



Experience data-driven health benefits administration delivered with compassion. **Experience Prairie States.** 





## **WELCOME TO PRAIRIE STATES**

We are excited to partner with the

## **School District of Howards Grove**

to administer your health benefits plan with clinical expertise and compassion.

We look forward to working with you and for you.



## A PERSONAL HEALTH EXPERIENCE



### **YOUR SERVICES**

Prairie States will administer the following services effective October 1, 2022:

- Medical Claims
- COBRA (Medical, Dental, Vision)
- Health Management
- FSA Flexible Spending



### **ABOUTUS**

- 30+ years of industry expertise
- Unique clinical approach
- Customers across the country
- Offices in Chicago, IL and Sheboygan, WI



### **SEAMLESS INTEGRATION**

By keeping all of our health management and administration services in-house, we provide seamless care and integration throughout every step of your personal health experience.



## **ONE-ON-ONE CUSTOMER SERVICE**

You have a dedicated team of in-house experts to get you the answers you need.

Service	Contact
Medical Claims Administration	Lori Copeland
Eligibility, ID Cards, and COBRA	Jess Voskuil
Pre-Certification	Kelly Kroeplien
Utilization Management	Loua Vang
Case Management	Carla O'Boyle
FSA Flexible Spending Administration	Peggy Goosen
Prairie States Contact Information	
Phone Number	(800) 615-7020
Fax Number	(920) 451-7023
My Prairie Online	www.prairieontheweb.com
Business Hours	8:30 AM to 4:30 PM CT, Monday through Friday
Office Address	615 Pennsylvania Avenue, Sheboygan, WI 53081-4642
Mailing Address	P.O. Box 23, Sheboygan, WI 53082-0023



# THE CONTINUUM OF CARE We Keep You at the Center



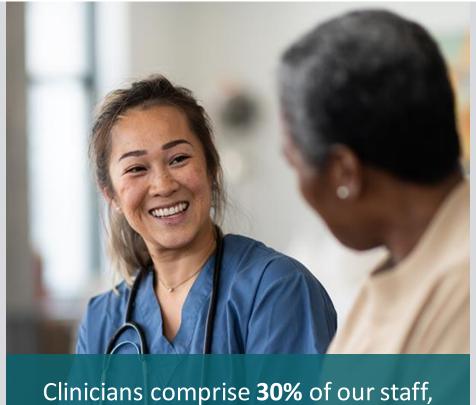


## **HEALTH MANAGEMENT PROGRAMS**



### **UTILIZATION MANAGEMENT**

 Utilization Management and Pre-Certification clinicians work closely with you and your providers to ensure you receive appropriate care and coverage in the most appropriate and cost-effective setting.



Clinicians comprise **30**% of our staff, each averaging **23** years of experience



### CASE MANAGEMENT

- Provide expertise and support when you or a family member are faced with a severe illness such as dialysis, cancer, transplants, trauma, or high-risk pregnancy
- Our nurses will also contact you after discharge from a hospital or an outpatient procedure.



## FLEXIBLE SPENDING ACCOUNT (FSA)

An FSA allows you to have money set aside from your paycheck, before taxes, to pay for eligible expenses such as health care deductibles, co-pays, prescriptions, and dependent care.



**Health Care Expenses:** Maximum contribution \$2,850



**Dependent Care Expenses:** Maximum contribution \$5,000



Online Access: View balances, submit claims, and file receipts



## PPO NETWORKS & RX PROGRAM

Your ID card will include the following Primary network arrangement:





When traveling outside your Primary network area:



**Pharmacy Benefit Manager (PBM):** 





## **HOW DO I CHOOSE?**



### **TELADOC**

Teladoc is a convenient and affordable option for quality care when you need care now, if you're considering the ER or urgent care for non-emergency issues, or if you're away from home.



### **PRIMARY CARE**

Whether you are looking for preventive care, wellness services, or guidance in managing a condition, your Primary Care Physician is in the best position to provide a comprehensive plan and coordination of care for your needs.



