

Transcript: Estefania

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Full Transcript

Thank you for calling Benefit Pinot Card. My name is Stephanie. How can I assist you? Hey. Um, I'm calling, uh, regarding your benefits. I may, um, join Clinical Staffing Resources, and I was just kind of wondering what type of benefits are offered. Okay. Um, so I can give you general information. Do y- um, I have to see if you're in our files already. What are the last four of your social? Yeah, I'm not in your files. Peggy, there was a issue with my, um, the online thing, and she had to contact IT. So, if you can't give me information, like, until I'm in the system, it- I won't be in it. Okay. Um, I can give you general information from the guide, though. Sure. Um, give me one second. Let's see. Okay. So you're with Clinical Staffing Resources, correct? Yeah. Okay, so they offer different, um, medical plans depending on how many you select, as well as if you add dependents, has a lot to do with how much your weekly deduction is. None of the medical plans that they offer are major medical plans, so they are limited too. Um, the first plan that I'm gonna go over, it's called the StayHealthy MUC 12 Art Reds. That plan is only a preventative plan, meaning it's only gonna cover preventative services that are considered, like a physical, some vaccines, some STD and cancer screening, um, and maybe even some counseling. But it doesn't cover any doctor visits if sick, hospital visits if injured, urgent care, emergency room, nor surgeries. It does require you to stay within the network to receive coverage, so you can only use their doctors and clinics. Um, it offers prescription benefits for those preventative prescriptions through Net Impact, and it offers virtual urgent care, which gives you access to medical providers via telephone or video call. It also offers a membership with FreeRx, which gives you access to over 800 of the top 90% generic drugs prescribed in the US. But again, your MUC StayHealthy plan is only for your preventative services. So if you select this plan for employee only, it would be a weekly deduction from your paycheck of \$17.67. They also offer a second plan called the VIP Classic. This one only covers doctor visits if sick, your urgent care, emergency room, and surgeries. It covers a flat fee towards those services. Um, so it'll only cover a certain amount. If it's a little bit more, you would be responsible for the remaining amount. With the VIP Classic plan, that one only covers hospital indemnity services, but it doesn't cover any, um, preventative services. So it wouldn't cover no physical, no vaccines, no STD and cancer screening, no annals, none of that. It's only strictly for your doctor visits if sick, urgent care, emergency room, and surgeries. It does offer, um, prescription benefits through PharmaBill. Depending on the generic medication that you get, you can pay up to \$10, \$20, \$30. It just depends. And for the non-generics, they offer you a discount. Uh, the plan doesn't require you to stay within the network compared to the first one. This, with the VIP Classic, you can be out of the network. As long as they take that insurance, you can use it. Um, it also offers the virtual urgent care and it covers a flat fee towards your visit. So for example, for hospital admission, they cover \$500 per day for a max of a one day. Hospital confinement, it'll cover a

flat fee of \$50 per day for a max of 30 days. So let's say your bill is \$100, they'll cover \$50 and you're responsible for the other \$50. Um, rehabilitation benefits, they cover \$25 per day for a max of 30 days. Surgery in hospital, they'll cover a flat fee of \$500 per day for a max of a day. Surgery in physician, they'll cover a flat fee of \$250 per day for a max of two days. If you select the VIP Classic plan for employee only, that's \$19.16 weekly. And then the last plan is called the MUC Enhanced. So out of the three, this is the only one that would cover both benefits, which would be your preventative and your hospital indemnity services. However, this plan does require you to stay within the network to receive coverage, and it does require copays. So for primary care visits, a \$10 copay per visit's required, and you would be limited to four visits annually per person or 10 per family. For specialty care visits, a \$50 copay per visit's required, and you would also be limited to four visits annually per person or 10 per family. For urgent care visits, a \$60 copay per visit's required, and you would be limited to four visits annually per person or 10 per family. You get two carriers when it comes to your prescriptions. Since it offers preventative and hospital indemnity, you would have two different carriers when it comes to them prescription benefits, one being Net Impact and the other one being PharmaBill. When it comes to your generic prescriptions, pharmacy option, you have a 30-day supply and a \$5 copay would be required. For mail-order option, you have a 90-day supply and a \$15 copay for the generic drugs are required. You also receive prescription benefits through PharmaBill, and it also offers virtual a- urgent care. With the MUC Enhanced, they also cover a flat fee towards your services. So for surgery and hospital, looks like they cover a flat fee of \$500 per day for a max of a day, and it covers group accident. Um, if you select the StayHealthy MUC Enhanced for employee, that's a weekly deduction of \$42.75 from your paycheck. And they also offer additional, um, benefits, which those additional benefits also have their separate deductions. So that would be like your vision plan, dental plan, term life, and they do have their separate deductions as well. So for example, vision, um, it's only one plan for vision. That one requires co-pays. Co-pay for an eye exam is \$10, co-pay for lenses and frames is 25, and your frame allowance is \$130. It looks like for vision that's a \$1.89 weekly from your paycheck. Dental, a preventative visit, 100% is covered. Something basic like a cleansing of the teeth, 80% is covered. Basic restorative, so if they got to fill in a cavity, 80% is covered. X-rays, 80% is covered. And your annual maximum is \$750. With dental, you do have to give a one-time deductible when you go to your first visit. If you choose the individual plan, that would be fa- \$50. If you choose the family plan, it would be a \$150, but that would just be a one-time deductible. And for the dental plan, there's also only one dental plan, that would be, um, \$3.89 if you choose the employee plan. And of course, they do have like short-term, 24-hour accident, critical illness or cancer benefit, term life and ID social plus, behavior health, and all those do also have their separate deductions. So your weekly deduction really just depends on how many plans you select, which ones they are, and if you add dependents. Okay. What is, like when you said with in-network, what is- They only use your doctors and clinics. I don't have the list of the providers. Okay. Um, so that would be something that you have to reach out to MultiPlan, and they would actually inform you, um, where you can go. If you do select one of the two MECs, being the StayHealthy, which is only preventative, and then the MEC Enhance, which offers preventative and hospital indemnity. With the VIP, you don't... You're not required to stay with in-network. Um, as long as they take that insurance, you can use it out of network. So in other words, if, if they're not within the network of their doctors and clinics, if they accept it, you can use it, only with your VIP classes

