Transcript: Estefania Acevedo-5774611037601792-6261233046831104

Full Transcript

Thank you for calling Benefits in a Card, my name is Stephanie, how can I assist you? Hello, Stephanie. My name is Linda Lamas. How can I help you? And I want to enroll for the benefits. So just let me know if you- Okay, what staff and a- mm-hmm, what staff and agency do you work for? Uh, Partners Pearson Personnel. And then what are the last four of your social? Uh, 3177. For security purposes, can you verify your address and date of birth? Address is 2311 Doris Street, Melrose Park, 60164, and uh, birthday is August 10th, 1998. And then what was that state? I'm sorry? Um, what was that- Oh, Illinois. Illinois. Mm-hmm, thank you. All right. All right, I have 847-219-3267 as your phone number. Yes. All right then, I have linIrbusiness@gmail.com? Yes. All right, and then by any chance did you know which one you want to enroll into already? Uh, hmm, I have a, I have a question and I was wondering if you could answer it for me- Mm-hmm. ... while we're here. Yes, ma'am. So, when you were t- when you guys talked about the... 'Cause I know you guys have four, I guess. I'm looking at the sheet right now. And it's the Stay Healthy, MEC tel- TelRx, the VIP Standard, the VIP, the VIP Plus, and the VIP Prime. Um, are those, are any of those like HMO or PPO, or like, what- what's the deal there? So none of... None of the plans that they offer are major medical plans. Um, they are limited benefits. Okay. So, let's see. Let me see what plans they offer. Give me one second. And I believe they are PPOs, but let me make sure. Okay. Yeah, so they're not... These, these funds are not a major medical plan. They're just limited. So they're just gonna pay a flat fee depending on the s- per- the service that you go for towards your services. They don't pay the whole thing. Um, like for example, if you needed a surgery in a hospital and you had the VIP Standard, it would only cover \$250. So let's say, like your-Oh. ... your total is \$1,000, they would cover 250, you would have to pay 750 out of pocket. Okay. Uh- And then the VIP Plus would be \$1,000 and the Prime would be \$2,000. So the, the... It's just a limited benefit plans. Okay, um, question. Um, well actually not a question. Can I enroll in it then, the, the VIP Prime? Mm-hmm, yeah, you can. You can enroll into any of the plans right now. Um, you're within your personal open enrollment which means you have 30 days from the day that you receive your first check to be eligible to enroll into the benefits. Yeah, so can I enroll in that one, the VIP Prime? Yes, ma'am. And then just keep in... Um, did you want to do employee only or dependents? Yeah, just employee only. And then keep in mind that the VIP Pr- the VIPs only cover hospital indemnity services such as doctor visits to sick, hospital visits if injured, urgent care, emergency rooms. But they don't cover your preventative services which are considered like a physical, some vaccines, STD and cancer screening. Um, so it's only hospital indemnity, okay? Oh, okay. So does VIP Plus cover that? No. So none of the VIPs cover that. Um, the VIPs only cover your hospital area. They wouldn't cover, like, preventative visits such as a mammogram, a physical, your annual checkups. Those are preventative services. Um, that's not covered with the three VIPs. They only are