### **URGENT CARE**

Urgent Care facilities are typically stand-alone clinics that do not carry the expensive costs of an ER. If you are unable to see your own doctor (traveling, outside office hours, etc.) and the health issue can't wait, Urgent Care is a great alternative.



### **EMERGENCY CARE**

Emergency Room
departments are located
within hospitals and are
prepared to care for patients
suffering true emergencies
such as heart attacks, serious
motor vehicle accidents,
strokes, and other life
threatening conditions.



## ACCESS TO A DOCTOR ANYTIME, ANYWHERE

Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of phone, video or mobile app visits. Set up your account today so when you need care now, a Teladoc doctor is just a call or click away.



### **MEET OUR DOCTORS**

Teladoc is simply a new way to access qualified doctors. All Teladoc doctors:

- Are practicing PCPs, pediatricians, and family medicine physicians
- Average 20 years of experience
- Are U.S. board-certified and licensed in your state
- Are credentialed every three years, meeting NCQA standards

### **GET THE CARE YOU NEED**

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Sinus problems
- Sore throat
- Respiratory infection
- Skin problems
- And more!

### WHY TELADOC?

It is a convenient and affordable option for quality care.

- When you need care now
- If you're considering the ER or urgent care for a non-emergency issue
- On vacation, on a business trip, or away from home
- For short term prescription refills

Talk to a Doctor Anytime for \$55

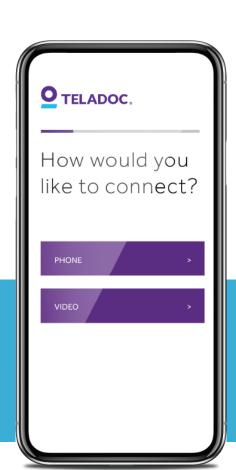




## VIRTUAL MENTAL HEALTH & DERMATOLOGY SERVICES

### **MENTAL HEALTH CARE**

- Speak with a licensed therapist to receive confidential and convenient care via phone or video for anxiety, stress, depression, family issues, and more.
- You can make an appointment seven days a week, from 7 AM to 9 PM local time.
  - Psychiatrist (initial visit): \$220
  - Psychiatrist (ongoing visit): \$100
  - Psychologist, licensed clinical social worker, counselor, or therapist: \$90



### **DERMATOLOGY**

- If you have a skin condition such as acne, eczema, raised moles, or a rash, you don't have to wait weeks for a dermatology appointment.
- Upload images of a skin issue and get a custom treatment plan from Teladoc's
   U.S. board-certified dermatologists.

Get Healthier Skin for \$85/Visit





## **ID CARDS**



You will receive new health benefits ID cards from Prairie States.



To ensure proper handling of your claims, beginning October 1, 2022 present your Prairie States ID card.



If you do not yet have your ID card as of October 1, 2022, call Prairie States for assistance.



### **REMINDER:**

The Prairie States EOB is not a bill.

This section provides a brief overview of how claims were paid for a specified period of time, as well as the portion providers may bill you after your health plan benefits are paid.

This section shows payment details for each claim.

Prairie States Enterprises, Inc. PO Box 23 Sheboygan, WI 53082-0023



### **Explanation of Benefits**

Retain this for tax purposes THIS IS NOT A BILL

Customer Service

If you have questions regarding this claim, please call (800)615-7020

Group Name: Sample Group

Jane Doe 123 Test Street Test IL 60411

#### For the Service Period:

01/19/2020 thru 01/19/2020

The information below is a summary of the healthcare claims you incurred for the period 01/19/2020 thru 01/19/2020. This information is commonly referred to as an "Explanation of Benefits" (EOB). This is not a bill. It is a summary, followed by the claim details, of how your recent claims were processed. It includes any co-pay, deductible, coinsurance (%) or noncovered amounts that you may owe to the provider(s) of service. Use this EOB to verify the accuracy of any bill you may receive from the provider(s) listed below. If you did not receive service from the provider(s) listed below or suspect fraudulent charges please contact the customer service department at the number listed above.

