



Member Welcome Kit





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Are you scheduling a CT, MRI, PET scan or surgical procedure?



WellNet Healthcare has arrived

Welcome to WellNet! We're so glad you're here.

WellNet Healthcare is **hyperfocused on the needs of our members** (wonderful people like you!) to deliver an exceptional member experience - *always*.

Exceptional meaning: simplified, accessible, comfortable and supportive.

You and your family have **access to the best and most efficient tools** - *powered with high-touch guidance to navigate the often complex health insurance process.*

The WellNet Advocacy Team is at-the-ready - a phone call (or email) away to support every unique healthcare journey.

Inside this Welcome Kit is the essential information to kickstart your WellNet Healthcare plan.

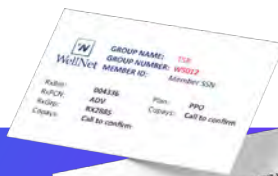
Dive in and **learn how to leverage** all of your plan benefits, offerings and individualized services.

What's next?



Enter the Member Portal

Go to **wellnet.com**
or download the
WellNet Healthcare app.



Get your WellNet ID

Your physical ID will
arrive in the mail shortly.

If you wish, you can
access your digital ID
through the member
portal or mobile app.



Ask us anything

We are here to help!
Contact us for any
questions

800-727-1733
advocacy@wellnet.com

TEMPORARY MEMBER ID CARD

COVERAGE EFFECTIVE AS OF:

GROUP NAME:

GROUP NUMBER:

Coverage Verification

Third Party Administrator: **WellNet.**

Access the **WellNet Provider Portal** at wellnet.com or call WellNet at **866-902-3017** to verify coverage, copays, eligibility and benefits.
Provider Network: **Aetna Choice POS II**

Claims

Mail ALL Claims to:

WellNet
P.O. BOX 853921
Richardson, TX, 75085
Electronic Payor ID # 41124

Pre- Certification

Precertification requirements vary by plan. ***Failure to comply with precertification requirements may result in a reduction of benefits.***

To pre-certify call
866-902-3017



RxBIN: **004336**
RxPCN: **ADV**
RxGRP: **RX2873**

Member name:
Member ID: **Member SSN**
Copays: **Call to confirm**

SUBMIT ALL CLAIMS TO:

Aetna
P.O. Box 853921
Richardson, TX. 75085
Electronic Payor ID # 41124

WellNet manages and administers the health plan. Call WellNet:

Member Service: **800-727-1733**

Provider Service: **866-902-3017**

Pharmacy Helpline: **800-345-5413**

Member Portal - www.wellnet.com/login

Provider Portal - www.WellNet.com, click provider portal log in.

Failure to comply with your plan's pre-certification requirements may result in a reduction of benefits.

TEMPORARY MEMBER ID CARD

COVERAGE EFFECTIVE AS OF:

GROUP NAME:

GROUP NUMBER:

Coverage Verification

Third Party Administrator: **WellNet.**

Access the **WellNet Provider Portal** at wellnet.com or call WellNet at **866-902-3017** to verify coverage, copays, eligibility and benefits.
Provider Network: **Cigna PPO**

Claims

Mail ALL Claims to:

Cigna
P.O. Box 188061
Chattanooga, TN, 37422
Electronic Payor ID # 62308

Pre- Certification

Precertification requirements vary by plan. ***Failure to comply with precertification requirements may result in a reduction of benefits.***

To pre-certify call
866-902-3017



RxBIN: **004336**
RxPCN: **ADV**
RxGRP: **RX20BJ**

Member name:
Member ID: **Member SSN**
Copays: **Call to confirm**

SUBMIT ALL CLAIMS TO:

Cigna
P.O. Box 188061
Chattanooga, TN, 37422
Electronic Payor ID # 62308

WellNet manages and administers the health plan. Call WellNet:

Member Service: **800-727-1733**

Provider Service: **866-902-3017**

Pharmacy Helpline: **800-345-5413**

Member Portal - www.wellnet.com/login

Provider Portal - www.WellNet.com, click provider portal log in

Failure to comply with your plan's pre-certification requirements may result in a reduction of benefits.