your hospital indemnity. Then the MEC Tel Rx, that one is only preventative, and preventative only meaning only cover like a physical, some vaccines, some STD and cancer screening. But the MEC Tel Rx doesn't cover any of your hospital indemnity services. So no actual doctor visits if you get sick or have to go to the urgent care emergency room. The only one that covers both areas, your preventative and your hospital indemnity, is the MEC Enhanced. Um, however, the MEC Enhanced requires copays and it requires you to only use their clinics and doctors to receive coverage. So you do have to stay within the network. Okay, um, am I able to do that then? Yeah, you can. So you wanted to change it? Yeah, I'll change it to that. Okay, that one's \$43.76. Um, just keep in mind, like I said, with the MEC Enhanced, that one does have copays. Um, it does cover your prim- preventative care. For primary care visits, you would be limited to four visits annually per person or 10 per family and a \$10 copay would be required. For specialty care visits, a \$50 copay per visit is required and you're also limited to four visits annually per person or 10 per family.... for urgent care visits, a \$60 copay for visits required and you're also limited to four visits annually per person, attempt per family. They offer two different, um, carriers when it comes to your prescription benefits. The first one would be through MedImpact and the second one through Pharmaville. When it comes to your pharmacy option, you have a 30-day supply and a \$5 copay where those generic prescriptions are required, and then for the mail order option, 90-day supply, and for the generic drugs, a \$15 copay is required. This plan also covers a flat fee towards your hospital indemnity services, so for example, for surgery in the hospital, they'll cover \$500 per day for a maximum of seven days, so that means if your bill's 1,000, they'll cover 500 and you're responsible for the remaining balance. It also covers group accident. This one's \$43.76. So that's the one that you selected, okay? Yes. Um, and then did you want to add anything else? Uh, what other things can I add? They have dental, sh- short-term disability, term life, vision, critical illness, group accident, behavior health and identity protection. Um, how much extra would that be? Um, it depends on which one you want and how many you add. Um, were you looking into any of the ones that I just mentioned? Like dental and vision? Uh, yeah. Yeah, dental and vision. Well, actually, vision primarily. Okay. So vision is \$2.15 for the employee plan. That plan requires copays. So for vision, if you go for an eye exam, you only have to pay \$10. Copay for lenses and frames is \$25 and your frame allowance is \$130. So if you get frames that are a little bit more, you would have to pay for the remaining balance, but they'll cover 130. Okay. And, uh, what about, uh, can I add the behavioral health one too? Yes. And then I do have to let you know that it's only behavior health virtual counseling. So it's only virtual, okay? 'Cause there's been times in the past where people think that it's, like, in person, but it's not. Oh, okay. Um- If that's okay. Did you still want to add it or no? Actually, no. Never mind then. Okay. And then, uh- So do you want to do vision and the medical? Vision and the medical? Yes. Okay. So that looks like for those two, it's a weekly deduction of \$45.91. Do you allow Partners Personnel to meet the weekly deduction of \$45.91 for the MEC Enhanced, which is your medical plan that has preventative and hospital indemnity coverage, and for vision? Uh, wait. Question. Now that I'm seeing there's more stuff on here, um, can I just add a couple more things just to be safe? Yeah, that's fine. Uh, can I add the... Short term critical illness and cancer, term life. Um, what is the term life and AD, AD and D? That's just, that's if you were to pass away. Oh, okay. Okay. Um, it's just, um, death. I know some short term, I believe s- some of them are, like, if you get injured, but the one they offer is just, like, if you were to pass. It stands for, um, term life accidental dismemberment. Oh, okay. Term life and