Total Amount Billed

\$122.00

Reduction Amount

\$9.71

Total Amount Paid By Plan

\$112.29

Your Financial Responsibility

\$9.71

This is the total amount billed for the dates of service of 01/19/2020 thru 01/19/2020.

This is the amount of dollars saved using various pricing programs and network arrangements provided by Prairie States Enterprises, Inc.. These dollars are not your responsibility.

This is the amount the plan paid in total for services rendered from 01/19/2020 thru 01/19/2020. Please see the "Claim Summary" section of this document for more information.

This is the amount the provider(s) of service may bill you after your health plan benefits were paid. Typically a plan participant may be billed by the provider of service because they may have a deductible, co-pay, coinsurance (%), or the service is not covered by the health plan. Amounts shown here do not reflect any payments made at the point of service. A breakdown of your total financial responsibility is shown in the claim detail for each member.

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Claim Summary									
Claim #	Patient	Billed Amount	Not Covered	PPO Discount	Covered Amount	Deductible Amount	Co-Pay Amount	Patient Responsibility	Payment Amount
TestClm#123	John Smith	\$122.00	\$9.71	\$0.00	\$122.00	\$0.00	\$0.00	\$9.71	\$112.29
	Totals	\$122.00	\$9.71	\$0.00	\$122.00	\$0.00	\$0.00	\$9.71	\$112.29





Claims are also shown individually including service code, procedure description, applicable co-pay, payment amount, etc.

This section provides service code descriptions for claims processed.

The Accumulator Description Section lists year-to-date amounts paid toward Individual and/or Family Deductibles and Out-of-Pocket amounts.

Details on how to file an appeal are provided at the bottom of your EOB.



Claim #: TestCim#123 Provider: Dr. Eliza Doolitti Patient Acct: XXX-XX-1234 Procedure Dates Description PROPHYLAXIS-ADULT \$9.71 \$112.29 01/19-01/19/2020 \$122.00 \$122.00 \$0.00 \$112.29 \$0.00 \$112.29

Coinsurance Amount Total \$0.00

Patient's Responsibility Total \$9.71

vice Code/Description: PROPHY - CLEANING/SCALING Reason Code/Description:
55 EXCEEDS REASONABLE AND CUSTOMARY

Payment Details:			
Paid To	Transaction Date	Transaction ID	Amount
Dr. Eliza Doolittie	07/31/2020	170488	\$112.29

Plan Status:			
Accumulator Description	Claim Year	Applied to Date	Maximum
Jane Doe - INDIVIDUAL IN NETWORK DEDUCTIBLE	2020	\$750.00	\$750.00
Jane Doe - INDIVIDUAL IN NETWORK OUT OF POCKET	2020	\$2500.00	\$2500.00
Jane Doe - INDIVIDUAL OUT OF NETWORK DEDUCTIBLE	2020	\$0.00	\$1500.00
Jane Doe - INDIVIDUAL OUT OF NETWORK OUT OF POCKET	2020	\$0.00	\$5000.00
FAMILY IN NETWORK DEDUCTIBLE	2020	\$750.00	\$1500.00
FAMILY IN NETWORK OUT OF POCKET	2020	\$2518.65	\$5000.00
FAMILY OUT OF NETWORK DEDUCTIBLE	2020	\$0.00	\$3000.00
FAMILY OUT OF NETWORK OUT OF POCKET	2020	\$0.00	\$10000.00

Your next monthly explanation of benefits, if any claims are processed, will arrive the week of: 10/14/2020