TEMPORARY MEMBER ID CARD

COVERAGE EFFECTIVE AS OF:

GROUP NAME:

GROUP NUMBER:

Coverage Verification

Third Party Administrator: **WellNet.**

Access the **WellNet Provider Portal** at wellnet.com
or call WellNet at **866-902-3017** to verify coverage,
copays, eligibility and benefits
Provider Network: **Open Access**

Claims

Mail ALL Claims to:

WellNet
P.O. Box 9201
Austin, TX, 78766
Electronic Payor ID # 74328

Pre- Certification

Precertification requirements vary by
plan. ***Failure to comply with
precertification requirements may
result in a reduction of benefits.***

**To pre-certify call
866-902-3017**



RxBIN: **004336**
RxPCN: **ADV**
RxGRP: **RX20BJ**

Member name:
Member ID: **Member SSN**
Copays: **Call to confirm**

SUBMIT ALL CLAIMS TO:

WellNet
P.O. Box 9201
Austin, TX, 78766
Electronic Payor ID # 62308

WellNet manages and administers the health plan. Call WellNet:

Member Service: **800-727-1733**

Provider Service: **866-902-3017**

Pharmacy Helpline: **800-345-5413**

Member Portal - www.wellnet.com/login

Provider Portal - www.WellNet.com, click provider portal log in

Failure to comply with your plan's pre-certification requirements may result in a reduction of benefits.



With the WellNet portal, healthcare is at your fingertips

One place. **Lots of features.**



Print or Order
an ID card



Access claim
information



Check deductible
and out of pocket
accumulators



Review your
Benefits



Print your
Explanation of
Benefits (EOB)



Chat with
Advocates



Get provider
information



Access our
Pricing Tool

And much more!

Enjoy WellNet

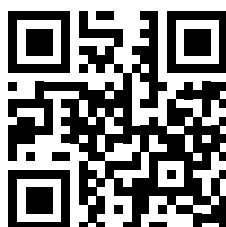
Log in to your
account and get
24/7 access to all
your benefit.

Create your account

It's simple to register.
Fill in the required
information & you're
good to go!

Enter the portal

Register for member
portal access. If you
haven't received
your member ID yet,
you can use your SSN.



Scan this QR code and
see **WellNet in action!**



Provider Reference Sheet

Headed to your healthcare provider or scheduling a medical test?

With **this document**, it's **easy for any office to find** the necessary information about your WellNet plan.

Have a **printed copy** of this with you (or take a picture on your phone!)

Group Name:

Group Number:



Confirm Eligibility and Benefits

24/7 access at
www.wellnet.com
Click on "Provider Portal" button. No need to pre-register.
Have ready: Your provider tax ID number, member ID or Social Security number, member name, member gender and member date of birth.

Call or Email WellNet:
Provider Services: 866-902-3017
providerservices@wellnet.com
(response within 2 business days)



Medical Coverage

Third Party Administrator:
WellNet

Provider Network:



Medical Claims Submission

Electronic Payor ID#:

Name:

Address:



Prescription Prior Authorizations

Certain medications require prior authorization before they are filled at a pharmacy.

To confirm, call



Precertification

Precertification requirements vary by plan. Failure to comply with precertification requirements may result in reduction of benefits.