accidental death and dismemberment. Sorry. Yeah. Oh, okay. Okay. Um, what about the 24-hour group accident? Like, what does that one, like, do? Um, it looks like for that one, for a hospital emergency room visit, they'll cover a flat fee of \$250. Physician office, they'll cover \$50. Emergency dental work, they'll cover \$50. Hospital admission, they'll cover 250. Daily hospital confinement, they'll cover \$100. Intensive care unit, they'll cover 200. Accidental death and dismemberment, employee up to \$15,000, spouse up to \$15,000, children up to 7,500. Ambulance, ground or air, they'll cover a flat fee of \$250. And medical imaging, they'll cover \$100. And that's- Hmm. That's it. Oh, okay. 24 hours of accident, um, so the plan that I have right now doesn't cover any of that, what you just went over? Like it's a different additional plan? Your, the pl- the plan that you have, um, is the hospital indemnity. So, it'll cover your doctor visits that's sick, hospital visits that's injured, urgent care, emergency room, and even some surgeries. Um, I doubt it is gonna cover ambulance, ground or air, accidental death and dismemberment. Emergency dental work, it's not gonna cover those things. So there's some- Okay. ... things that it will and some things that it's not. Okay. Um, so then my question to you would be then if I were to change the one that I have right now, the Stay Healthy, uh, Enhanced to, let's say, I don't know, VIP Standard or VIP Plus, can I still add those additional benefits? Yes, you can do that. The only thing about, um, the VIPs is you just gotta keep in mind that things such as the physicals..... your, um, STD and cancer screenings, vaccinations aren't covered with the, with the VIPs 'cause those are considered, like, preventative. Oh. Okay, I see now, makes sense. And the VIP... Nor the V- the VIPs don't cover no preventative visits. The standard, the plus and the prime, it's the same thing, the only thing is the standard is a basic one 'cause it doesn't cover four main areas and then the other two do cover the same areas. However, one covers more out-of-pocket than the other. Okay, I see. And then with the tele-RS, it's backwards. Those don't cover none of, like, your doctor visits, but they will cover your preventative visits. But like I said, they don't cover a single doctor visit if you go stick to the doctor, so they're gonna tell you, "This is a preventative plan." It has no hospital coverage. That's for the- Okay. ... agency tele-RS. And then the one that you currently, um, selected, that one covers both areas, your preventative and your hospital indemnity. However, it does require copays and for you to stay- Okay. ... within the network. Okay, now I get it. Okay, now I get it. Yeah. Okay. Um- I, I would kind of- Okay, so then I'm gonna choose that one. Mm-hmm. Okay. Sorry. So I'm gonna choose that one, the, the one that you told me about, the Enhanced one, the State Health e- Enhanced. Okay. And I'm gonna add the, the Vision, the Vision one. Okay. The Vision Additional Benefit. The... For employee and that would be, that would be it. Okay. So, I have the MEC Enhanced for \$43.76 and Vision for \$2.15. That would be an election total of \$45.91 weekly. Um, do you allow Partners Personal to make this weekly deduction for these two selected plans? Yes. Okay. Please allow one or two weeks for Partners Personal to start making the first deduction of the \$45.91 from your paycheck. Once you see the first deduction of the \$45.91, the following Monday of that first deduction is when these two plans become effective. And by that first week, or the second week of active coverage, you should be getting your two cards made, your MEC Enhanced as well as your Vision. And if you have a doctor's appointment or an eye doctor appointment coming up and you still don't have your cards, you're welcome to contact this number and we can email them to you. Um, I was kinda, I was gonna also let you know that those two plans are under a IRS regulation that's called Section 125. So, what Section 125 allows you to do is to pay these plans with pre-taxed dollars. However, if you do wanna

cancel or make changes, you have to be within your personal open enrollment period or within your company open enrollment period to do so. So, in other words, you have to be within the 30 days of receiving your first check. If you pass those 30 days and you call trying to cancel any of these two plans or add dependents later on, um, or in general add new plans to begin with, um, they're gonna tell you that you have to wait for the next company open enrollment which is done in October. Oh, okay. Gotcha. Okay? Um, but you're enrolled already. Now all, the only thing you really have to do is play the waiting game and wait for your staffing agency to start making that first deduction. So once you see the very first one the following Monday is when those two plans become effective and then that was to get your cards. Okay. All right, sounds good. All right. Did you have any questions? Uh, no, not as of right now. Thank you. You're welcome. If you do, we're open from Monday to Friday, 8:00 AM up until 8:00 PM Eastern Time. Okay. Thank you. All right. You welcome. Have a nice day. You too. Bye-bye.

Conversation Format

Speaker speaker_0: Thank you for calling Benefits in a Card, my name is Stephanie, how can I assist you?

Speaker speaker_1: Hello, Stephanie. My name is Linda Lamas.

Speaker speaker_0: How can I help you?

Speaker speaker_1: And I want to enroll for the benefits. So just let me know if you-

Speaker speaker_0: Okay, what staff and a- mm-hmm, what staff and agency do you work for?

Speaker speaker_1: Uh, Partners Pearson Personnel.

Speaker speaker_0: And then what are the last four of your social?

Speaker speaker_1: Uh, 3177.

Speaker speaker_0: For security purposes, can you verify your address and date of birth?

Speaker speaker_1: Address is 2311 Doris Street, Melrose Park, 60164, and uh, birthday is August 10th, 1998.

Speaker speaker 0: And then what was that state?

Speaker speaker_1: I'm sorry?

Speaker speaker_0: Um, what was that-

Speaker speaker 1: Oh, Illinois. Illinois.

Speaker speaker_0: Mm-hmm, thank you. All right. All right, I have 847-219-3267 as your phone number.

Speaker speaker 1: Yes.

Speaker speaker_0: All right then, I have linIrbusiness@gmail.com?

Speaker speaker_1: Yes.

Speaker speaker_0: All right, and then by any chance did you know which one you want to enroll into already?

Speaker speaker_1: Uh, hmm, I have a, I have a question and I was wondering if you could answer it for me-

Speaker speaker_0: Mm-hmm.

