

Transcript: Estefania

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Full Transcript

Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you? Yes, I was calling to look into the benefits and cost of the benefits. Okay. What staffing agency do you work for? Partner. And then what are the last four of your Social? 5542. And your first and last name, please. Iretha Johnson. For security purposes, can you verify address and date of birth? 1937 Highway 9 West, Beulah, South Carolina 29536. May the 11th, 1971. Is your phone number 843-506-2160? Yes. And then I have irenej71@yahoo.com. Is that up-to-date? Mm-hmm. Okay. Definitely. And then I was gonna tell you, if you want, I can actually go ahead and send you that guide that shows you the plans and their prices to your email. Okay, that would be fine. Yeah, that'll work. Okay. Give me one second. Let me send that over. And then if you want to, I can go over the plans with you. That's fine too. Yeah, that'll work too. Okay. All right, let me see. Okay. I went ahead and emailed that to you. Do you mind verifying that you received it? It should come from an email that says info@benefitsinacard.com. Um, I have received it. 30 seconds. And then I would also- Okay, I see it now. Okay. All right, and when you're ready, I can go ahead and go over the plans. Go ahead. You can go ahead. Okay. So, it looks like they offer five different medical plans. From the five, the very first one that I'm about to go over is the only one that covers both your preventative services, which are considered like a physical, some vaccines, some STD and cancer screenings, as well as your hospital indemnity services, which is considered doctor visits that's sick, hospital visits that's injured, urgent care, emergency room and surgeries. So it covers both your preventative and your hospital indemnity. The other four that they offer, either they only cover your preventative services, which would be considered like your annuals and check-ups, or they only cover your hospital indemnity, which means doctor visits once you become ill, but they don't cover your preventative. So this very first one offers both of those benefits, so both your preventative and hospital indemnity. This one's called your Stay Healthy MEC Enhanced. With the Stay Healthy MEC Enhanced, however, you are required co-pays and you are required to stay only within the network. So you're only allowed to use their clinics and doctors to receive coverage, but it does offer both preventative and hospital indemnity services. When it comes to your primary care visits, a \$10 copay per visit would be 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 would be required, and you would be limited to four visits annually per person, or 10 per family. For urgent care visits, you would be limited to four visits annually per person, or 10 per family, and a \$60 copay per visit's required. You get prescription benefits with Alapsir when it comes to your preventative 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 would be required for those generic medications. You also get prescription benefits through Pharmacoville, which you can pay up to even \$10, \$20 or \$30, just depending on the generic

medication that you get. And for the non-generics, they do offer a discount. These, the Stay Healthy MEC Enhanced offers something called Virtual Urgent Care, which offers medical assistance virtually with medical providers and it covers a flat fee towards your hospital indemnity. So for hospital admission benefit, it'll cover \$1,000 per day for a max of a day. For surgery and hospital, it'll cover \$500 per day for a max of a day. If you select the Stay Healthy MEC Enhanced for employee, that's a weekly deduction of \$43.76 for the employee plan. So again, the Stay Healthy MEC Enhanced, out of the five, is the only one of the five medical plans that covers both your preventative and your hospital indemnity. The other four cover either just your preventative or just your hospital indemnity. Okay? So this one's the Stay Healthy MEC Enhanced. For employee, that's a weekly deduction of \$43.76, if you get the employee plan. If you get employee and spouse, it would be \$74.07 weekly. Employee and children, \$71.46 weekly, or the family plan which would be \$101.71 weekly. Okay? And then the second plan that I'm going to go over is called the Stay Healthy M.E.C. Tele-RS. So with the M.E.C. Tele-RS, this is just your preventative plan, meaning it's only going to cover your preventative services such as one physical visit a year, some vaccines, some cancer screenings, some STD screenings. So only those preventative services and it's not going to cover no doctor visits if sick, no hospital visits, no urgent care visits, no emergency room visits. So your M.E.C. Tele-RS is just for your preventative services and it also requires you just to stay within the network, um, to receive coverage, so you do only have to use their clinics and doctors to be covered. However, you do receive prescription benefits with the M.E.C. Tele-RS but only with Elecsar and it also offers a membership with FreeRx which gives you access to over 800 of the top 90% generic drugs prescribed in the US. This plan includes something called Virtual Urgent Care which offers medical assistance virtually with medical providers. So if you get the preventative plan, it's only preventative for employee only, that's \$16.80 weekly. For employee and spouse, \$21.70 weekly. Employee and children, \$22.39 weekly, or the family plan of \$26.73 weekly. So that's just the preventative one, and then the other three are called the VIPs. There's three different ones. There's the Standard, the Plus and the Prime. The VIPs are the ones that do only cover your doctor visits if sick, hospital visits if injured, urgent care, emergency room and even some surgeries. However, the VIPs do not cover your preventative visits which would be considered like a physical, a mammogram, pap smear, and that's preventative services so what the VIPs do not cover preventative services, they only cover your actual doctor visits once you become, like, ill. Um, with the VIPs however, you're not required to stay within the network compared to the other two that you kind of do have to stay within the network. With the VIPs you can use providers outside of the network and be covered as long as they take that insurance. They offer prescription benefits as well but only through Pharmacoville and they also offer the virtual urgent care like I said earlier. It offers medical assistance virtually with medical providers. Your three VIPs are going to cover a flat fee depending on the service that you go for. Out of the three, the standard is the most basic one 'cause it doesn't cover intensive care, habilitation or preventive surgery while the VIP Plus and the Prime do. If you select between the VIP Standard and the Prime, the VIP Standard for employee only would be a complete deduction of \$17.66. VIP Plus for employee only is \$31.61 and VIP Prime is \$43.28 weekly. So those are your medical plans. The Stay Healthy M.E.C. Enhanced is the one that offers both your preventative and hospital indemnity, but it requires co-pays and for you to stay within the network. The Stay Healthy M.E.C. Tele-RS is only that preventative plan that requires you