To pre-certify, call: 866-902-3017



Where To Go For Care

We help you **find the right kind of care** - *quickly, easily and affordably.*

CONDITIONS	TELEMEDICINE	PRIMARY CARE	URGENT CARE	EMERGENCY ROOM
	24/7 DOCTOR CARE	APPOINTMENT REQUIRED	IMMEDIATE ATTENTION	EMERGENCY CARE
	Within Minutes Response Time	30 Minute or More Wait Time	Less than 1 Hour Wait Time	Longest Wait Time
	Telephone or Video Appointments	Office Visit or Virtual Consultations	Walk-In Care	Walk-In Care
	\$	\$\$	\$\$\$	\$\$\$\$
	Allergies	Annual Well Exams	Accidents and Falls	Chest Pain, Pain in Arm or Jaw
	Cold & Flu Symptoms	Routine Health Screenings	Sprains or Strains	Shortness of Breath
	Respiratory Infections	Hypertension Management	Minor Fractures	Severe Head, Neck, or Back Injuries
	COVID-19 Symptoms	Diabetes Management	Diagnostic Services - X-rays and Lab Work	Numbness or Weakness of Limbs, Slurred Speech, or Confusion
	Ear Pain	Asthma Management	Wounds Requiring Sutures, No Excessive Bleeding	Seizures
	Headache	Depression or Anxiety	Mild to Moderate Asthma Attacks	Loss of Consciousness
	Insect Bites	Immunizations	Vomiting, Diarrhea, or Dehydration	Compound Fractures (Bone Protruding Through Skin)
	Pink Eye	Ear Pain	Mild to Moderate Abdominal Pain	Severe Abdominal Pain
	Rashes	Urinary Tract Infection	Skin Rashes and Infections	Moderate to Severe Burns

Contact us whenever you need guidance and support. Finding the **right provider is critical** to ensure high-quality, affordable care - **let us help!**

800-727-1733 | advocacy@wellnet.com

Monday through Friday, 8:30 a.m. to 7:00 p.m. EST.

Pro Tip! Remember, you have 24/7 access to telehealth providers. Visit wellnet.com or call **800-TELADOC (835-2362)**



Putting you & your family first. **Always.**

At WellNet, it's our job to **help you make the best healthcare decisions** for you & your family.

It all begins with thoughtful **guidance** - working with our **WellNet Advocacy Team** to navigate & simplify the (oftentimes!) complex healthcare process.

WellNet members save money & improve outcomes when they call an advocate for guidance & decision support.



What we do

We're here to help you:



Locate **quality medical providers.**



Provide you with a **detailed description of all the benefits** available to you.



Help you with claims & billing inquiries.



Provide assistance with **high cost specialty drug prescriptions** - saving you money.



Help you manage your care and optimize your health outcomes.



Provide you with assistance in **scheduling MRI, CT, PET scan or Surgical Procedure.**

And much more!

What you can do

Contact WellNet Advocacy to understand all of your available benefits, find a provider, schedule appointments & access assistance for high-cost specialty drugs.

Keep call 800-727-1733 or send an email to advocacy@wellnet.com

Download the WellNet Healthcare App





Notice of Privacy Practice

WellNet fully complies with the Health Insurance Portability and Accountability Act (HIPAA). The law **requires us to maintain the privacy** of your Protected Health Information (PHI), to provide you with this notice of its legal duties and to abide by the terms of this notice.

We do not share your PHI with your employer or any other third party except under circumstances expressly permitted by the law. This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

The terms “information” or “health information” in this notice include any information we maintain that reasonably can be used to identify you and that relates to your physical or mental health condition, the provision of healthcare to you or the payment for such healthcare.

We have the right to change our privacy practices and the terms of this notice. If we make a material change to our privacy practices, we will provide to you a revised notice by direct mail or electronically as permitted by applicable law. We reserve the right to make any revised or changed notice effective for information we already have and for information that we receive in the future.

Acceptable Use and Disclosure of Your Information

Treatment:

WellNet does not provide medical treatment directly, but it may disclose your PHI to a healthcare provider who is giving treatment. **For example**, WellNet may disclose the types of prescription drugs you currently take to an emergency room physician if you are unable to provide your medical history due to an accident.

Payment:

WellNet may disclose your PHI, as needed, to process payments for your medical benefits. For example, WellNet may tell a doctor whether you are eligible for coverage or what percentage of the bill you are responsible for. WellNet may also use or disclose your PHI in other ways to administer benefits, for example, to process and review claims, to coordinate benefits with other health plans, to exercise its subrogation rights and to do utilization review and pre-authorizations.

