

## **Transcript: Estefania**

**Acevedo-5645205795160064-5244783779561472**

### **Full Transcript**

Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you? Hi. I will be looking to activate my credit card account for Personal Partners. Okay. Um, did you receive it already? I received a demo version. I don't know if it's a real version. It didn't have my name on it or nothing. Okay. Um, okay. Let me just get in your account to see if you're active already. What staffing agency are you with? You said Partners Personal? Yeah. And then, what are the last four of your Social? Uh, 1453. And your first and last name? D'Avante Collins. Oh, I'm sorry. I couldn't hear you. Can you say that again? D'Avante. D apostrophe A-V-A-N-T-E. Collins? Uh, yes, ma'am. Okay. For security purposes, can you verify your address and date of birth? 7232 Haughey Springs Road, Pendergrass, Georgia. Okay. And then, what was that date of birth? You say what, ma'am? Um, can you verify your date of birth? 11/13/03. I have 706-362-3801 as your phone number. Is that up-to-date? Yes, ma'am. It is. Okay. And then, I have your first name, last name, 86 at gmail.com. Is that up-to-date? Yes, ma'am. Okay. Thank you. Okay. So, you actually don't have any coverage yet. Um, did you want to go ahead and enroll? Yes, ma'am. It looks okay here 'cause your last day I was gonna tell you to enroll would be May the 21st. So, if you did want to enroll, you could do it now. Um, last day would be the 21st. After the 21st, you would have to wait for the next company open enrollment, which is towards the end of the year. Um, did you know what you wanted to be enrolled into already, though? Or did you want me to send you the benefit guide and go over the plan? You said May 21st? Yeah. That's your last day. They give you 30 days from the time that you receive your first check to be eligible to enroll into the benefits. After those 30 days are up, though, you would have to wait for the next company open enrollment, which is held in October. So, you can either enroll within your first 30 days of receiving your first check or within the month of October when they're within company open enrollment. Um, but you do have a deadline which is the last day that you would have to do your enrollment is May 21st. That's the last day. After the 21st, if you call the 22nd which is a Thursday, they're gonna tell you have to wait for the next company open enrollment which is held in the month of October. So, if you want, I can go ahead and send you that benefit guide that has all the plans that they offer. And if you want, I can explain the plan to you. But it's your choice 'cause like I said, you have till the 21st. Um, but I can go ahead and do your enrollment today as well. Yes, ma'am. I would love that. All right. Okay. And then, I'mma go ahead and email that to you. If you could please confirm that you received the email that I'mma send to you just so that I'm sure that you got it. And then once you've received it, um, I'll start going over the plan. All right, sir. I went ahead and emailed that to your email. Can you please confirm that you received it? It should come from an email that says info@benefitsinacard.com. Okay. Let me check my email. Yes, ma'am. I received it. Okay. So, let's see what they offer. Okay. So, were you looking into enrolling into the medical plans by yourself or with a dependent? By myself.

