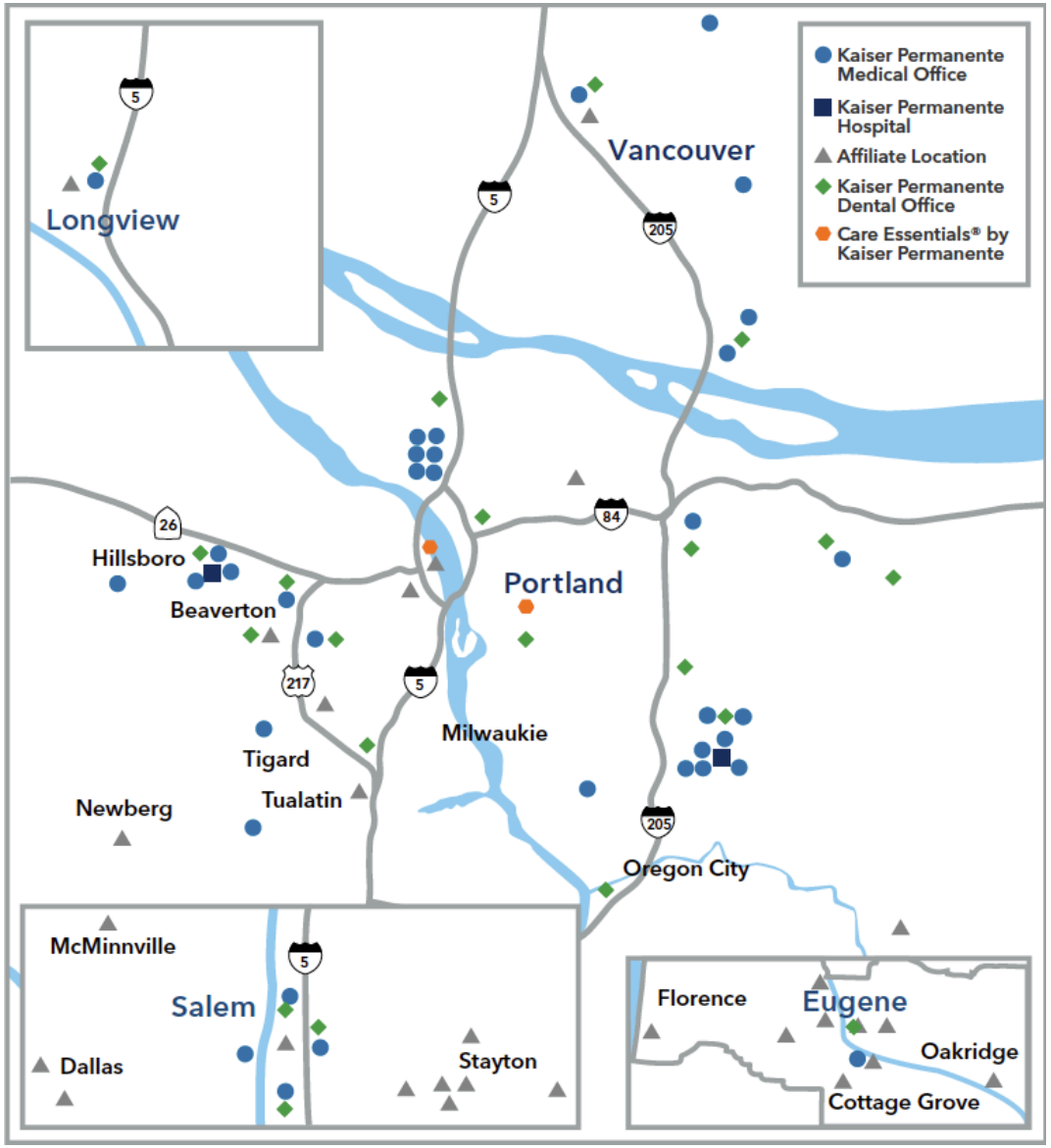
West Linn Wilsonville School District

KAISER PERMANENTE®

10 HOSPITALS

21 DENTAL CLINICS

47 MEDICAL OFFICES



KAISER PERMANENTE®

GETTING **CARE**

ONLINE

- E-visits
- Secure email
- Video visits
- Online resources

BY PHONE

- 24/7 medical advice
- Phone visits

IN PERSON

- Primary and specialty care
- Care Essentials by Kaiser Permanente
- Urgent care
- Emergency care