Healthcare Operations:

WellNet may use and/or disclose your PHI to make sure your plan is administered properly. For example, WellNet may use information about your claims to audit the accuracy of its claims processing functions. WellNet may also disclose your PHI for a claim under a stop-loss or re-insurance policy.

Plan Sponsors:

If you are enrolled in a group health plan, WellNet may provide PHI to the plan sponsor. For instance, we may share enrollment or disenrollment information with your employer.

Health-Related Benefits and Services:

WellNet may, from time to time, contact you about treatment alternatives or other health-related benefits, products or services that may be of interest to you, and for case management or care coordination.

Business Associates:

WellNet works with companies and consultants who perform a wide variety of functions on our behalf. For example, we work with financial institutions such as agents, brokers, insurance distributors, reinsurers and excess loss insurers, non-financial institutions such as healthcare providers, detectors of fraud, auditors, insurance support organizations, claims handlers, underwriters and others such as information technology specialists and consultants.

At times it may be necessary for us to provide your PHI to one or more of these outside persons or organizations who assist us with our healthcare operations. In all cases, we require these business associates to provide written assurances to us that they will appropriately safeguard the privacy of your PHI.

Individuals Involved in Your Care or Payment:

WellNet may disclose PHI to you or other family members who are covered under your health insurance policy regarding your care or payment related to your care.

Permitted or Required by Law:

WellNet may release information when requested by law enforcement officials or when permitted or required by law. If you are involved in a lawsuit or dispute, WellNet may need to disclose PHI in response to a court or administrative order.

More Stringent Laws:

WellNet may release information when requested by law enforcement officials or when permitted or required by law. If you are involved in a lawsuit or dispute, WellNet may need to disclose PHI in response to a court or administrative order.

Your Rights

You have the right to ask to restrict uses or disclosures of your information for treatment, payment or healthcare operations. You also have the right to ask to restrict disclosures to family members or to others who are involved in your healthcare or payment for your healthcare. We may also have policies on dependent access that authorize your dependents to request certain restrictions. If you object to our disclosure of your PHI in communications with other family members covered under your group health plan, please contact Member Services toll-free at 1- 800-727-1733. The request to restrict access to your PHI must be made in writing and signed by you or your legally authorized representative.

(Please note that while we make best efforts to honor your request and will permit requests consistent with our policies, we are not required to agree to any restriction.)

You have the right to ask to receive confidential communications of information in a different manner or at a different place (for example, by sending information to a P.O. Box instead of your home address). We will accommodate reasonable requests where a disclosure of all or part of your health information otherwise could endanger you. We will accept verbal requests to receive confidential communications, but requests to modify or cancel a previous confidential communication request must be made in writing.

You have the right to see and obtain a copy of health information that may be used to make decisions about you such as claims and case or medical management records. You also may in some cases receive a summary of this health information. In certain limited circumstances, we may deny your request to inspect and copy your health information. We may charge a reasonable fee for any copies. If we deny your request, you have the right to have the denial reviewed. If we maintain an electronic health record containing your health information, when and if we are required by law, you will have the right to request that we send a copy of your health information in an electronic format to you or to a third party that you identify. We may charge a reasonable fee for sending the electronic copy of your health information.

You have the right to ask to amend information we maintain about you if you believe the health information about you is wrong or incomplete. Your request must be in writing and provide the reasons for the requested amendment. Mail your request to the address listed below. If we deny your request, you may have a statement of your disagreement added to your health information.

You have the right to a paper copy of this notice. You may ask for a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

Exercising Your Rights

Contacting WellNet:

If you have any questions about this notice or want to exercise any of your rights, please contact WellNet Member Services toll-free at 800-727-1733.

Submitting a Written Request:

Mail to us your written requests for modifying or cancelling a confidential communication, for copies of your records or for amendments to your record, at the following address:

WellNet

Attn: HIPAA Correspondence
900 Northbrook Drive, Suite 310
Trevose, PA 19053

Filing a Complaint:

If you believe your privacy rights have been violated, you may file a complaint. WellNet will not take any action against you for filing a complaint. To file a complaint, you may either:

- file a complaint with us at the address listed above
- file a complaint directly with the Secretary of the U.S. Department of Health and Human Services



Healthcare Bluebook

WellNet provides Healthcare Bluebook as a free benefit - allowing you to shop for medical procedures at in-network facilities, find the best prices and get out-of-pocket cost estimates.