stay within the network, but it's only for preventative services, and your three VIPs don't cover preventative services but they do cover doctor visits if sick and you don't have to stay within the network. So it really just depends on what you feel is best for you. So those are the five medical plans. They do offer additional benefits as well like your dental, vision, term life plan and they do have their separate deductions to them. So for example, vision for employee would be a weekly deduction of \$2.15. Dental for employee, it would be a weekly deduction of \$3.62 weekly. Critical illness would be \$2.51 weekly. So they do have their separate deductions to them as well. And I was gonna also let you know that for your VIP plans, uh, your two M.E.C.s, dental and vision, so technically your medical plans plus dental and vision are under an IRS regulation that's called Section 125. What section, Section 125 is, it allows you to pay these dol- these plans with pre-tax dollars. However, if you do enroll into these plans that are under that IRS regulation and you later want to cancel or make changes to those particular plans, the only time that you're elb- eligible to do that is within the first 30 days of receiving your first check or within company open enrollment which I can let you know when that would be. So your 30 days to make any changes to those plans if you do enroll into any of the medical plans, dental or vision would be March 12th. So if you do enroll, let's say into one of the medical plans as well as dental and vision and let it, later on you want to cancel once you're enrolled, you would have to do it before March 12th because if you wait after March 12th, you're going to get told that you have to wait until the next company open enrollment to either cancel those plans or make changes to those plans. Um, which for partners personal, it's not till the month of October so it, it is kind of important- Oh, okay. ... to be sure what exactly you want to enroll into just because of that IRS regulation 'cause once you're enrolled into those plans that are under that section, if you do want to cancel you could do it, but nothing passing March 12th because let's say you call on the 13th wanting to cancel one of the medical plans, the, or dental or vision or if you want to make changes to those plans like adding a dependent, um, you would have to do it before March 12th. After March 12th, they're going to tell you that you have to do it when the company's within company open enrollment which for them is in the month of October. So you kind of would be stuck with it for like a year. Okay. All right. Hoo, that was a lot of information there. Yes, but like I said, you... I'm not- If you're not so sure yet, you have till the 12th to enroll in general, um, so March 12th- Yeah, okay. ... would be your deadline, your last day to enroll into the benefits or make changes to those plans. Okay. All right then. Let me go home and when I get home, I'm going to sit down and I'll go back over and look over and decide which, which one I want. Okay, that's fine and if you have any questions, we'll be ha- happy to help you and explain them to you again. We're open from 8:00 AM up until 8:00 PM Eastern Time, okay? Uh, oh-kay. All right then. Thank you. You're welcome. Have a nice day. You too. Buh-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: Yes, I was calling to look into the benefits and cost of the benefits.

Speaker speaker_0: Okay. What staffing agency do you work for?

Speaker speaker_1: Partner.

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

Speaker speaker_1: 5542.

Speaker speaker_0: And your first and last name, please.

Speaker speaker_1: Iretha Johnson.

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

Speaker speaker_1: 1937 Highway 9 West, Beulah, South Carolina 29536. May the 11th, 1971.