Speaker speaker_1: ... while we're here.

Speaker speaker 0: Yes, ma'am.

Speaker speaker_1: So, when you were t- when you guys talked about the... 'Cause I know you guys have four, I guess. I'm looking at the sheet right now. And it's the Stay Healthy, MEC tel- TelRx, the VIP Standard, the VIP, the VIP Plus, and the VIP Prime. Um, are those, are any of those like HMO or PPO, or like, what- what's the deal there?

Speaker speaker_0: So none of... None of the plans that they offer are major medical plans. Um, they are limited benefits.

Speaker speaker_1: Okay.

Speaker speaker_0: So, let's see. Let me see what plans they offer. Give me one second. And I believe they are PPOs, but let me make sure.

Speaker speaker 1: Okay.

Speaker speaker_0: Yeah, so they're not... These, these funds are not a major medical plan. They're just limited. So they're just gonna pay a flat fee depending on the s- per- the service that you go for towards your services. They don't pay the whole thing. Um, like for example, if you needed a surgery in a hospital and you had the VIP Standard, it would only cover \$250. So let's say, like your-

Speaker speaker_1: Oh.

Speaker speaker_0: ... your total is \$1,000, they would cover 250, you would have to pay 750 out of pocket.

Speaker speaker_1: Okay. Uh-

Speaker speaker_0: And then the VIP Plus would be \$1,000 and the Prime would be \$2,000. So the, the... It's just a limited benefit plans.

Speaker speaker_1: Okay, um, question. Um, well actually not a question. Can I enroll in it then, the, the VIP Prime?

Speaker speaker_0: Mm-hmm, yeah, you can. You can enroll into any of the plans right now. Um, you're within your personal open enrollment which means you have 30 days from the day that you receive your first check to be eligible to enroll into the benefits.

Speaker speaker_1: Yeah, so can I enroll in that one, the VIP Prime?

Speaker speaker_0: Yes, ma'am. And then just keep in... Um, did you want to do employee only or dependents?

Speaker speaker_1: Yeah, just employee only.

Speaker speaker_0: And then keep in mind that the VIP Pr- the VIPs only cover hospital indemnity services such as doctor visits to sick, hospital visits if injured, urgent care, emergency rooms. But they don't cover your preventative services which are considered like a physical, some vaccines, STD and cancer screening. Um, so it's only hospital indemnity, okay?

Speaker speaker_1: Oh, okay. So does VIP Plus cover that?

Speaker speaker_0: No. So none of the VIPs cover that. Um, the VIPs only cover your hospital area. They wouldn't cover, like, preventative visits such as a mammogram, a physical, your annual checkups. Those are preventative services. Um, that's not covered with the three VIPs. They only are your hospital indemnity. Then the MEC Tel Rx, that one is only preventative, and preventative only meaning only cover like a physical, some vaccines, some STD and cancer screening. But the MEC Tel Rx doesn't cover any of your hospital indemnity services. So no actual doctor visits if you get sick or have to go to the urgent care emergency room. The only one that covers both areas, your preventative and your hospital indemnity, is the MEC Enhanced. Um, however, the MEC Enhanced requires copays and it requires you to only use their clinics and doctors to receive coverage. So you do have to stay within the network.

Speaker speaker_1: Okay, um, am I able to do that then?

Speaker speaker_0: Yeah, you can. So you wanted to change it?

Speaker speaker_1: Yeah, I'll change it to that.

Speaker speaker_0: Okay, that one's \$43.76. Um, just keep in mind, like I said, with the MEC Enhanced, that one does have copays. Um, it does cover your prim- preventative care. For primary care visits, you would be limited to four visits annually per person or 10 per family and a \$10 copay would be required. For specialty care visits, a \$50 copay per visit is required and you're also limited to four visits annually per person or 10 per family.... for urgent care visits, a \$60 copay for visits required and you're also limited to four visits annually per person, attempt per family. They offer two different, um, carriers when it comes to your prescription benefits. The first one would be through MedImpact and the second one through Pharmaville. When it comes to your pharmacy option, you have a 30-day supply and a \$5 copay where those generic prescriptions are required, and then for the mail order option, 90-day supply, and for the generic drugs, a \$15 copay is required. This plan also covers a flat fee towards your hospital indemnity services, so for example, for surgery in the hospital, they'll cover \$500 per day for a maximum of seven days, so that means if your bill's 1,000, they'll cover 500 and you're responsible for the remaining balance. It also covers group accident. This one's \$43.76. So that's the one that you selected, okay?