It's easy! With a simple search, **find hundreds to thousands of dollars in savings** and get your cost estimate **before** scheduling care.



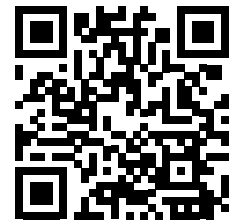
What is a Fair Price?

A Fair Price is the reasonable amount you should expect to pay for a procedure or medical service.

Check out the reverse side for an example of dramatic price differences and out-of-pocket cost estimate.

LOGIN AND FIND A FAIR PRICE!

- 1 Scan the QR code with your phone or click **here** to access **Healthcare Bluebook**. You can also get access by logging into the Member Portal at **wellnet.com**. Once inside, click on "Pricing a Procedure" in the "Healthcare" tab.



- 2 Search for your medical procedure to access price information as well as a list of in-network facilities in your area. Use the green, yellow, and red color signs to guide you to **Fair Price™** (green) facilities.

COST RATINGS



At or Below
Fair Price



Slightly Above
Fair Price



Highest
Price

GET A COST ESTIMATE

- 3 Select a **Fair Price™** (green) facility and you'll see your estimated out-of-pocket cost pertaining to the selected in-network facility as well as details correlated to your deductible.

Below you'll see an example of the huge price differences for the same procedure depending on where you go for care and a sample of an out-of-pocket estimate.

Bluebooks simple guides make it easy to navigate to in-network medical facilities in your area to find affordable healthcare and out-of-pocket costs.

Total Knee Replacement

Fair Price \$34,931

\$21,587

\$

\$55,388+

\$

At or Below Fair Price

\$\$

Slightly Above Fair Price

\$\$\$

Highest Price

GO
HERE

\$

XYZ Best Quality Hospital (~2 milles)

\$\$

XTRA Memorial Hosp (~3 miles)

\$\$\$

Too Much Medical Center (~1 mile)

NOT
HERE

Example out-of-pocket cost estimate

The average price for Total Knee Replacement with these providers:

\$23,302

Vanderbilt University Hospital

Your estimated out of pocket for this procedure:

\$3,000

Out of Pocket Balances:

Individual deductible **\$3,000** maximum:

\$1,000 spent

\$2,000 remaining



Individual out-of-pocket **\$4,000** maximum:

\$1,000 spent

\$3,000 remaining



Family deductible **\$6,000** maximum:

\$2,000 spent

\$4,000 remaining



Family out-of-pocket **\$8,000** maximum:

\$2,000 spent

\$6,000 remaining



See more procedures and costs for in-network providers by logging onto Healthcare Bluebook.

Healthcare Bluebook

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It's easy! With a simple search, **find hundreds to thousands of dollars in savings** and get your cost estimate **before** scheduling care.



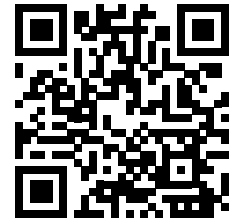
What is a Fair Price?

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Check out the reverse side for an example of dramatic price differences and out-of-pocket cost estimate.

LOGIN TO FIND THE BEST PRICE & QUALITY

- 1 Scan the QR code with your phone or click [here](#) to access **Healthcare Bluebook**. You can also get access by logging into the Member Portal at wellnet.com. Once inside, click on "Pricing a Procedure" in the "Healthcare" tab.



- 2 Search for your medical procedure to access price and quality information as well as a list of in-network facilities in your area. Use the green, yellow, and red color signs to guide you.

COST RATINGS



At or Below Fair Price



Slightly Above Fair Price



Highest Price

QUALITY RATINGS



Highest Quality



Average Quality



Lowest Quality

GET A COST ESTIMATE

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Below you'll see an example of the huge price and quality differences for the same procedure depending on where you go for care and a sample of an out-of-pocket estimate.