By yourself. Okay. So, it looks like they offer a total of five different medical plans. The first one that I'm gonna go over, it's called the Stay Healthy MUC Tele-RS. So, that plan is only a preventative plan, meaning it's only gonna cover things such as a physical, some vaccines, some STD and cancer screenings. But it's not gonna cover any doctor visits if sick, no hospitalization, no urgent care, no emergency room, neither... No surgeries. So, it's only for your preventative visits and it does require you to stay within the network. So, what I mean by that is they do... Um, you do have to only use their clinics and doctors to receive coverage. So, it does offer a in-network requirement, but you do receive prescription benefits for your preventative prescriptions through Medimpact. And they offer a membership with FreeRx which FreeRx gives you access to the top 90% generic drugs prescribed in the US, some of those generic medications being free and some of them having their discounts. This plan also does include Virtual Urgent Care which offers medical assistance virtually via telephone or video call with medical providers. But like I said, the plan that's called StayHealthy MUC Tele-RS is only for those preventative visits. It doesn't cover any doctor visits if sick, no urgent care, none of that. Just for preventative services and it does require a in-network requirement. So, if you select this preventative plan that's only preventative for employee, it will be a weekly deduction of \$16.80 weekly from your paycheck. So that's the first plan. That's only preventative. Then they offer three other, um, plans called the VIPs. There is the standard, the VIP Standard, the VIP Plus, and the VIP Prime. These three plans are the ones that will cover a flat fee towards your doctor visits, except urgent care, emergency room, surgeries, and hospital visits. However, your three VIPs do not cover what your Stay Healthy plan covers, which would be your preventative visits such as a physical, STD screening, cancer screenings, vaccines. That's preventative. So the VIPs don't cover what your Stay Healthy covers. So they don't cover what the first plan that I just went over covers, and the VIPs don't require any networks. So with your three VIPs, you know, the Standard, the Plus and the Prime, you can be out-of-network and still receive coverage as long as your provider accepts the insurance. It really just depends on your provider if he accepts those three VIPs. Um, you do receive prescription benefits as well, but through Pharmacoville. And depending on the generic medication that it is, it just depends on how much you spend. You can spend up to \$30, 10... \$20 or \$10. It just depends on the medication and for the non-generics, you do receive a discount. These three plans also do include the virtual urgent care, which like I said earlier, it offers medical assistance virtually with medical providers via telephone or video call, and the three VIPs cover a flat fee towards your services. So out of the three, the Standard one is the most basic one, because it doesn't cover your intensive care, rehabilitation, nor your preventative surgeries, while the VIP Plus and the VIP Prime do. The VIP Prime is gonna cover a little bit more out-of-pocket towards those services compared to the Standard and the Prime. And then after the, the VIP Prime, the middleman would be the VIP Plus. So I'm gonna give you an example. For surgery and hospital, the VIP Standard covers a flat fee of \$250 per day for a max of one day, while the VIP Plus would cover \$1,000 per day for a max of one day, and the VIP Prime would cover \$2,000 per day for a max of one day. So if VIP Prime covers a little bit more, then it would be the Plus, and then at the end it would be the Standard. So if you select between your three VIPs, the VIP Standard would be a weekly deduction of \$17.66 weekly from your paycheck. The VIP Plus would be \$31.61 weekly from your paycheck, or the VIP Prime, which would be \$43.28 weekly from your paycheck. So again, the VIPs only cover those doctor visits, specific urgent care, emergency room, surgeries. They

don't require any in-network, but they don't cover any preventative. Okay? And then you are allowed to select the Stay Healthy and one of the VIPs if that's something you would want to do. Um, and then the last plan that they offer is called the Stay Healthy MUC Enhanced. So the Stay Healthy MUC Enhanced would be a weekly deduction of \$43.76 weekly from your paycheck. This is the only medical plan that they offer that covers both your preventative and your hospital indemnity. So it covers preventative such as a physical, some vaccines, some STD and cancer screening, and it also covers doctor visits except hospitalization of injured, urgent care, emergency room and surgeries. So it covers both benefits. However, it does require you to stay within a network, so you can only use the list of their clinics and doctors who give coverage. And this one does require copays compared to the other ones that I just went over. So the one that offers both benefits does require you to stay within a network and it does require copays. So in the area of primary care, specialty care visits and urgent care visits, you would be limited to four visits annually per person or 10 per family. When it comes to your primary care visits, you would be required to pay a \$10 copay per visit. When it comes to your specialty care visits, you would be required to pay a \$50 copay per visit. When it comes to urgent care visits, you would be required to pay a \$60 copay per visit. Since you receive both your preventative care and your hospital indemnity care covered, you get two different carriers when it comes to your prescription. You would have prescription cover through Medimpact as well as Pharmacoville. For your pharmacy option, for your generic medications, you would have a 30-day supply, and you would be required to pay a \$5 copay. For your mail order option, you have a 90-day supply. And for those generic prescriptions, you would be required to pay a \$15 copay. Like I said, you do receive prescription benefits as well up to Pharmacoville. It just depends on how much you would have to pay when it comes to your generic medications. And for the non-generics, they do offer you a discount. It also includes the virtual urgent care, and it also covers your group accident. So for this one, it would be \$43.76 weekly from your paycheck. And again, the one that's called Stay Healthy MUC Enhanced is the one that covers both preventative and your hospital indemnity. So those are the five medical plans that they offer. And then of course, they do offer additional benefit options which are considered like your dental plan, your short-term disability, your critical illness, your vision, and those do have their separate deductions to them. So for example, vision for employee only, it's \$2.15 weekly from your paycheck. Dental for employee only is \$3.63 weekly from your paycheck. So, it really just depends on how many plans you select, which ones they are, how much your weekly deduction is from your paycheck. And I was gonna mention to you that for-... your medical plans, which are the ones that I just went over, as well as dental and vision. They're under a IRS regulation called Section 125. So what Section 125 is, is that allows you to pay these plans with pre-tax dollars. However, if you wanna cancel the plan later on or make changes to the plan, you do have to do it within the first 30 days of receiving your first check, which means n- nothing passing May 21st. After May 21st, if you're enrolled into any of the plans that I just mentioned and you wanna cancel or make changes, you are gonna get told that you have to wait for the next company open enrollment to make the cancellation or the change, which for Partners Personal's done in the month of October. So you either have to do it... nothing after May 21st. So before May 21st, you have to call and do that, or within the month of October when they're within company open enrollment. So it is important that you're sure which you wanna be enrolled into 'cause after May 21st, if you don't call to either cancel or make changes, you're gonna get told due to