Speaker speaker_1: Yes.

Speaker speaker_0: Um, and then did you want to add anything else?

Speaker speaker_1: Uh, what other things can I add?

Speaker speaker_0: They have dental, sh- short-term disability, term life, vision, critical illness, group accident, behavior health and identity protection.

Speaker speaker_1: Um, how much extra would that be?

Speaker speaker_0: Um, it depends on which one you want and how many you add. Um, were you looking into any of the ones that I just mentioned? Like dental and vision?

Speaker speaker_1: Uh, yeah. Yeah, dental and vision. Well, actually, vision primarily.

Speaker speaker_0: Okay. So vision is \$2.15 for the employee plan. That plan requires copays. So for vision, if you go for an eye exam, you only have to pay \$10. Copay for lenses and frames is \$25 and your frame allowance is \$130. So if you get frames that are a little bit more, you would have to pay for the remaining balance, but they'll cover 130.

Speaker speaker_1: Okay. And, uh, what about, uh, can I add the behavioral health one too?

Speaker speaker_0: Yes. And then I do have to let you know that it's only behavior health virtual counseling. So it's only virtual, okay? 'Cause there's been times in the past where people think that it's, like, in person, but it's not.

Speaker speaker_1: Oh, okay. Um-

Speaker speaker_0: If that's okay. Did you still want to add it or no?

Speaker speaker_1: Actually, no. Never mind then.

Speaker speaker_0: Okay.

Speaker speaker_1: And then, uh-

Speaker speaker_0: So do you want to do vision and the medical?

Speaker speaker_1: Vision and the medical? Yes.

Speaker speaker_0: Okay. So that looks like for those two, it's a weekly deduction of \$45.91. Do you allow Partners Personnel to meet the weekly deduction of \$45.91 for the MEC Enhanced, which is your medical plan that has preventative and hospital indemnity coverage, and for vision?

Speaker speaker_1: Uh, wait. Question. Now that I'm seeing there's more stuff on here, um, can I just add a couple more things just to be safe?

Speaker speaker_0: Yeah, that's fine.

Speaker speaker_1: Uh, can I add the... Short term critical illness and cancer, term life. Um, what is the term life and AD, AD and D?

Speaker speaker_0: That's just, that's if you were to pass away.

Speaker speaker 1: Oh, okay. Okay.

Speaker speaker_0: Um, it's just, um, death. I know some short term, I believe s- some of them are, like, if you get injured, but the one they offer is just, like, if you were to pass. It stands for, um, term life accidental dismemberment.

Speaker speaker_1: Oh, okay.

Speaker speaker_0: Term life and accidental death and dismemberment. Sorry. Yeah.

Speaker speaker_1: Oh, okay. Okay. Um, what about the 24-hour group accident? Like, what does that one, like, do?

Speaker speaker_0: Um, it looks like for that one, for a hospital emergency room visit, they'll cover a flat fee of \$250. Physician office, they'll cover \$50. Emergency dental work, they'll cover \$50. Hospital admission, they'll cover 250. Daily hospital confinement, they'll cover \$100. Intensive care unit, they'll cover 200. Accidental death and dismemberment, employee up to \$15,000, spouse up to \$15,000, children up to 7,500. Ambulance, ground or air, they'll cover a flat fee of \$250. And medical imaging, they'll cover \$100. And that's-

Speaker speaker_1: Hmm.

Speaker speaker_0: That's it.

Speaker speaker_1: Oh, okay. 24 hours of accident, um, so the plan that I have right now doesn't cover any of that, what you just went over? Like it's a different additional plan?

Speaker speaker_0: Your, the pl- the plan that you have, um, is the hospital indemnity. So, it'll cover your doctor visits that's sick, hospital visits that's injured, urgent care, emergency room, and even some surgeries. Um, I doubt it is gonna cover ambulance, ground or air, accidental death and dismemberment. Emergency dental work, it's not gonna cover those things. So there's some-

Speaker speaker_1: Okay.

Speaker speaker_0: ... things that it will and some things that it's not.