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\$21,587

\$

\$55,388+

✓ \$ At or Below Fair Price

✓ \$\$ Slightly Above Fair Price

✓ \$\$\$ Highest Price

✓ Highest Quality

✓ Average Quality

✓ Lowest Quality

GO
HERE

NOT
HERE

✓ \$ Excellent Outcomes Hospital (~2 miles)

✓ \$ At Your Own Risk Hospital Inc (~3 miles)

✓ \$\$\$ Only Good at Somethings Memorial Hospital (~1 mile)

Example out-of-pocket cost estimate

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Vanderbilt University Hospital

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\$1,000 spent **\$3,000** remaining

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\$2,000 spent **\$4,000** remaining

Family out-of-pocket **\$8,000** maximum:

\$2,000 spent **\$6,000** remaining

See more procedures and costs for in-network providers by logging onto Healthcare Bluebook.

+ Healthcare Bluebook

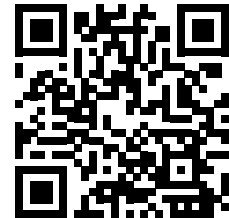
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COST RATINGS



At or Below Fair Price



Slightly Above Fair Price



Highest Price

QUALITY RATINGS



Highest Quality



Average Quality



Lowest Quality

What is a Fair Price?

A Fair Price is the reasonable amount you should expect to pay for a procedure or medical service.

Check out the reverse side for an example of dramatic price differences and out-of-pocket cost estimate.

GET A COST ESTIMATE & EARN REWARDS

- 3 Select a **Fair Price™** (green) facility and you'll see your estimated out-of-pocket cost pertaining to the selected in-network facility as well as details correlated to your deductible.

Plus, you'll earn rewards on select procedures by using Fair Price™ (green) providers.

Below you'll see an example of the huge price and quality differences for the same procedure depending on where you go for care and a sample of an out-of-pocket estimate.

Bluebooks simple guides make it easy to navigate to in-network medical facilities in your area to find affordable healthcare and out-of-pocket costs, and earn rewards.

Total Knee Replacement

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Get Reward!

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✓ Highest Quality

✓ Average Quality

✓ Lowest Quality

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HERE

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✓ \$ Excellent Outcomes Hospital (~2 miles)

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Individual out-of-pocket **\$4,000** maximum:

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Family deductible **\$6,000** maximum:

\$2,000 spent **\$4,000** remaining

Family out-of-pocket **\$8,000** maximum:

\$2,000 spent **\$6,000** remaining

See more procedures and costs for in-network providers by logging onto Healthcare Bluebook.



So many reasons to use Teladoc®



Teladoc is an **affordable option** for quality medical care - with **access to U.S. board-certified doctors anytime** (24 hours, 7 days a week).

Schedule appointments and see your doctor by phone, video or through the mobile app.



Talk to a doctor
anytime, anywhere
you happen to be



Receive quality care via
phone, video or mobile
app



Prompt treatment,
talk to a doctor in
minutes



A network of doctors
that can treat every
member of the family



Prescriptions sent to a
pharmacy of your choice
if medically necessary



Teladoc is less
expensive than the ER
or urgent care

Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
 - Allergies
 - Pink Eye
 - Respiratory infection
 - Sinus problems
 - Skin problems
- And more!*

**With your consent,
Teladoc® is happy to
provide information about
your Teladoc visit to your
primary care physician.**

Talk to a doctor anytime

 teladoc.com

 1-800-TELADOC (835-2362)

Available on the
 **Google Play**

Download on the
 **App Store**

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Get started with Teladoc®



It's quick and easy to set up your account online. Simply visit the Teladoc® website, click **"Set up account"**, and then follow the instructions below.

1. Confirm benefits

Provide some information about yourself to confirm your eligibility.

2. Benefit confirmation

We'll confirm that we found your benefits. Click **"CONTINUE"** and finish creating your account.