the IRS regulation that you have to wait until the month of October when the company open enrollment to make these changes or cancellations. So you're kinda, like, stuck with it for a little bit. Yeah. Um, I would like to keep this one 'cause like I said, I don't go to hospitals that much, so. Okay. So which one would you like? Uh, the \$16 one, if that's all right. I'm sorry. I'm having trouble hearing you. Which one? The \$17 one plan. I forgot which, what name was it? So there's the Stay Healthy MEC. That one is only preventative, so it's only gonna cover like a physical, some vaccines, an ST and cancer screen. But if you go to the doctor sick with that one, you're not gonna be covered 'cause it's only for your preventative visits. So preventative is anything before a problem actually happens, so like your annual checkups. The, that one's the Stay Healthy MEC Tele-RS. Then the three VIPs, the Standard, the Plus, and the Prime, are the ones that actually do cover, like, urgent care, emergency room, um, doctor visits if sick. But they don't cover your preventative, so they do not cover, like, a physical, your annual checkups, ST and cancer screening vaccines. That, the VIPs do not cover. Then the last one that I went over, which is the Stay Healthy MEC Enhanced, the one that has the Enhanced part to it, that one covers preventative and it actually covers your doctor visits if sick. So it covers both areas, but you're required to stay within the network, so you can only use the list of their doctors and clinics, and you have to make co-pays. Um- Yeah. I would- And that one's- ... I would like the first one. The first one? Yes, ma'am. Okay, so that one's the Stay Healthy MEC Tele-RS. That one's \$16.80 weekly from your paycheck. Did you wanna do anything else? No, ma'am. That's it. Okay. I do have to inform you that that plan that you selected is under Section 125. So like I said, you are allowed to pay with pre-tax dollars. However, to cancel the plan that you selected, or to later on add, like, dependents, you do have to call before May the 21st- The 1st. ... to either cancel- Yeah, the 21st. ... or make changes. Okay? Yes. I just wanted to- Yes, ma'am. ... make sure. Okay, and then, um, did you have any questions? I was gonna tell you to please allow one or two weeks for your staffing agency to start making the first deduction of the \$16.80 from your paycheck. Once you see that very first deduction of \$16.80 come out of your check, the following Monday, your plan become effective. And then by that- Yes, ma'am. ... first or second week of active coverage, you should be getting your preventative card mailed out to you. And if you have, like, a preventative visit coming up and you still don't have your card, you're welcome to contact us and we can email it to you. Just keep in mind that you do have to stay within network with that plan, okay? Yes, ma'am. Thank you. You're welcome. I hope you have a great day. You too.

## 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: Hi. I will be looking to activate my credit card account for Personal Partners.

Speaker speaker\_0: Okay. Um, did you receive it already?

Speaker speaker\_1: I received a demo version. I don't know if it's a real version. It didn't have my name on it or nothing.

Speaker speaker\_0: Okay. Um, okay. Let me just get in your account to see if you're active already. What staffing agency are you with? You said Partners Personal?

Speaker speaker\_1: Yeah.

Speaker speaker\_0: And then, what are the last four of your Social?

Speaker speaker\_1: Uh, 1453.

Speaker speaker\_0: And your first and last name?

Speaker speaker\_1: D'Avante Collins.

Speaker speaker\_0: Oh, I'm sorry. I couldn't hear you. Can you say that again?

Speaker speaker\_1: D'Avante. D apostrophe A-V-A-N-T-E.