though. With the other two, you do have to stay in the network, only use their clinics and doctors. Um, I was gonna tell you that for all of the plans, it's under an IRS regulation that's called Section 125. So it allows you to pay these plans with pre-tax dollars. However, if you do enroll into the plans and later on want to cancel or want to make changes to that plan, like adding a different level of dependents or, or like enrolling from employee only to employee and spouse, something like that, to make those changes, you do have to be within your personal open enrollment, which means the first 30 days of receiving your first check or be in company open enrollment, which for them, I can check to see what month that falls in. No, that's okay. So it looks like it's in the month of July up until August. Okay. Okay. Um... Yep. No, the information you gave me is definitely helpful. So I know like just kind of basic prices. Um, but yeah, no, thank you. If I, um, do join them, I'll definitely, uh, be calling you guys back. Okay. Just keep in mind that they do give you 30 days from the day that you receive your first check to do so, and they do take part of the auto enrollment. Um- Okay. So if you don't decide to enroll, it is important that you know that you have to call us within the first 30 days of receiving your first check to opt out of the preventative plan, which only covers preventative services. So it looks like that's \$17.67. So if you, for some reason you forget to opt out, they will automatically enroll you into that benefit, and, um, that is under Section 125. So it is important that you call to opt out if you're not interested. Um, I don't know if you want to go ahead and opt out from it, 'cause you can still enroll if you opt out of that. That would just opt you out from the auto enrollment, but it's your choice. Yeah, no, I would definitely... If I joined them, I would definitely need some kind of benefit. So- Mm-hmm. Um, I would, yeah, I would need to opt out. Um- Okay, that's fine. I'm trying to figure out what, what level I would kind of need to think about it. Gotcha. Um, well you still would have to call though just to make sure that you get the right level, 'cause once your 30-day mark is over, if you do want to... Let's say they automatically enroll you into the employee only plan, 'cause that's what they would do. Yeah. That's gonna... I just have... I don't have any difference. That's okay. Gotcha. Okay. Yeah. 'Cause I was gonna tell you if you do want to add dependents to make changes or cancellations, since it's under that regulation, you do have to do it within your 30 days or within company open enrollment, um, to do that- Yeah. ... cancellation or make that change due to that restriction. They might be paying for their own, they're paying for their own insurance right now. Okay. Okay. Yes, ma'am. So... But thank you so much for the information. That is exactly what I needed. You have been very helpful. Okay. You're welcome. Well, I hope you have a great day. You too. Thank you. Bye-bye.

Conversation Format

Speaker speaker_0: Thank you for calling Benefit Pinot Card. My name is Stephanie. How can I assist you?

Speaker speaker_1: Hey. Um, I'm calling, uh, regarding your benefits. I may, um, join Clinical Staffing Resources, and I was just kind of wondering what type of benefits are offered.

Speaker speaker_0: Okay. Um, so I can give you general information. Do y- um, I have to see if you're in our files already. What are the last four of your social?