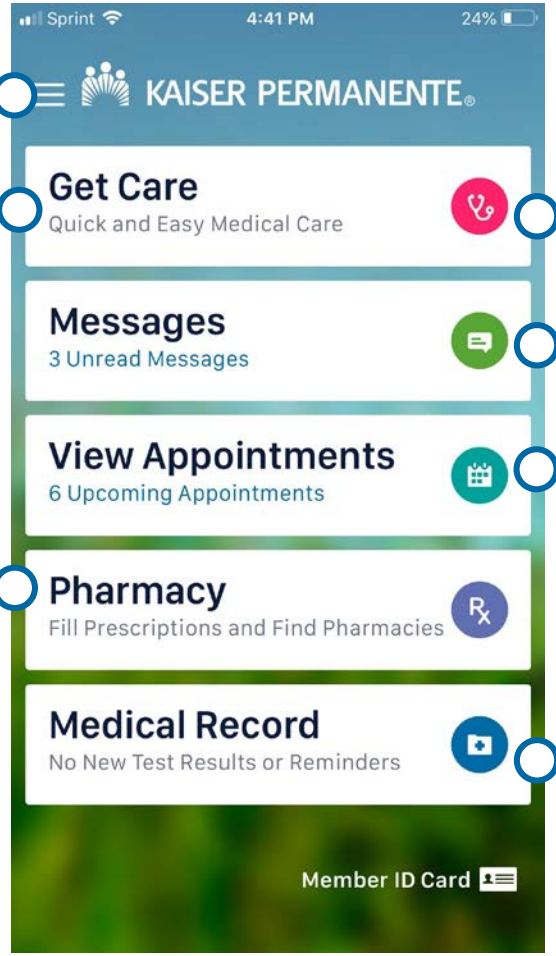
Download the app: **m.kp.org**

MORE HEALTH. **LESS HASSLE.**

View your bill, make a payment, and see payment history.

Start an e-visit with a Kaiser Permanente doctor and get a treatment plan — including prescriptions — in less than an hour.

Order prescription refills and view current medications.



Get **online care,** get **care by phone,** or schedule **in-person care** with a care provider.

Email your doctor's office with routine questions or check your messages — wherever you are.

Make routine appointments for yourself and your family with easy-to-use scheduling tools.

View your medical record and check most test results.

KAISER PERMANENTE®

Tap into the power of self-care.

Adult members can download 2 popular apps at **kp.org/selfcareapps**

These apps can help you build resilience, set goals, and take meaningful steps toward becoming healthier and happier. Choose the areas you want to focus on – including managing depression, reducing stress, improving sleep, and more.

- ☑ Evidence-based and proven effective
- ☑ Hand-picked by Kaiser Permanente physicians
- ☑ Confidential and easy to use

Calm

Calm is an app for daily use that uses meditation and mindfulness to help lower stress, reduce anxiety, and improve sleep quality. With guided meditations, programs taught by world-renowned experts, sleep stories narrated by celebrities, mindful movement videos, and more, Calm offers something for everyone.

The Calm app is not available to KP Washington members at this time.

myStrength

myStrength offers personalized programs with interactive activities, daily health trackers to monitor and maintain your progress, in-the-moment coping tools, and more. It's designed to help you set goals and work towards them in ways that work for you – by making positive changes that support your mental, emotional, and overall well-being.

myStrength® is a wholly owned subsidiary of Livongo Health, Inc.

Get the apps at **kp.org/selfcareapps**.