Speaker speaker\_0: Collins?

Speaker speaker\_1: Uh, yes, ma'am.

Speaker speaker\_0: Okay. For security purposes, can you verify your address and date of birth?

Speaker speaker\_1: 7232 Haughey Springs Road, Pendergrass, Georgia.

Speaker speaker\_0: Okay. And then, what was that date of birth?

Speaker speaker\_1: You say what, ma'am?

Speaker speaker\_0: Um, can you verify your date of birth?

Speaker speaker\_1: 11/13/03.

Speaker speaker\_0: I have 706-362-3801 as your phone number. Is that up-to-date?

Speaker speaker\_1: Yes, ma'am. It is.

Speaker speaker\_0: Okay. And then, I have your first name, last name, 86 at gmail.com. Is that up-to-date?

Speaker speaker\_1: Yes, ma'am.

Speaker speaker\_0: Okay. Thank you. Okay. So, you actually don't have any coverage yet. Um, did you want to go ahead and enroll?

Speaker speaker\_1: Yes, ma'am.

Speaker speaker\_0: It looks okay here 'cause your last day I was gonna tell you to enroll would be May the 21st. So, if you did want to enroll, you could do it now. Um, last day would be the 21st. After the 21st, you would have to wait for the next company open enrollment, which is towards the end of the year. Um, did you know what you wanted to be enrolled into

already, though? Or did you want me to send you the benefit guide and go over the plan?

Speaker speaker\_1: You said May 21st?

Speaker speaker\_0: Yeah. That's your last day. They give you 30 days from the time that you receive your first check to be eligible to enroll into the benefits. After those 30 days are up, though, you would have to wait for the next company open enrollment, which is held in October. So, you can either enroll within your first 30 days of receiving your first check or within the month of October when they're within company open enrollment. Um, but you do have a deadline which is the last day that you would have to do your enrollment is May 21st. That's the last day. After the 21st, if you call the 22nd which is a Thursday, they're gonna tell you have to wait for the next company open enrollment which is held in the month of October. So, if you want, I can go ahead and send you that benefit guide that has all the plans that they offer. And if you want, I can explain the plan to you. But it's your choice 'cause like I said, you have till the 21st. Um, but I can go ahead and do your enrollment today as well.

Speaker speaker\_1: Yes, ma'am. I would love that. All right.

Speaker speaker\_0: Okay. And then, I'mma go ahead and email that to you. If you could please confirm that you received the email that I'mma send to you just so that I'm sure that you got it. And then once you've received it, um, I'll start going over the plan. All right, sir. I went ahead and emailed that to your email. Can you please confirm that you received it? It should come from an email that says info@benefitsinacard.com.

Speaker speaker\_1: Okay. Let me check my email. Yes, ma'am. I received it.

Speaker speaker\_0: Okay. So, let's see what they offer. Okay. So, were you looking into enrolling into the medical plans by yourself or with a dependent?

Speaker speaker\_1: By myself.

Speaker speaker\_0: By yourself. Okay. So, it looks like they offer a total of five different medical plans. The first one that I'mma go over, it's called the Stay Healthy MUC Tele-RS. So, that plan is only a preventative plan, meaning it's only gonna cover things such as a physical, some vaccines, some STD and cancer screenings. But it's not gonna cover any doctor visits if sick, no hospitalization, no urgent care, no emergency room, neither... No surgeries. So, it's only for your preventative visits and it does require you to stay within the network. So, what I mean by that is they do... Um, you do have to only use their clinics and doctors to receive coverage. So, it does offer a in-network requirement, but you do receive prescription benefits for your preventative prescriptions through Medimpact. And they offer a membership with FreeRx which FreeRx gives you access to the top 90% generic drugs prescribed in the US, some of those generic medications being free and some of them having their discounts. This plan also does include Virtual Urgent Care which offers medical assistance virtually via telephone or video call with medical providers. But like I said, the plan that's called StayHealthy MUC Tele-RS is only for those preventative visits. It doesn't cover any doctor visits if sick, no urgent care, none of that. Just for preventative services and it does require a in-network requirement. So, if you select this preventative plan that's only preventative for employee, it will be a weekly deduction of \$16.80 weekly from your paycheck. So that's the