Speaker speaker_1: Yeah, I'm not in your files. Peggy, there was a issue with my, um, the online thing, and she had to contact IT. So, if you can't give me information, like, until I'm in the system, it- I won't be in it.

Speaker speaker_0: Okay. Um, I can give you general information from the guide, though.

Speaker speaker_1: Sure.

Speaker speaker_0: Um, give me one second. Let's see. Okay. So you're with Clinical Staffing Resources, correct?

Speaker speaker_1: Yeah.

Speaker speaker_0: Okay, so they offer different, um, medical plans depending on how many you select, as well as if you add dependents, has a lot to do with how much your weekly deduction is. None of the medical plans that they offer are major medical plans, so they are limited too. Um, the first plan that I'm gonna go over, it's called the StayHealthy MUC 12 Art Reds. That plan is only a preventative plan, meaning it's only gonna cover preventative services that are considered, like a physical, some vaccines, some STD and cancer screening, um, and maybe even some counseling. But it doesn't cover any doctor visits if sick, hospital visits if injured, urgent care, emergency room, nor surgeries. It does require you to stay within the network to receive coverage, so you can only use their doctors and clinics. Um, it offers prescription benefits for those preventative prescriptions through Net Impact, and it offers virtual urgent care, which gives you access to medical providers via telephone or video call. It also offers a membership with FreeRx, which gives you access to over 800 of the top 90% generic drugs prescribed in the US. But again, your MUC StayHealthy plan is only for your preventative services. So if you select this plan for employee only, it would be a weekly deduction from your paycheck of \$17.67. They also offer a second plan called the VIP Classic. This one only covers doctor visits if sick, your urgent care, emergency room, and surgeries. It covers a flat fee towards those services. Um, so it'll only cover a certain amount. If it's a little bit more, you would be responsible for the remaining amount. With the VIP Classic plan, that one only covers hospital indemnity services, but it doesn't cover any, um, preventative services. So it wouldn't cover no physical, no vaccines, no STD and cancer screening, no annals, none of that. It's only strictly for your doctor visits if sick, urgent care, emergency room, and surgeries. It does offer, um, prescription benefits through PharmaBill. Depending on the generic medication that you get, you can pay up to \$10, \$20, \$30. It just depends. And for the non-generics, they offer you a discount. Uh, the plan doesn't require you to stay within the network compared to the first one. This, with the VIP Classic, you can be out of the network. As long as they take that insurance, you can use it. Um, it also offers the virtual urgent care and it covers a flat fee towards your visit. So for example, for hospital admission, they cover \$500 per day for a max of a one day. Hospital confinement, it'll cover a flat fee of \$50 per day for a max of 30 days. So let's say your bill is \$100, they'll cover \$50 and you're responsible for the other \$50. Um, rehabilitation benefits, they cover \$25 per day for a max of 30 days. Surgery in hospital, they'll cover a flat fee of \$500 per day for a max of a day. Surgery in physician, they'll cover a flat fee of \$250 per day for a max of two days. If you select the VIP Classic plan for employee only, that's \$19.16 weekly. And then the last plan is called the MUC Enhanced. So out of the three, this is the only one that would cover both

benefits, which would be your preventative and your hospital indemnity services. However, this plan does require you to stay within the network to receive coverage, and it does require copays. So for primary care visits, a \$10 copay per visit's required, and you would be limited to four visits annually per person or 10 per family. For specialty care visits, a \$50 copay per visit's required, and you would also be limited to four visits annually per person or 10 per family. For urgent care visits, a \$60 copay per visit's required, and you would be limited to four visits annually per person or 10 per family. You get two carriers when it comes to your prescriptions. Since it offers preventative and hospital indemnity, you would have two different carriers when it comes to them prescription benefits, one being Net Impact and the other one being PharmaBill. When it comes to your generic prescriptions, pharmacy option, you have a 30-day supply and a \$5 copay would be required. For mail-order option, you have a 90-day supply and a \$15 copay for the generic drugs are required. You also receive prescription benefits through PharmaBill, and it also offers virtual a- urgent care. With the MUC Enhanced, they also cover a flat fee towards your services. So for surgery and hospital, looks like they cover a flat fee of \$500 per day for a max of a day, and it covers group accident. Um, if you select the StayHealthy MUC Enhanced for employee, that's a weekly deduction of \$42.75 from your paycheck. And they also offer additional, um, benefits, which those additional benefits also have their separate deductions. So that would be like your vision plan, dental plan, term life, and they do have their separate deductions as well. So for example, vision, um, it's only one plan for vision. That one requires co-pays. Co-pay for an eye exam is \$10, co-pay for lenses and frames is 25, and your frame allowance is \$130. It looks like for vision that's a \$1.89 weekly from your paycheck. Dental, a preventative visit, 100% is covered. Something basic like a cleansing of the teeth, 80% is covered. Basic restorative, so if they got to fill in a cavity, 80% is covered. X-rays, 80% is covered. And your annual maximum is \$750. With dental, you do have to give a one-time deductible when you go to your first visit. If you choose the individual plan, that would be fa- \$50. If you choose the family plan, it would be a \$150, but that would just be a one-time deductible. And for the dental plan, there's also only one dental plan, that would be, um, \$3.89 if you choose the employee plan. And of course, they do have like short-term, 24-hour accident, critical illness or cancer benefit, term life and ID social plus, behavior health, and all those do also have their separate deductions. So your weekly deduction really just depends on how many plans you select, which ones they are, and if you add dependents.

