

Transcript: Estefania

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Full Transcript

Your call may be monitored or recorded for quality assurance purposes. Thank you for calling Benefits in a Car. My name is Stephanie. How can I assist you? Hi. Uh, just calling for information on the benefits. Okay. Um, what staff and agency do you work for? I work for, uh, per- uh, Partners Personnel. Okay. And what are the last four numbers of your social? My last four is 3372. Thank you. And then, what's your first and last name? George Lopez. Okay. For security purposes, I will need you to verify your full address as well as your date of birth. Uh, full address is 40315 Poppy Drive, Hemet, California 92544. And my birthday is March 28, 1991. Okay. Is your phone number still a 951-438-4216? Yes. And then I have your firstnamelastname2358@gmail.com. Is that still a good email address? Yes. Okay. You said you wanted some information regarding the plans that they have to offer? Correct. Yeah. Okay. Um, I was gonna ask you, did you want me to go ahead and send you the benefit guide? I could go over the plans with you as well as send that guide to you. It could give you a visual about the plans, and what I'm talking about whenever I go over them, because it does give you the- the prices for those plans if you were to select dependents as well. Okay. Awesome. Yeah. Please. Um, I went ahead and sent it right now. Okay. Do you mind verifying that you got it? Yeah. It should come from an email that says info@benefitsinacar.com. If you don't see it right away, I would check your spam file as well as your junk. Sometimes it sends it there. Okay. I got it. Okay. You got it? All right. Yeah. So let me go over the plans with these. So the first ones I'm gonna go over are the medical plans. Um, there's three different plans that are called VIPs. There's the VIP Standard, the VIP Plus, and the VIP Prime. These are gonna be the plans that would cover your doctor visits if you get sick, hospital visits if you get injured, urgent care visits, emergency room visits, and even some surgeries. They're very- Okay. ... similar, as in the fact that the three of them offer prescription benefits through Pharmacoville, which you can pay up to \$10, \$20, \$30 for your generic medication. And for the non-generic, they do offer discounts. It also includes Walmart Health Virtual Care, which gives you virtual medical assistance with med- medical providers. Oh, okay. Um, you don't have to stay within the network. In other words, you don't have to use, like, their providers exactly. You could either be in- in the- in the network or out of the network to be covered. Uh, the main difference between these three is that out of the three of them, the Standard is gonna be your most basic one, because that one's not gonna cover intensive care unit benefits, rehabilitation benefits, nor any prever- preventative surgery that you may need, while the VIP Plus and the VIP Prime do. The one that's gonna pay a greater dollar amount, depending on what service you go for, is gonna be the VIP Prime. Um, so what I mean by that, I'm gonna give you an example. So for hospital confinement benefits, the VIP Standard would cover \$50 per day from that to 30 days. The VIP Plus would cover \$100 per day from that to 30 days. And then the VIP Prime would cover \$100 per day from that to 30 days. So