first plan. That's only preventative. Then they offer three other, um, plans called the VIPs. There is the standard, the VIP Standard, the VIP Plus, and the VIP Prime. These three plans are the ones that will cover a flat fee towards your doctor visits, except urgent care, emergency room, surgeries, and hospital visits. However, your three VIPs do not cover what your Stay Healthy plan covers, which would be your preventative visits such as a physical, STD screening, cancer screenings, vaccines. That's preventative. So the VIPs don't cover what your Stay Healthy covers. So they don't cover what the first plan that I just went over covers, and the VIPs don't require any networks. So with your three VIPs, you know, the Standard, the Plus and the Prime, you can be out-of-network and still receive coverage as long as your provider accepts the insurance. It really just depends on your provider if he accepts those three VIPs. Um, you do receive prescription benefits as well, but through Pharmacoville. And depending on the generic medication that it is, it just depends on how much you spend. You can spend up to \$30, 10... \$20 or \$10. It just depends on the medication and for the non-generics, you do receive a discount. These three plans also do include the virtual urgent care, which like I said earlier, it offers medical assistance virtually with medical providers via telephone or video call, and the three VIPs cover a flat fee towards your services. So out of the three, the Standard one is the most basic one, because it doesn't cover your intensive care, rehabilitation, nor your preventative surgeries, while the VIP Plus and the VIP Prime do. The VIP Prime is gonna cover a little bit more out-of-pocket towards those services compared to the Standard and the Prime. And then after the, the VIP Prime, the middleman would be the VIP Plus. So I'm gonna give you an example. For surgery and hospital, the VIP Standard covers a flat fee of \$250 per day for a max of one day, while the VIP Plus would cover \$1,000 per day for a max of one day, and the VIP Prime would cover \$2,000 per day for a max of one day. So if VIP Prime covers a little bit more, then it would be the Plus, and then at the end it would be the Standard. So if you select between your three VIPs, the VIP Standard would be a weekly deduction of \$17.66 weekly from your paycheck. The VIP Plus would be \$31.61 weekly from your paycheck, or the VIP Prime, which would be \$43.28 weekly from your paycheck. So again, the VIPs only cover those doctor visits, specific urgent care, emergency room, surgeries. They don't require any in-network, but they don't cover any preventative. Okay? And then you are allowed to select the Stay Healthy and one of the VIPs if that's something you would want to do. Um, and then the last plan that they offer is called the Stay Healthy MUC Enhanced. So the Stay Healthy MUC Enhanced would be a weekly deduction of \$43.76 weekly from your paycheck. This is the only medical plan that they offer that covers both your preventative and your hospital indemnity. So it covers preventative such as a physical, some vaccines, some STD and cancer screening, and it also covers doctor visits except hospitalization of injured, urgent care, emergency room and surgeries. So it covers both benefits. However, it does require you to stay within a network, so you can only use the list of their clinics and doctors who give coverage. And this one does require copays compared to the other ones that I just went over. So the one that offers both benefits does require you to stay within a network and it does require copays. So in the area of primary care, specialty care visits and urgent care visits, you would be limited to four visits annually per person or 10 per family. When it comes to your primary care visits, you would be required to pay a \$10 copay per visit. When it comes to your specialty care visits, you would be required to pay a \$50 copay per visit. When it comes to urgent care visits, you would be required to pay a \$60 copay per visit. Since you receive both your preventative care and your

hospital indemnity care covered, you get two different carriers when it comes to your prescription. You would have prescription cover through Medimpact as well as Pharmacoville. For your pharmacy option, for your generic medications, you would have a 30-day supply, and you would be required to pay a \$5 copay. For your mail order option, you have a 90-day supply. And for those generic prescriptions, you would be required to pay a \$15 copay. Like I said, you do receive prescription benefits as well up to Pharmacoville. It just depends on how much you would have to pay when it comes to your generic medications. And for the non-generics, they do offer you a discount. It also includes the virtual urgent care, and it also covers your group accident. So for this one, it would be \$43.76 weekly from your paycheck. And again, the one that's called Stay Healthy MUC Enhanced is the one that covers both preventative and your hospital indemnity. So those are the five medical plans that they offer. And then of course, they do offer additional benefit options which are considered like your dental plan, your short-term disability, your critical illness, your vision, and those do have their separate deductions to them. So for example, vision for employee only, it's \$2.15 weekly from your paycheck. Dental for employee only is \$3.63 weekly from your paycheck. So, it really just depends on how many plans you select, which ones they are, how much your weekly deduction is from your paycheck. And I was gonna mention to you that for... your medical plans, which are the ones that I just went over, as well as dental and vision. They're under a IRS regulation called Section 125. So what Section 125 is, is that allows you to pay these plans with pre-tax dollars. However, if you wanna cancel the plan later on or make changes to the plan, you do have to do it within the first 30 days of receiving your first check, which means n- nothing passing May 21st. After May 21st, if you're enrolled into any of the plans that I just mentioned and you wanna cancel or make changes, you are gonna get told that you have to wait for the next company open enrollment to make the cancellation or the change, which for Partners Personal's done in the month of October. So you either have to do it... nothing after May 21st. So before May 21st, you have to call and do that, or within the month of October when they're within company open enrollment. So it is important that you're sure which you wanna be enrolled into 'cause after May 21st, if you don't call to either cancel or make changes, you're gonna get told due to the IRS regulation that you have to wait until the month of October when the company open enrollment to make these changes or cancellations. So you're kinda, like, stuck with it for a little bit.