Speaker speaker_0: Is your phone number 843-506-2160?

Speaker speaker_1: Yes.

Speaker speaker_0: And then I have irenej71@yahoo.com. Is that up-to-date?

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: Okay.

Speaker speaker_1: Definitely.

Speaker speaker_0: And then I was gonna tell you, if you want, I can actually go ahead and send you that guide that shows you the plans and their prices to your email.

Speaker speaker_1: Okay, that would be fine. Yeah, that'll work.

Speaker speaker_0: Okay. Give me one second. Let me send that over. And then if you want to, I can go over the plans with you.

Speaker speaker_1: That's fine too. Yeah, that'll work too.

Speaker speaker_0: Okay. All right, let me see. Okay. I went ahead and emailed that to you. Do you mind verifying that you received it? It should come from an email that says info@benefitsinacard.com.

Speaker speaker_1: Um, I have received it. 30 seconds.

Speaker speaker_0: And then I would also-

Speaker speaker_1: Okay, I see it now.

Speaker speaker_0: Okay. All right, and when you're ready, I can go ahead and go over the plans.

Speaker speaker_1: Go ahead. You can go ahead.

Speaker speaker_0: Okay. So, it looks like they offer five different medical plans. From the five, the very first one that I'm about to go over is the only one that covers both your preventative services, which are considered like a physical, some vaccines, some STD and

cancer screenings, as well as your hospital indemnity services, which is considered doctor visits that's sick, hospital visits that's injured, urgent care, emergency room and surgeries. So it covers both your preventative and your hospital indemnity. The other four that they offer, either they only cover your preventative services, which would be considered like your annuals and check-ups, or they only cover your hospital indemnity, which means doctor visits once you become ill, but they don't cover your preventative. So this very first one offers both of those benefits, so both your preventative and hospital indemnity. This one's called your Stay Healthy MEC Enhanced. With the Stay Healthy MEC Enhanced, however, you are required co-pays and you are required to stay only within the network. So you're only allowed to use their clinics and doctors to receive coverage, but it does offer both preventative and hospital indemnity services. When it comes to your primary care visits, a \$10 copay per visit would be 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 would be required, and you would be limited to four visits annually per person, or 10 per family. For urgent care visits, you would be limited to four visits annually per person, or 10 per family, and a \$60 copay per visit's required. You get prescription benefits with Alapsir when it comes to your preventative 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 would be required for those generic medications. You also get prescription benefits through Pharmacoville, which you can pay up to even \$10, \$20 or \$30, just depending on the generic medication that you get. And for the non-generics, they do offer a discount. These, the Stay Healthy MEC Enhanced offers something called Virtual Urgent Care, which offers medical assistance virtually with medical providers and it covers a ho- flat fee towards your hospital indemnity. So for hospital admission benefit, it'll cover \$1,000 per day for a max of a day. For surgery and hospital, it'll cover \$500 per day for a max of a day. If you select the Stay Healthy MEC Enhanced for employee, that's a weekly deduction of \$43.76 for the employee plan. So again, the Stay Healthy MEC Enhanced, out of the five, is the only one of the five medical plans that covers both your preventative and your hospital indemnity. The other four cover either just your preventative or just your hospital indemnity. Okay? So this one's the Stay Healthy MEC Enhanced. For employee, that's a weekly deduction of \$43.76, if you get the employee plan. If you get employee and spouse, it would be \$74.07 weekly. Employee and children, \$71.46 weekly, or the family plan which would be \$101.71 weekly. Okay? And then the-The, the second plan that I'm going to go over is called the Stay Healthy M.E.C. Tele-RS. So with the M.E.C. Tele-RS, this is just your preventative plan, meaning it's only going to cover your preventative services such as one physical visit a year, some vaccines, some cancer screenings, some STD screenings. So only those preventative services and it's not going to cover no doctor visits if sick, no hospital visits, no urgent care visits, no emergency room visits. So your M.E.C. Tele-RS is just for your preventative services and it also requires you just to stay within the network, um, to receive coverage, so you do only have to use their clinics and doctors to be covered. However, you do receive prescription benefits with the M.E.C. Tele-RS but only with Elecsar and it also offers a membership with FreeRx which gives you access to over 800 of the top 90% generic drugs prescribed in the US. This plan includes something called Virtual Urgent Care which offers medical assistance virtually with medical providers. So if you get the preventative plan, it's only preventative for employee only, that's \$16.80 weekly. For employee and spouse, \$21.70 weekly. Employee and children,