the VIP Plus and Prime cover the same amount in that area, but- but whenever it comes to, like, surgery and hospitals, the Standard would cover \$250 per day from that to one day. The VIP Plus would cover \$1000 per day from that to one day. And then the VIP Prime would cover \$2000 per day from that to one day. For surgery and physician office, the Standard covers \$125 per day from that to two days. The VIP Plus would cover \$250 per day from that to two days. And then the VIP Prime would cover \$1000 per day from that to two days. So the VIP Prime's always gonna cover that greater flat fee depending on what service you go for. The VIP Plus does cover all the services that the Prime do, but just like I said earlier, the Prime is gonna pay off that greater dollar amount. Okay. Um, so if you were to select between those three, if you were to get the VIP Standard for employee only, that would be a weekly deduction of \$17.66 for the most basic one. Then for the VIP Plus, it would be \$31.61 weekly deduction for employee only. Or if you were to select the VIP Prime, which is the one that pays that greater dollar amount, it would be \$43.28 weekly. So those are three of the hospital indemnity plans. Then there's another, um, medical plan that's the NEC Tele-RF. That plan, however, is only a preventative plan. So it won't cover your doctor visits if sick, hospital visits if..... if injured, urgent care, emergency room or surgery. So, it's not going to cover any of the things that I just went over, um- Okay. ... compared to the VIPs. So, it's only for preventative services, so it will cover, like, one physical visit a year, some vaccines, some cancer screenings, some ST screens, but it's not going to cover anything if you go to the doctor 'cause you're sick. It's only for preventative services. Um, that plan- Okay. ... does require you to stay within the network. Compared to the VIPs, for the MEC Tele-RS, which is your preventative plan, you do have to stay within the network to be covered. Um, it covers you at 100% if you stay within the network. It does include, indeed, preventative prescription benefits through Alexar, and it also does include Walmart Health Virtual Care. And in addition, it also includes something called Free RS, which gives you access to over 90% of the generics drugs prescribed in the US for, like, a cheaper price. But like I said, this is only a preventative plan. Yeah. Um, so, so that one's, like, basic, basic. Um, if you were to select that one for employee only, that would be \$16.80. Um, something that I forgot to tell you about the VIP plans, those don't cover your preventative care, so those don't cover what the MEC Tele-RS covers. Um, however, it does, they do cover your doctor visits if you get sick, hospital visits, urgent care, emergency rooms, and surgeries. And then the MEC Tele-RS doesn't include none of that. So it's like backwards. Oh, but there's no preventative with any of the VIPs? Y-yeah, so I'm about to go through that one. Oh, okay. So, there is a fourth one. Um, so there's the three VIPs, the MEC Tele-RS, which is your preventative, and then the fifth one that I was gonna go over, it's called the MEC Enhanced. This one requires you to stay within the network. However, it does include your preventative care, which would be your annuals, your vaccines, some vaccines, some cancer screenings, some STD screenings, and it does include benefits for your, like, doctor visits if sick, hospital visits, urgent care room, surgeries. So it's, like, both of those two things combined. However, for the MEC Enhanced, um, this plan doesn't have flat fees like the other one. This one has co-pays. So, in the areas of, like, primary care visit, specialty care visit and urgent care room visit, um, you're limited to four visits annually per person or 10 per family. However, those do require those co-pays. Also, when it comes to the preventative care prescriptions, you would be required to give a co-payment. Um, so for- Okay. ... primary care visits, you're limited to four visits annually per person or 10 per family, and that requires a \$10 co-pay for that visit. For your specialty care

visits, you're limited to four visits annually per person or 10 per family, and that one requires a \$50 co-pay per visit. Urgent care visits, same thing, limited to four visits annually per person or e- or 10 per family. That one would be a co-pay of \$60 per visit. When it comes to the prescriptions, preventative prescriptions, um, for the pharmacy option, you get a 30-day supply, but you are required to give a \$5 co-pay- co-payment. Um, for mail-order options, you get a 90-day supply, but you are required to give a \$15 co-payment, and that supplies of 90 days. Um, since it's covered through... Since it does have, like, hospital benefits, hospital emergency room, emergency room, um, you are also covered through PharmaBill, which you can pay up to \$10, \$20, \$30 for the generic medication. And for the non-generic, they do offer a discount. If you were to get that one, however, for employee only, that would be a weekly deduction of \$43.76. So it's a little bit more. Um, but it, like I said, it does include your preventative care as well as some of the hospital indemnity. Okay. Um, and then there's additional benefits that you could add like vision, dental, term life, 24-hour, group accident, short-term disability and critical illness with cancer. But those, you would have to include. So let's say you would, you would like to add the dental plan, um, that, for employee only is \$3.63. For a preventative visit, it would cover you at 100%. Anything basic, like a cleaning would be covered at 80%. Basic restorative, like if they gotta fill in a cavity, that's covered at 80%. X-rays are covered at 80%, and your annual maximum is \$500. You would have to give a one-time deductible of \$50 if you were to select the individual plan. Um, that's only good- Okay. ... for that one time. And then, of course, we have vision, term life and all of those additional ones. Okay. Um, did you want to go ahead and enroll or did you want to think about what you wanted to enroll into? Um, I don't want to think about it, like, um, 'cause I'm looking for, uh, yeah, for f- for employee and children right now and just looking at the prices. Gotcha. Um, so you're right now in your personal open enrollment period. It looks like your, the last day that you have is till December 4th. Oh, okay. So you have, you have, um, a few days to think about it. Um- Yeah. ... before you m- you make a selection or anything, I was gonna tell you that all the medical plans... So, the three VIPs that I went over, then the preventative one, that's called the MEC Tele-RS, and then the MEC Enhanced, which is the one that includes preventative care as well as the benefits when it comes to the hospital. Um, that one, vision and dental, those are all under a IRS regulation, that's called Section 125. So, technically, what that section is, is if you were to select any of those plans that I just told you about, um, it allows you to pay those plans with pre-tax dollars. Um, however, if you were to select those plans, you're not allowed to drop those particular plans or make any changes if you're not within your first 30 days- Yeah. ... um, of receiving your first check. So, in other words, after December 5th, or you would have to do it on your company's open enrollment period, which for Partners Personal, it was in October. So, to make, to either drop those plans that I just went over, the sec, that's under that section, um, you would either have to be within your first 30 days of receiving your first check or be within company open enrollment period, which is in October. So, let's say you select dental, vision, and one of the medical plans, um, you could make changes or drop them before December 4th, but after December 4th, you would have to wait for your next company open enrollment period, which would be next October. Oh, I see. Yes, sir. Um, due to the fact that it allows you to pay those plans with pre-tax dollars. Yeah. Um, so that's why, uh, I just wanted to let you know that before you do make a selection or whenever you call. Um, either way, whenever you call, I'm pretty sure they're gonna notify you about that section, but I just wanted to tell you. Okay. Just so that you can keep that in mind