KAISER PERMANENTE®

Medical Benefits – Classified

Yearly deductible	$0 individual / $0 family
Maximum yearly out-of-pocket costs	$600 individual / $1,200 family
Covered service	**You pay**
Preventive care	$0 copay
Primary care doctor's office visit	$10 copay
Specialty care office visit	$10 copay
Urgent care	$10 copay
Alternative care ($1,000 max benefit)	$10 copay for Acupuncture, Naturopath and Chiropractic $25 copay for Massage Therapy
Lab tests and radiology	$0 copay
Outpatient surgery	$10 copay
Hospitalization	$0 copay
Emergency care	$25 copay (waived if admitted)
Prescribed medications (30-day supply)	$10 copay per prescription

*This is a summary of some benefits and their copays and coinsurance. For specific information about your covered health plan benefits, limitations, and exclusions, including those not listed in this summary, please see your *Evidence of Coverage*.

KAISER PERMANENTE®

Dental Benefits – Classified

Yearly deductible	$0 individual / $0 family
Annual benefit maximum	N/A
Covered service	**You pay**
Dental office visit copay	$10 copay
Oral exams, X-rays, cleaning, fluoride treatments	$0 copay
Routine fillings and inlays, simple tooth extractions	$0 copay
Surgical tooth extractions, including diagnosis and evaluation	$0 copay
Full and partial dentures, relines, rebases	50% coinsurance
Orthodontic treatment	Members age 17 years and younger: First $100 of charges, then 30% coinsurance - total maximum payment of $300 per lifetime. Members age 18 years and older: N/A
Implant services	N/A

*This is a summary of some benefits and their copays and coinsurance. For specific information about your covered health plan benefits, limitations, and exclusions, including those not listed in this summary, please see your *Evidence of Coverage.*

KAISER PERMANENTE®

THANK YOU

Member Services:
1-800-813-2000 (TTY **711**)