3. Create account

Enter your contact information, username, password, and security questions.

Talk to a doctor anytime

 teladoc.com

Download the app



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Get started with Teladoc® App



It's quick and easy to set up your account through our app. Simply download the Teladoc® app and follow the four steps you see below.

1. Confirm benefits

Provide some information about yourself to confirm your eligibility.

2. Benefit confirmation

We'll confirm that we found your benefits and you'll continue creating your account.

3. Create account

Please provide your contact information and preferred language.

4. Complete account

Create a username, password, and pick security questions to ensure your account is secure.

Talk to a doctor anytime

 teladoc.com

 **1-800-TELADOC (835-2362)**

 Available on the
Google Play

 Download on the
App Store

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Teladoc® member

Frequently Asked Questions



What is Teladoc?

Teladoc is a healthcare service that offers convenient, confidential access to quality doctors 24/7, anytime, anywhere.

By scheduling a visit with one of our U.S. board-certified and licensed medical doctors, you can be diagnosed, treated, and prescribed medication if necessary.

What can I use Teladoc for?

Teladoc can help you with everyday, nonemergency healthcare issues, including sinus problems, allergies, flu symptoms, and much more. Skip the waiting room and the trip to the ER. We're here to help you feel better, faster, and get you back to living your life.

Does Teladoc replace my doctor?

No. Teladoc doesn't replace your primary care doctor. Teladoc should be used for nonemergency illnesses when it is not convenient to get to the doctor or it is outside of regular office hours.

How do I set up my account?

Download the Teladoc app, visit the website, or call the number below to set up your account.

Do I need to have my insurance information available?

No. Teladoc is a separate benefit, and your insurance information is not required to have a visit.

How do I pay for the visit?

You can pay with your HSA (health savings account) card, credit card, prepaid debit card, or by PayPal.

Is there a time limit when talking to the doctor? And am I charged more for taking longer?

There is no time limit for visits, and there is no extra charge for longer doctor visits.

How do I access Teladoc?

The service can be accessed by app, web, or phone, and visits are available by phone or video.

If the Teladoc doctor recommends that I see my primary care doctor or a specialist, do I still have to pay the Teladoc visit fee?

Just like any doctor appointment, there is a fee for the consulting doctor's time. The portion of the fee that you will pay varies based on your benefit plan structure.

Can my family use Teladoc?

This varies depending on your specific Teladoc plan. Most plan designs allow you to use the Teladoc service for you, your spouse, and your dependents. Dependents over 18 years old must call our service center to request a visit.

For dependents under 18 years old, the primary account holder must request a visit on their behalf through the app, website, or by phone.

How much does it cost?

The cost of a Teladoc visit varies, depending on the type of visit you are requesting and your plan design. Please refer to your welcome letter, or call 1-800-Teladoc if you wish to confirm pricing prior to requesting a visit.

Who are the Teladoc doctors?

Teladoc doctors are U.S. board-certified internists, family doctors, and pediatricians. They average 20 years of experience and are licensed to practice in your state.

Can Teladoc physicians prescribe medications?

Yes, when medically appropriate, doctors can prescribe medications. If a prescription is not required, the doctor may provide the member with instructions for managing symptoms or following up with their primary care doctor.

Can my primary care doctor get a record of my Teladoc visit?

With your consent, we'll send an electronic copy of your Teladoc visit to your primary care doctor.

Can I use Teladoc while traveling?

Teladoc is available in all 50 states, so you can use the service while traveling within the United States. Some restrictions may apply.

Who should I contact if I have questions or encounter an issue?

We aim to make your experience with us as seamless as possible. If you have any further questions or encounter an issue, please visit our website at [Teladoc.com](https://www.teladoc.com) or call our member services team at [1-800-TELADOC \(835-2362\)](tel:1-800-TELADOC)

Download the app to talk to a doctor

 [teladoc.com](https://www.teladoc.com)

 [1-800-TELADOC \(835-2362\)](tel:1-800-TELADOC)

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How to read **your EOB**

Check out this sample of a standard Explanation of Benefits (EOB).