Speaker speaker_1: Okay. Um, so then my question to you would be then if I were to change the one that I have right now, the Stay Healthy, uh, Enhanced to, let's say, I don't know, VIP Standard or VIP Plus, can I still add those additional benefits?

Speaker speaker_0: Yes, you can do that. The only thing about, um, the VIPs is you just gotta keep in mind that things such as the physicals..... your, um, STD and cancer screenings, vaccinations aren't covered with the, with the VIPs 'cause those are considered, like, preventative.

Speaker speaker_1: Oh. Okay, I see now, makes sense.

Speaker speaker_0: And the VIP... Nor the V- the VIPs don't cover no preventative visits. The standard, the plus and the prime, it's the same thing, the only thing is the standard is a basic

one 'cause it doesn't cover four main areas and then the other two do cover the same areas. However, one covers more out-of-pocket than the other.

Speaker speaker_1: Okay, I see.

Speaker speaker_0: And then with the tele-RS, it's backwards. Those don't cover none of, like, your doctor visits, but they will cover your preventative visits. But like I said, they don't cover a single doctor visit if you go stick to the doctor, so they're gonna tell you, "This is a preventative plan." It has no hospital coverage. That's for the-

Speaker speaker_1: Okay.

Speaker speaker_0: ... agency tele-RS. And then the one that you currently, um, selected, that one covers both areas, your preventative and your hospital indemnity. However, it does require copays and for you to stay-

Speaker speaker_1: Okay.

Speaker speaker_0: ... within the network.

Speaker speaker_1: Okay, now I get it. Okay, now I get it.

Speaker speaker_0: Yeah.

Speaker speaker_1: Okay. Um-

Speaker speaker_0: I, I would kind of-

Speaker speaker_1: Okay, so then I'm gonna choose that one.

Speaker speaker_0: Mm-hmm. Okay.

Speaker speaker_1: Sorry. So I'm gonna choose that one, the, the one that you told me about, the Enhanced one, the State Health e- Enhanced.

Speaker speaker_0: Okay.

Speaker speaker_1: And I'm gonna add the, the Vision, the Vision one.

Speaker speaker_0: Okay.

Speaker speaker_1: The Vision Additional Benefit. The... For employee and that would be, that would be it.

Speaker speaker_0: Okay. So, I have the MEC Enhanced for \$43.76 and Vision for \$2.15. That would be an election total of \$45.91 weekly. Um, do you allow Partners Personal to make this weekly deduction for these two selected plans?

Speaker speaker_1: Yes.

Speaker speaker_0: Okay. Please allow one or two weeks for Partners Personal to start making the first deduction of the \$45.91 from your paycheck. Once you see the first deduction of the \$45.91, the following Monday of that first deduction is when these two plans become effective. And by that first week, or the second week of active coverage, you should be getting

your two cards made, your MEC Enhanced as well as your Vision. And if you have a doctor's appointment or an eye doctor appointment coming up and you still don't have your cards, you're welcome to contact this number and we can email them to you. Um, I was kinda, I was gonna also let you know that those two plans are under a IRS regulation that's called Section 125. So, what Section 125 allows you to do is to pay these plans with pre-taxed dollars. However, if you do wanna cancel or make changes, you have to be within your personal open enrollment period or within your company open enrollment period to do so. So, in other words, you have to be within the 30 days of receiving your first check. If you pass those 30 days and you call trying to cancel any of these two plans or add dependents later on, um, or in general add new plans to begin with, um, they're gonna tell you that you have to wait for the next company open enrollment which is done in October.

Speaker speaker_1: Oh, okay. Gotcha.

Speaker speaker_0: Okay? Um, but you're enrolled already. Now all, the only thing you really have to do is play the waiting game and wait for your staffing agency to start making that first deduction. So once you see the very first one the following Monday is when those two plans become effective and then that was to get your cards.

Speaker speaker_1: Okay. All right, sounds good.

Speaker speaker_0: All right. Did you have any questions?

Speaker speaker_1: Uh, no, not as of right now. Thank you.

Speaker speaker_0: You're welcome. If you do, we're open from Monday to Friday, 8:00 AM up until 8:00 PM Eastern Time.

Speaker speaker_1: Okay. Thank you.

Speaker speaker_0: All right. You welcome. Have a nice day.

Speaker speaker 1: You too. Bye-bye.