kp.org/dental/nw

KAISER PERMANENTE®

Willamette
Dental Group

West Linn – Wilsonville School District

2020 – 2021 Open Enrollment

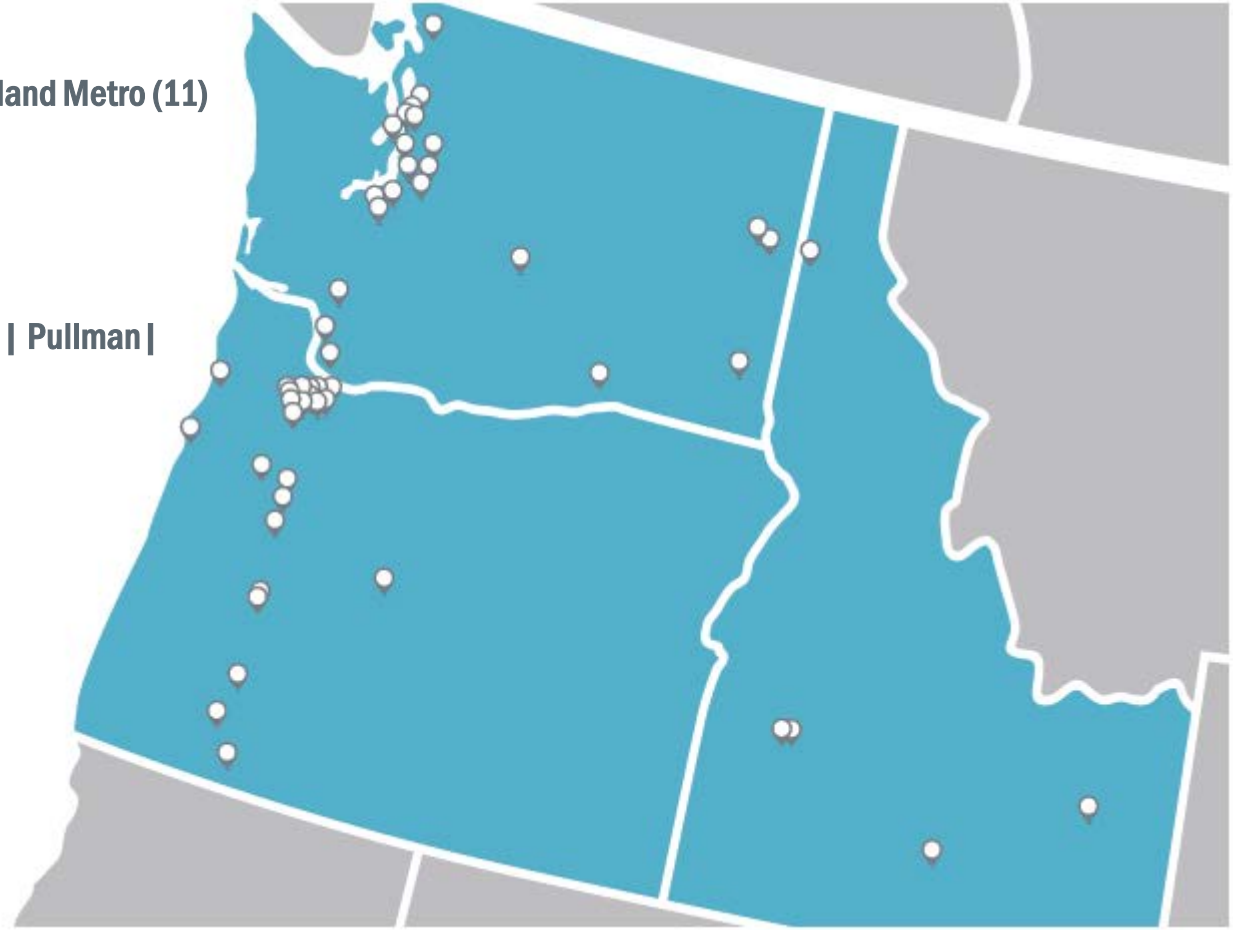
50

Office Hours:
Monday – Friday 7:00 am – 6:00 pm
& Select Saturday appointments

Oregon Albany | Bend | Corvallis | Eugene | Grants Pass | Lincoln City | Medford | Portland Metro (11) | Roseburg | Salem (2) | Springfield (2)

Washington Bellevue | Bellingham | Everett | Kent | Longview | Lynnwood | Olympia | Pullman | Puyallup | Richland | Seattle (3) | Silverdale | Spokane (2) | Tacoma | Tumwater | Vancouver (2) | Yakima

Idaho Boise | Coeur d'Alene | Idaho Falls | Meridian | Twin Falls



- No annual maximum
- No deductible
- No waiting period
- Predictable copays for all covered services
- Low out-of-pocket costs for members
- Orthodontic benefit for all ages

SUMMARY OF BENEFITS

West Linn-Wilsonville School District – OR260 – 10/1/2020

Willamette Dental Group

COVERED BENEFITS	COPAYS
Annual Maximum	No Annual Maximum*
Deductible	No Deductible
General or Orthodontic Office Visit	$10 per Visit
DIAGNOSTIC & PREVENTIVE SERVICES	
Routine & Emergency Exams	Covered with the Office Visit Copay
X-rays	Covered with the Office Visit Copay
Teeth Cleaning	Covered with the Office Visit Copay
Fluoride Treatment	Covered with the Office Visit Copay
Sealants (per Tooth)	Covered with the Office Visit Copay
Head and Neck Cancer Screening	Covered with the Office Visit Copay
Oral Hygiene Instruction	Covered with the Office Visit Copay
Periodontal Charting	Covered with the Office Visit Copay
Periodontal Evaluation	Covered with the Office Visit Copay
RESTORATIVE DENTISTRY	
Fillings	Covered with the Office Visit Copay
Porcelain-Metal Crown	Covered with the Office Visit Copay**
PROSTHODONTICS	
Complete Upper or Lower Denture	Covered with the Office Visit Copay**
Bridge (per Tooth)	Covered with the Office Visit Copay**
ENDODONTICS & PERIODONTICS	
Root Canal Therapy - Anterior	Covered with the Office Visit Copay
Root Canal Therapy - Bicuspid	Covered with the Office Visit Copay
Root Canal Therapy - Molar	Covered with the Office Visit Copay
Osseous Surgery (per Quadrant)	Covered with the Office Visit Copay
Root Planing (per Quadrant)	Covered with the Office Visit Copay
ORAL SURGERY	
Routine Extraction (Single Tooth)	Covered with the Office Visit Copay
Surgical Extraction	Covered with the Office Visit Copay
ORTHODONTIA TREATMENT	
Pre-Orthodontia Treatment	$150***
Comprehensive Orthodontia Treatment	$1,500
DENTAL IMPLANTS	
Dental Implant Surgery	Implant benefit maximum of $1,500 per calendar year
MISCELLANEOUS	
Local Anesthesia	Covered with the Office Visit Copay
Dental Lab Fees	Covered with the Office Visit Copay
Nitrous Oxide	$40
Specialty Office Visit	$30 per Visit
Out of Area Emergency Care Reimbursement	You pay charges in excess of $100