while you're thinking about what you want to enroll into. So, all of the medical plans are under that regulation, so the three VIPs are under that regulation, dental, vision and then the TMECs, okay? Okay. I see. Got it. All right. Um, did you have any more questions for me? Um, no, that, that, that'd be it. All right. Well, thank you for your time. I hope you have a great day. You too. Appreciate it. Thank you. Thank you. Bye.

Conversation Format

Speaker speaker_0: Your call may be monitored or recorded for quality assurance purposes.

Speaker speaker_1: Thank you for calling Benefits in a Car. My name is Stephanie. How can I assist you?

Speaker speaker_2: Hi. Uh, just calling for information on the benefits.

Speaker speaker_1: Okay. Um, what staff and agency do you work for?

Speaker speaker_2: I work for, uh, per- uh, Partners Personnel.

Speaker speaker_1: Okay. And what are the last four numbers of your social?

Speaker speaker_2: My last four is 3372.

Speaker speaker_1: Thank you. And then, what's your first and last name?

Speaker speaker_2: George Lopez.

Speaker speaker_1: Okay. For security purposes, I will need you to verify your full address as well as your date of birth.

Speaker speaker_2: Uh, full address is 40315 Poppy Drive, Hemet, California 92544. And my birthday is March 28, 1991.

Speaker speaker_1: Okay. Is your phone number still a 951-438-4216?

Speaker speaker_2: Yes.

Speaker speaker_1: And then I have your firstnamelastname2358@gmail.com. Is that still a good email address?

Speaker speaker_2: Yes.

Speaker speaker_1: Okay. You said you wanted some information regarding the plans that they have to offer?

Speaker speaker_2: Correct. Yeah.

Speaker speaker_1: Okay. Um, I was gonna ask you, did you want me to go ahead and send you the benefit guide? I could go over the plans with you as well as send that guide to you. It could give you a visual about the plans, and what I'm talking about whenever I go over them, because it does give you the- the prices for those plans if you were to select dependents as

well.

Speaker speaker_2: Okay. Awesome. Yeah. Please.

Speaker speaker_1: Um, I went ahead and sent it right now.

Speaker speaker_2: Okay.

Speaker speaker_1: Do you mind verifying that you got it?

Speaker speaker_2: Yeah.

Speaker speaker_1: It should come from an email that says info@benefitsinacar.com. If you don't see it right away, I would check your spam file as well as your junk. Sometimes it sends it there.

Speaker speaker_2: Okay. I got it.

Speaker speaker_1: Okay. You got it? All right.

Speaker speaker_2: Yeah.

Speaker speaker_1: So let me go over the plans with these. So the first ones I'm gonna go over are the medical plans. Um, there's three different plans that are called VIPs. There's the VIP Standard, the VIP Plus, and the VIP Prime. These are gonna be the plans that would cover your doctor visits if you get sick, hospital visits if you get injured, urgent care visits, emergency room visits, and even some surgeries. They're very-

Speaker speaker_2: Okay.

Speaker speaker_1: ... similar, as in the fact that the three of them offer prescription benefits through Pharmacoville, which you can pay up to \$10, \$20, \$30 for your generic medication. And for the non-generic, they do offer discounts. It also includes Walmart Health Virtual Care, which gives you virtual medical assistance with med- medical providers.

Speaker speaker_2: Oh, okay.