\$22.39 weekly, or the family plan of \$26.73 weekly. So that's just the preventative one, and then the other three are called the VIPs. There's three different ones. There's the Standard, the Plus and the Prime. The VIPs are the ones that do only cover your doctor visits if sick, hospital visits if injured, urgent care, emergency room and even some surgeries. However, the VIPs do not cover your preventative visits which would be considered like a physical, a mammogram, pap smear, and that's preventative services so what the VIPs do not cover preventative services, they only cover your actual doctor visits once you become, like, ill. Um, with the VIPs however, you're not required to stay within the network compared to the other two that you kind of do have to stay within the network. With the VIPs you can use providers outside of the network and be covered as long as they take that insurance. They offer prescription benefits as well but only through Pharmacoville and they offer also the virtual urgent care like I said earlier. It offers medical assistance virtually with medical providers. Your three VIPs are going to cover a flat fee depending on the service that you go for. Out of the three, the standard is the most basic one 'cause it doesn't cover intensive care, habilitation or preventive surgery while the VIP Plus and the Prime do. If you select between the VIP Standard and the Prime, the VIP Standard for employee only would be a complete deduction of \$17.66. VIP Plus for employee only is \$31.61 and VIP Prime is \$43.28 weekly. So those are your medical plans. The Stay Healthy M.E.C. Enhanced is the one that offers both your preventative and hospital indemnity, but it requires co-pays and for you to stay within the network. The Stay Healthy M.E.C. Tele-RS is only that preventative plan that requires you stay within the network, but it's only for preventative services, and your three VIPs don't cover preventative services but they do cover doctor visits if sick and you don't have to stay within the network. So it really just depends on what you feel is best for you. So those are the five medical plans. They do offer additional benefits as well like your dental, vision, term life plan and they do have their separate deductions to them. So for example, vision for employee would be a weekly deduction of \$2.15. Dental for employee, it would be a weekly deduction of \$3.62 weekly. Critical illness would be \$2.51 weekly. So they do have their separate deductions to them as well. And I was gonna also let you know that for your VIP plans, uh, your two M.E.C.s, dental and vision, so technically your medical plans plus dental and vision are under an IRS regulation that's called Section 125. What section, Section 125 is, it allows you to pay these dollar- these plans with pre-tax dollars. However, if you do enroll into these plans that are under that IRS regulation and you later want to cancel or make changes to those particular plans, the only time that you're eligible to do that is within the first 30 days of receiving your first check or within company open enrollment which I can let you know when that would be. So your 30 days to make any changes to those plans if you do enroll into any of the medical plans, dental or vision would be March 12th. So if you do enroll, let's say into one of the medical plans as well as dental and vision and let it, later on you want to cancel once you're enrolled, you would have to do it before March 12th because if you wait after March 12th, you're going to get told that you have to wait until the next company open enrollment to either cancel those plans or make changes to those plans. Um, which for partners personal, it's not till the month of October so it, it is kind of important-

Speaker speaker_2: Oh, okay.

Speaker speaker_0: ... to be sure what exactly you want to enroll into just because of that IRS regulation 'cause once you're enrolled into those plans that are under that section, if you do

want to cancel you could do it, but nothing passing March 12th because let's say you call on the 13th wanting to cancel one of the medical plans, the, or dental or vision or if you want to make changes to those plans like adding a dependent, um, you would have to do it before March 12th. After March 12th, they're going to tell you that you have to do it when the company's within company open enrollment which for them is in the month of October. So you kind of would be stuck with it for like a year.

Speaker speaker_2: Okay. All right. Hoo, that was a lot of information there.

Speaker speaker_0: Yes, but like I said, you...

Speaker speaker_2: I'm not-

Speaker speaker_0: If you're not so sure yet, you have till the 12th to enroll in general, um, so March 12th-

Speaker speaker_2: Yeah, okay.

Speaker speaker_0: ... would be your deadline, your last day to enroll into the benefits or make changes to those plans.

Speaker speaker_2: Okay. All right then. Let me go home and when I get home, I'm going to sit down and I'll go back over and look over and decide which, which one I want.

Speaker speaker_0: Okay, that's fine and if you have any questions, we'll be ha- happy to help you and explain them to you again. We're open from 8:00 AM up until 8:00 PM Eastern Time, okay?

Speaker speaker_2: Uh, oh-kay. All right then. Thank you.

Speaker speaker_0: You're welcome. Have a nice day.

Speaker speaker_2: You too. Buh-bye.