*Benefits for implant surgery have a benefit maximum, if covered. **Dental implant-supported prosthetics (crowns, bridges, and dentures) are not a covered benefit. ***Copay credited towards the Comprehensive Orthodontia Treatment copay if patient accepts treatment plan.

WE'RE DIFFERENT – A UNIQUE APPROACH TO ORAL HEALTH

- Willamette Dental Group's practice philosophy focuses on proactive dental care.
- Proactive care means focusing on preventing disease rather than treating it surgically.
- This is achieved by practicing evidence-based dentistry

DENTIST RATINGS & PROFILES

- Patient feedback ratings and comments online for each dentist
- Press Ganey® Certified
- Over 4.5 average star rating

★★★★☆ **4.5** out of 5

Edwin U Chung, DDS

General Dentist

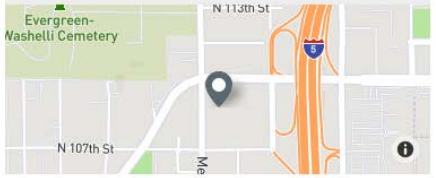
★★★★☆ **4.7** out of 5 | 310 Ratings, 55 Comments

By Appointment Only
To schedule an appointment, call:
1-855-4DENTAL (1-855-433-6825)

Willamette Dental Group
Seattle - Northgate

2111 N Northgate Way
Suite 100
Seattle, WA 98133

Get Directions



Dr. Edwin Chung's Biography

Dr. Chung is proud of his service in the armed forces after dental school. When he learned about Willamette Dental Group's approach to dentistry, that was something he wanted to be a part of as well. Within the company's group practice setting, he can work and share with amazing dentists and specialists as they strive toward one common goal of making patients healthier. He can still remember when his father, also a practitioner, taught him about dentistry so many years ago, bringing him to work and sharing his daily routine.

On days off he enjoys running and exercise, pastimes that both refresh and energize.

Education

- Loma Linda University - Dental School

Professional Associations

- American Dental Association
- Snohomish County Dental Society
- Washington State Dental Association

Patient Satisfaction Survey Results

Our patient rating scores represent an average of all responses from actual Willamette Dental Group patients randomly surveyed by nationally-recognized patient experience firm, Press Ganey. Learn more about our patient reviews

PRESS GANEY DATA INTEGRITY CERTIFIED

VISIT WILLAMETTEDENTAL.COM

Explore our website to find information about our locations, provider profiles and patient reviews.

SCHEDULE YOUR APPOINTMENT

Call to schedule your new patient appointment at 1.855.433.6825. Appointments are available within days or weeks – we can't wait to meet you!

M-F: 7:00 am – 6:00 pm / Sat: 7:00 am – 4:00 pm

For dental emergencies call 24 hrs/7 days a week

QUESTIONS ABOUT YOUR BENEFITS?