Speaker speaker_1: Okay. What is, like when you said with in-network, what is-

Speaker speaker_0: They only use your doctors and clinics. I don't have the list of the providers.

Speaker speaker_1: Okay.

Speaker speaker_0: Um, so that would be something that you have to reach out to MultiPlan, and they would actually inform you, um, where you can go. If you do select one of the two MECs, being the StayHealthy, which is only preventative, and then the MEC Enhance, which offers preventative and hospital indemnity. With the VIP, you don't... You're not required to stay with in-network. Um, as long as they take that insurance, you can use it out of network. So in other words, if, if they're not within the network of their doctors and clinics, if they accept it, you can use it, only with your VIP classes though. With the other two, you do have to stay in

the network, only use their clinics and doctors. Um, I was gonna tell you that for all of the plans, it's under an IRS regulation that's called Section 125. So it allows you to pay these plans with pre-tax dollars. However, if you do enroll into the plans and later on want to cancel or want to make changes to that plan, like adding a different level of dependents or, or like enrolling from employee only to employee and spouse, something like that, to make those changes, you do have to be within your personal open enrollment, which means the first 30 days of receiving your first check or be in company open enrollment, which for them, I can check to see what month that falls in.

Speaker speaker_1: No, that's okay.

Speaker speaker_0: So it looks like it's in the month of July up until August.

Speaker speaker_1: Okay. Okay. Um...

Speaker speaker_0: Yep.

Speaker speaker_1: No, the information you gave me is definitely helpful. So I know like just kind of basic prices. Um, but yeah, no, thank you. If I, um, do join them, I'll definitely, uh, be calling you guys back.

Speaker speaker_0: Okay. Just keep in mind that they do give you 30 days from the day that you receive your first check to do so, and they do take part of the auto enrollment. Um-

Speaker speaker_1: Okay.

Speaker speaker_0: So if you don't decide to enroll, it is important that you know that you have to call us within the first 30 days of receiving your first check to opt out of the preventative plan, which only covers preventative services. So it looks like that's \$17.67. So if you, for some reason you forget to opt out, they will automatically enroll you into that benefit, and, um, that is under Section 125. So it is important that you call to opt out if you're not interested. Um, I don't know if you want to go ahead and opt out from it, 'cause you can still enroll if you opt out of that. That would just opt you out from the auto enrollment, but it's your choice.

Speaker speaker_1: Yeah, no, I would definitely... If I joined them, I would definitely need some kind of benefit. So-

Speaker speaker_0: Mm-hmm.

Speaker speaker_1: Um, I would, yeah, I would need to opt out. Um-

Speaker speaker_0: Okay, that's fine.

Speaker speaker_1: I'm trying to figure out what, what level I would kind of need to think about it.

Speaker speaker_0: Gotcha. Um, well you still would have to call though just to make sure that you get the right level, 'cause once your 30-day mark is over, if you do want to... Let's say they automatically enroll you into the employee only plan, 'cause that's what they would do.

Speaker speaker_1: Yeah. That's gonna... I just have... I don't have any difference. That's okay.

Speaker speaker_0: Gotcha. Okay.

Speaker speaker_1: Yeah.

Speaker speaker_0: 'Cause I was gonna tell you if you do want to add dependents to make changes or cancellations, since it's under that regulation, you do have to do it within your 30 days or within company open enrollment, um, to do that-

Speaker speaker_1: Yeah.

Speaker speaker_0: ... cancellation or make that change due to that restriction.

Speaker speaker_1: They might be paying for their own, they're paying for their own insurance right now.

Speaker speaker_0: Okay. Okay. Yes, ma'am.

Speaker speaker_1: So... But thank you so much for the information. That is exactly what I needed. You have been very helpful.

Speaker speaker_0: Okay. You're welcome. Well, I hope you have a great day.

Speaker speaker_1: You too. Thank you. Bye-bye.