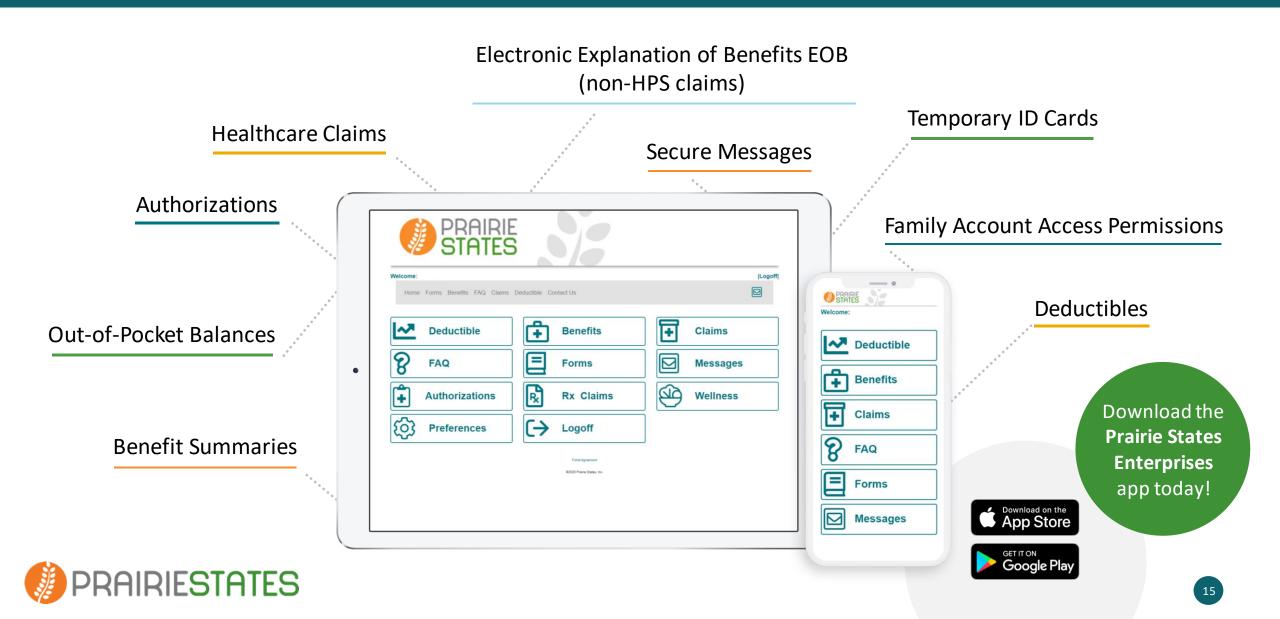
#### Appeals Rights

This calim has been processed consistent with the benefit terms and conditions written in the Summary Plan Document. Contacting Prairie States at (800) 615-7020 may resolve your questions regarding benefit determination. A Cialmant or their authorized representative has the right to appeal any claim, denied in whole or in part; and request free of charge a copy of any orderia or pian provision used in denying this claim. A review of this benefit determination may be requested in writing by submitting your appeal to us along with any additional material/information you have within 180 days of receipt of denial or the claimant loses the right to further appeal or file a suit in civil court. If you provide the plan with all information needed, you will receive a written reply no later than 60 days of receipt of the appeal. If your appeal is denied, you have the right to bring civil action under Section 502(a) of the Employee Retirement income Security Act of 1974 (ERISIA). For questions about your appeals rights, this notice, or for assistance, you can contact the Employee Benefits Security Administration at 1-866-444-EBSA (3272).

SEND APPEALS TO: Prairie States Enterprises, Inc. Attn: Appeals PO Box 23 Sheboygan, WI 53082-0023



## MEMBER PORTAL: ALL IN ONE PLACE



## **ALITHIAS CARE ADVOCATES**

Alithias is an advocacy service that helps you find high quality, low cost providers. When you use the program, you save time, receive quality care, and earn incentives!



Doctor provides initial diagnosis



Member requests the order from the doctor and then provides it to Alithias Care Navigation



Alithias Care Navigation creates a Service Option Report with high value options



Member chooses provider and receives services







# QUESTIONS?