Contact Member Services at 855.433.6825 or memberservices@willamettedental.com

Member Services Hours: M-F: 8:00 am – 5:00 pm

WEST LINN WILSONVILLE SD

GROUP DENTAL AND VISION

EFFECTIVE 10/1/2020

Ameritas
fulfilling life

DENTAL PLAN CLASSIFIED

Plan Benefit	Varies by Date of Enrollment and Number of Years Enrolled
Type 1	70/80/90/100%
Type 2	70/80/90/100%
Type 3	50%
Deductible	$0/Calendar Year
Annual Benefit Maximum (Per Person)	$1,500 Per Calendar Year
Waiting Period	None
Annual Open Enrollment	None

NEW! VOLUNTARY EYEMED VISION PLAN WILL BE INSURED BY AMERITAS

	EyeMed Insight Network	Out of Network
Deductibles	$10 Exam $25 Glass Lenses or Frames	No deductible
Annual Eye Exam	Covered in full	Up to $35
Lenses (per pair)		
Single Vision	Covered in full	Up to $25
Bifocal	Covered in full	Up to $40
Trifocal	Covered in full	Up to $60
Lenticular	20% discount	No benefit
Progressive Lenses Standard Premium (Allowance) Tier 1 Tier 2 Tier 3 Tier 4	 $65 + lens deductible Premium: 10% off retail $85 + lens deductible $95 + lens deductible $110 + lens deductible $65 plus 80% of charge less $120 allowance	 Up to $40 Up to $40 Up to $40 Up to $40 Up to $40 Up to $40 Up to $40
Contacts Fit & Follow up Exams Standard Premium (Allowance) Elective Medical Necessary	 Member cost up to $40 10% off retail Up to $130 Covered in full	 No benefit No benefit Up to $104 Up to $200
Frame Allowance	$130	Up to $65
Frequencies (months) Exam/Lens/Frame	12/12/24 Based on date of service	12/12/24 Based on date of service

SEE IF YOUR DENTIST IS IN OUR NETWORK

- Visit www.Ameritas.com and select "find a provider", then choose option Dental.
- For Dental, enter all or part of the address you would like to search from. You must enter at least the City+State, Zip, or County/Parish+State. This will display a maximum of 200 providers for each search.

FIND AN EYEMED PROVIDER:

- Go to eyemedvisioncare.com
- Or call 1-866-289-0614
- EyeMed Customer Care Center:
- 1-866-289-0614
- ☐ Service representative hours: 8 a.m. to 11 p.m. ET Monday through Saturday, 11 a.m. to 8 p.m. ET Sunday
- ☐ Interactive Voice Response available 24/7
- Visiting a network provider, simply tell them you are a EyeMed member. The provider will handle the rest.
- Out-of-network providers, you may need to pay the provider, get a itemized receipt and submit it along with a claims form for reimbursement.

Online Member Capabilities

- <u>Online Benefits Center - Example</u>
  - Fast access to their specific benefits information including:
    - Summary plan description
    - Access to EOB's
    - Print ID cards online
    - View remaining maximum and coinsurance levels.
    - Individual Oral Health Report Card
- <u>Online benefits plan recording</u>
- Wellness Information

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SERVICE HIGHLIGHTS

- Call center located in Nebraska
  - 1-800-659-2223
- Extended customer service hours:
  - Monday through Thursday: 7 am to Midnight
  - Friday: 7am to 6:30pm Central Time
- 93.4% of calls answered in 30 seconds or less; average speed to answer – 9 seconds
- Spanish speaking customer service
- Multilingual interpretation service enabled

Flexible Spending Accounts

- Maximum annual elections for 2020-2021
  - Health Care FSA: $2,750
  - Dependent Care Assistance Program: $5,000 per household

- Claims from 2019-2020 must be submitted by December 31, 2020
- Up to $500 of your 2019-2020 Health Care FSA funds can roll over

PacificSource Administrators Contacts

- Email:
    - psacustomerservice@pacificsource.com
- Phone:
    - 541-485-7488
    - 800-422-7038
- Website for forms & materials:
    - https://psa.pacificsource.com/Forms_Flex.aspx

Employee Assistance Program

A **FREE** and **CONFIDENTIAL** service for employees and their family members to get help for a wide range of personal problems.

call: 800-433-2320 text: 503-850-7721 email: info@cascadecenters.com

Cascade Centers

Who’s eligible?