Speaker speaker_1: Um, you don't have to stay within the network. In other words, you don't have to use, like, their providers exactly. You could either be in- in the- in the network or out of the network to be covered. Uh, the main difference between these three is that out of the three of them, the Standard is gonna be your most basic one, because that one's not gonna cover intensive care unit benefits, rehabilitation benefits, nor any prever- preventative surgery that you may need, while the VIP Plus and the VIP Prime do. The one that's gonna pay a greater dollar amount, depending on what service you go for, is gonna be the VIP Prime. Um, so what I mean by that, I'm gonna give you an example. So for hospital confinement benefits, the VIP Standard would cover \$50 per day from that to 30 days. The VIP Plus would cover \$100 per day from that to 30 days. And then the VIP Prime would cover \$100 per day from that to 30 days. So the VIP Plus and Prime cover the same amount in that area, but- but whenever it comes to, like, surgery and hospitals, the Standard would cover \$250 per day from that to one day. The VIP Plus would cover \$1000 per day from that to one day. And then the VIP Prime would cover \$2000 per day from that to one day. For surgery and physician office, the

Standard covers \$125 per day from that to two days. The VIP Plus would cover \$250 per day from that to two days. And then the VIP Prime would cover \$1000 per day from that to two days. So the VIP Prime's always gonna cover that greater flat fee depending on what service you go for. The VIP Plus does cover all the services that the Prime do, but just like I said earlier, the Prime is gonna pay off that greater dollar amount.

Speaker speaker_2: Okay.

Speaker speaker_1: Um, so if you were to select between those three, if you were to get the VIP Standard for employee only, that would be a weekly deduction of \$17.66 for the most basic one. Then for the VIP Plus, it would be \$31.61 weekly deduction for employee only. Or if you were to select the VIP Prime, which is the one that pays that greater dollar amount, it would be \$43.28 weekly. So those are three of the hospital indemnity plans. Then there's another, um, medical plan that's the NEC Tele-RF. That plan, however, is only a preventative plan. So it won't cover your doctor visits if sick, hospital visits if..... if injured, urgent care, emergency room or surgery. So, it's not going to cover any of the things that I just went over, um-

Speaker speaker_3: Okay.

Speaker speaker_1: ... compared to the VIPs. So, it's only for preventative services, so it will cover, like, one physical visit a year, some vaccines, some cancer screenings, some ST screens, but it's not going to cover anything if you go to the doctor 'cause you're sick. It's only for preventative services. Um, that plan-

Speaker speaker_3: Okay.

Speaker speaker_1: ... does require you to stay within the network. Compared to the VIPs, for the MEC Tele-RS, which is your preventative plan, you do have to stay within the network to be covered. Um, it covers you at 100% if you stay within the network. It does include, indeed, preventative prescription benefits through Alexar, and it also does include Walmart Health Virtual Care. And in addition, it also includes something called Free RS, which gives you access to over 90% of the generics drugs prescribed in the US for, like, a cheaper price. But like I said, this is only a preventative plan.

Speaker speaker_3: Yeah.

Speaker speaker_1: Um, so, so that one's, like, basic, basic. Um, if you were to select that one for employee only, that would be \$16.80. Um, something that I forgot to tell you about the VIP plans, those don't cover your preventative care, so those don't cover what the MEC Tele-RS covers. Um, however, it does, they do cover your doctor visits if you get sick, hospital visits, urgent care, emergency rooms, and surgeries. And then the MEC Tele-RS doesn't include none of that. So it's like backwards.

Speaker speaker_3: Oh, but there's no preventative with any of the VIPs?

Speaker speaker_1: Y- yeah, so I'm about to go through that one.

Speaker speaker_3: Oh, okay.

Speaker speaker_1: So, there is a fourth one. Um, so there's the three VIPs, the MEC Tele-RS, which is your preventative, and then the fifth one that I was gonna go over, it's called the MEC Enhanced. This one requires you to stay within the network. However, it does include your preventative care, which would be your annuals, your vaccines, some vaccines, some cancer screenings, some STD screenings, and it does include benefits for your, like, doctor visits if sick, hospital visits, urgent care room, surgeries. So it's, like, both of those two things combined. However, for the MEC Enhanced, um, this plan doesn't have flat fees like the other one. This one has co-pays. So, in the areas of, like, primary care visit, specialty care visit and urgent care room visit, um, you're limited to four visits annually per person or 10 per family. However, those do require those co-pays. Also, when it comes to the preventative care prescriptions, you would be required to give a co-payment. Um, so for-

Speaker speaker_3: Okay.