Quick Tip! This sample is for informational purposes only & not an EOB from your company.

- 1 Employee/Subscriber name and address
- 2 Plan (Employer) name and group number
- 3 Patient name and claim #
- 4 Dates of service
- 5 Amount charged by the provider
- 6 Amounts not eligible for payment with reason code and discounts
- 7 Amount that is eligible to be paid by the plan
- 8 Patient responsibilities – deductible and copayments
- 9 Amount paid by the plan
- 10 Description of service provided
- 11 Explanation of reason codes
- 12 Accumulator information – Benefit YTD applied deductible and out of pocket amounts
- 13 Details of amount paid by plan: provider paid, date of check issued, check number and amount paid.

Wellnet Healthcare
PO BOX 9201
AUSTIN TX 78766-9201

Explanation of Benefits

**RETAIN FOR TAX PURPOSES
THIS IS NOT A BILL**

Forwarding Service Requested

1 MEMBER ADDRESS INFO

2 Customer Service
Questions? Contact Customer Service at

Prepared Date:
Group #:
Group Name:

3 Claim #: Policy: MAJOR MEDICAL
Patient: Patient #:

Provider: City Medical of Upper East Sid
Employee: ALEXANDRE H. DUGOURD

Dates of Service	Serv Code	Proc Code	Charge Amount	Ineligible Amount	Reason Code	Provider Discount	Covered Amount	Deductible Amount	Co-Pay Amount	Paid At	Normal Benefit	COB ADJ	Payment Amount
05/14 - 05/14/2022	PCP	99213	\$204.00	\$0.00	P7 T1	\$62.09	\$111.91	\$0.00	\$30.00	100%	\$111.91	\$0.00	\$111.91
Column Totals			\$204.00	\$0.00		\$62.09	\$111.91	\$0.00	\$30.00		\$111.91	\$0.00	\$111.91

4 Patient Responsibility: 5 \$0.00 6 Insurance Pay 7 8 Adjustments: 9 \$0.00

10 Service Code Description
PCP OFFICE VISIT - PCP

11 Reason Code Description
P7 PHCS PPO DISC NOT BILLABLE TO PATIENT
T1 Co-Pay

12 Accumulators
\$0.00 of Individual Network Deductible met
\$0.00 of Individual Non-Network Deductible met
\$0.00 of Individual Network Out of Pocket met
\$0.00 of Individual Non-Network Out-of-Pocket met
\$0.00 of Family Network Deductible met
\$0.00 of Family Non-Network Deductible met
\$0.00 of Family Network Out-of-Pocket met
\$0.00 of Family Non-Network Out-of-Pocket met

13 Payment Details
Paid To Issue Date Check No. Amount
HEALTH CARE PROVIDER NAME 09/12/22 164847 \$111.91

Appeal Rights
A review of this benefit determination may be requested by submitting your appeal to us in writing at the following address within 180 days: Wellnet Healthcare, P.O. Box 9201, Austin, TX 78766. If you do not agree with the final determination on review, you have the right to bring a civil action under Section 502 (a) of ERISA, if applicable.

Messages
For your convenience to check claim status, eligibility, or to obtain benefit information, please contact the phone number on the back of your ID card, (800) 727-1733 for plans that access the Cigna network or (833)507-7060 for all other plans. TO FILE YOUR CLAIM ELECTRONICALLY, USE ENVOY OR THN. WellNet Healthcare's PAYER ID NUMBER IS 74238

Are you scheduling a **CT, MRI, PET scan or surgical procedure?**

If you use the recommended provider for your imaging or elective surgery, your member responsibility may be reduced. **Contact a WellNet Advocate to learn more.**

Benefits



Give you the **best options in high quality medical providers** with fair pricing in your area.



Provide you with a **detailed description of all the benefits** available to you.

Get in touch with a WellNet Advocate!



800-727-1733
Monday through Friday, 8:30 a.m. to 7:00 p.m. EST.
or advocacy@wellnet.com