- All Employees
- Family members/ dependents eligible for benefits
- Domestic Partners
- Dependents up to 26 years old
- Family members can contact EAP on their own
  - Provide employee’s name, job title, and birth date

EAP service summary

Free and confidential

Personal consultation with an EAP professional
Up to **six (6)** counseling sessions per incident, per year

Crisis counseling 24/7/365

Work / Family / Life
Childcare, eldercare, resource retrieval, identity theft services

Financial coaching

Home ownership program

Legal
Consultations/mediation, will kit, online legal tools

Tax preparation

EAP tools
Life coaching
Gym membership discounts
Pet insurance discounts

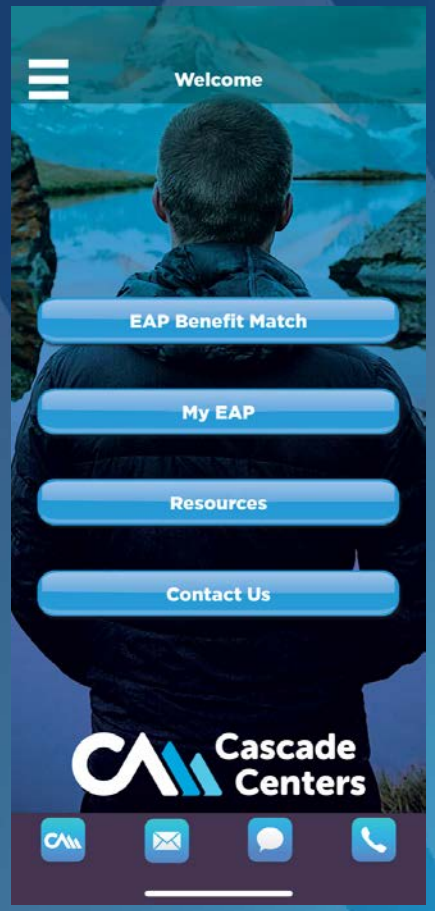
EAP Member Site:
Cascade Personal Advantage

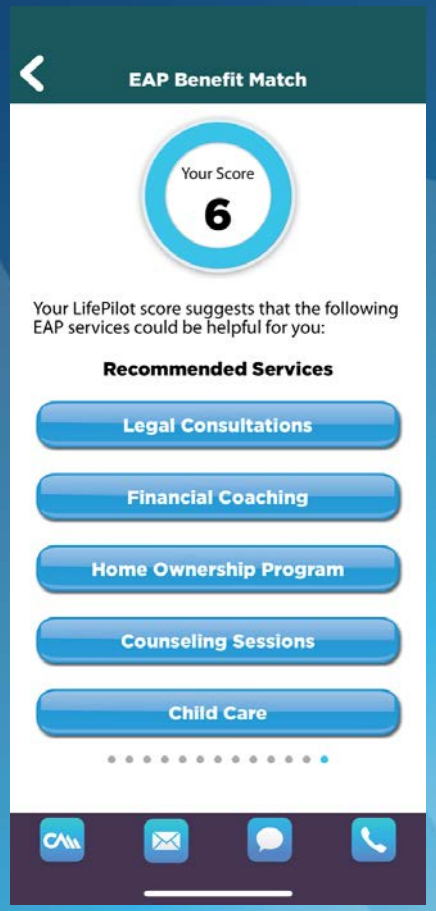
call: 800-433-2320 text: 503-850-7721 email: info@cascadecenters.com

Cascade Centers

EAP Mobile App

- Chat for support
- View EAP services
- View your EAP member site
- Access articles and resources
- Access Cascade's social media
- Connect to EAP Services
- Take the EAP Benefit Match Quiz





EAP Member Site

- Self-Assessments
- Articles
- Videos
- Quizzes
- Courses
- Webinars
- Legal and Tax Forms
- Over 140 online calculators
- FAQs

call: 800-433-2320 text: 503-850-7721 email: info@cascadecenters.com

Cascade Centers

Have any questions?

If you have any questions or if you would like additional information, please contact Cascade EAP.
Call: 800-433-2320
Text: 503-850-7721
www.cascadecenters.com