Speaker speaker_1: ... primary care visits, you're limited to four visits annually per person or 10 per family, and that requires a \$10 co-pay for that visit. For your specialty care visits, you're limited to four visits annually per person or 10 per family, and that one requires a \$50 co-pay per visit. Urgent care visits, same thing, limited to four visits annually per person or e- or 10 per family. That one would be a co-pay of \$60 per visit. When it comes to the prescriptions, preventative prescriptions, um, for the pharmacy option, you get a 30-day supply, but you are required to give a \$5 co-pay- co-payment. Um, for mail-order options, you get a 90-day supply, but you are required to give a \$15 co-payment, and that supplies of 90 days. Um, since it's covered through... Since it does have, like, hospital benefits, hospital emergency room, emergency room, um, you are also covered through PharmaBill, which you can pay up to \$10, \$20, \$30 for the generic medication. And for the non-generic, they do offer a discount. If you were to get that one, however, for employee only, that would be a weekly deduction of \$43.76. So it's a little bit more. Um, but it, like I said, it does include your preventative care as well as some of the hospital indemnity.

Speaker speaker_3: Okay.

Speaker speaker_1: Um, and then there's additional benefits that you could add like vision, dental, term life, 24-hour, group accident, short-term disability and critical illness with cancer. But those, you would have to include. So let's say you would, you would like to add the dental plan, um, that, for employee only is \$3.63. For a preventative visit, it would cover you at 100%. Anything basic, like a cleaning would be covered at 80%. Basic restorative, like if they gotta fill in a cavity, that's covered at 80%. X-rays are covered at 80%, and your annual maximum is \$500. You would have to give a one-time deductible of \$50 if you were to select the individual plan. Um, that's only good-

Speaker speaker_3: Okay.

Speaker speaker_1: ... for that one time. And then, of course, we have vision, term life and all of those additional ones.

Speaker speaker_3: Okay.

Speaker speaker_1: Um, did you want to go ahead and enroll or did you want to think about what you wanted to enroll into?

Speaker speaker_3: Um, I don't want to think about it, like, um, 'cause I'm looking for, uh, yeah, for f- for employee and children right now and just looking at the prices.

Speaker speaker_1: Gotcha. Um, so you're right now in your personal open enrollment period. It looks like your, the last day that you have is till December 4th.

Speaker speaker_3: Oh, okay.

Speaker speaker_1: So you have, you have, um, a few days to think about it. Um-

Speaker speaker_3: Yeah.

Speaker speaker_1: ... before you m- you make a selection or anything, I was gonna tell you that all the medical plans...So, the three VIPs that I went over, then the preventative one, that's called the MEC Tele-RS, and then the MEC Enhanced, which is the one that includes preventative care as well as the benefits when it comes to the hospital. Um, that one, vision and dental, those are all under a IRS regulation, that's called Section 125. So, technically, what that section is, is if you were to select any of those plans that I just told you about, um, it allows you to pay those plans with pre-tax dollars. Um, however, if you were to select those plans, you're not allowed to drop those particular plans or make any changes if you're not within your first 30 days-

Speaker speaker_4: Yeah.

Speaker speaker_1: ... um, of receiving your first check. So, in other words, after December 5th, or you would have to do it on your company's open enrollment period, which for Partners Personal, it was in October. So, to make, to either drop those plans that I just went over, the sec, that's under that section, um, you would either have to be within your first 30 days of receiving your first check or be within company open enrollment period, which is in October. So, let's say you select dental, vision, and one of the medical plans, um, you could make changes or drop them before December 4th, but after December 4th, you would have to wait for your next company open enrollment period, which would be next October.

Speaker speaker_4: Oh, I see.

Speaker speaker_1: Yes, sir. Um, due to the fact that it allows you to pay those plans with pre-tax dollars.

Speaker speaker_4: Yeah.

Speaker speaker_1: Um, so that's why, uh, I just wanted to let you know that before you do make a selection or whenever you call. Um, either way, whenever you call, I'm pretty sure they're gonna notify you about that section, but I just wanted to tell you.

Speaker speaker_4: Okay.

Speaker speaker_1: Just so that you can keep that in mind while you're thinking about what you want to enroll into. So, all of the medical plans are under that regulation, so the three VIPs

are under that regulation, dental, vision and then the TMECs, okay?

Speaker speaker_4: Okay. I see. Got it.

Speaker speaker_1: All right. Um, did you have any more questions for me?

Speaker speaker_4: Um, no, that, that, that'd be it.

Speaker speaker_1: All right. Well, thank you for your time. I hope you have a great day.

Speaker speaker_4: You too. Appreciate it. Thank you.

Speaker speaker_1: Thank you.

Speaker speaker_4: Bye.