Speaker speaker\_2: Yeah. Um, I would like to keep this one 'cause like I said, I don't go to hospitals that much, so.

Speaker speaker\_0: Okay. So which one would you like?

Speaker speaker\_2: Uh, the \$16 one, if that's all right.

Speaker speaker\_0: I'm sorry. I'm having trouble hearing you. Which one?

Speaker speaker\_2: The \$17 one plan. I forgot which, what name was it?

Speaker speaker\_0: So there's the Stay Healthy MEC. That one is only preventative, so it's only gonna cover like a physical, some vaccines, an ST and cancer screen. But if you go to the doctor sick with that one, you're not gonna be covered 'cause it's only for your preventative visits. So preventative is anything before a problem actually happens, so like your annual checkups. The, that one's the Stay Healthy MEC Tele-RS. Then the three VIPs,



the Standard, the Plus, and the Prime, are the ones that actually do cover, like, urgent care, emergency room, um, doctor visits if sick. But they don't cover your preventative, so they do not cover, like, a physical, your annual checkups, ST and cancer screening vaccines. That, the VIPs do not cover. Then the last one that I went over, which is the Stay Healthy MEC Enhanced, the one that has the Enhanced part to it, that one covers preventative and it actually covers your doctor visits if sick. So it covers both areas, but you're required to stay within the network, so you can only use the list of their doctors and clinics, and you have to make co-pays. Um-

Speaker speaker\_2: Yeah. I would-

Speaker speaker\_0: And that one's-

Speaker speaker\_2: ... I would like the first one.

Speaker speaker\_0: The first one?

Speaker speaker\_2: Yes, ma'am.

Speaker speaker\_0: Okay, so that one's the Stay Healthy MEC Tele-RS. That one's \$16.80 weekly from your paycheck. Did you wanna do anything else?

Speaker speaker\_2: No, ma'am. That's it.

Speaker speaker\_0: Okay. I do have to inform you that that plan that you selected is under Section 125. So like I said, you are allowed to pay with pre-tax dollars. However, to cancel the plan that you selected, or to later on add, like, dependents, you do have to call before May the 21st-

Speaker speaker\_2: The 1st.

Speaker speaker\_0: ... to either cancel-

Speaker speaker\_2: Yeah, the 21st.

Speaker speaker\_0: ... or make changes. Okay?

Speaker speaker\_2: Yes.

Speaker speaker\_0: I just wanted to-

Speaker speaker\_2: Yes, ma'am.

Speaker speaker\_0: ... make sure. Okay, and then, um, did you have any questions? I was gonna tell you to please allow one or two weeks for your staffing agency to start making the first deduction of the \$16.80 from your paycheck. Once you see that very first deduction of \$16.80 come out of your check, the following Monday, your plan become effective. And then by that-

Speaker speaker\_2: Yes, ma'am.

Speaker speaker\_0: ... first or second week of active coverage, you should be getting your preventative card mailed out to you. And if you have, like, a preventative visit coming up and

you still don't have your card, you're welcome to contact us and we can email it to you. Just keep in mind that you do have to stay within network with that plan, okay?

Speaker speaker\_2: Yes, ma'am. Thank you.

Speaker speaker\_0: You're welcome. I hope you have a great day.

Speaker speaker\_2: You too.