

Transcript: Francesca

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Full Transcript

Your call may be monitored or recorded for quality assurance purposes. Thank you for calling American Top. My name is Francesca. How can I assist you today? Uh, yes, how are you doing today? Good. How are you today? Good. I'm trying to see if I can get some insurance, some medical insurance. What staffing company do you work with? Uh, M-A-U-Yama. What are the last four of your social and the last name? Uh, last four of my social's 5183 and my last name is Simmons. First name Andre. Can you verify the mailing address and date of birth for security purposes? Uh, mailing address 5474 Oakland Industrial Boulevard, Fairburn, Georgia, Apartment 228, 30213. Uh, date of birth 12/11/'83. And you said it was Apartment 228? Yeah, Apartment 228. We have the best phone number to reach you down as 404-437-1142. Yes, that's the correct number. And lastly, we have your email down as samiah_simmons83@yahoo.com. Yes, ma'am. That's it. So you're currently within your personal enrollment period. You're able to enroll into benefits all the way to the 22nd of this month. 22nd? All right. Thank you. Mm-hmm. No problem. Now, did you know which plan you wanted to enroll into? Uh, I'm not sure. I have to, uh... Can you email me the plan and I can look over it? But I'm not sure. I was just really trying to get some medical. But if I have to wait for the, um, 22nd, I'll, um, be glad to, uh, look over it or discuss it with you then. No, sir. I said you have till the 22nd to enroll into benefits. Oh, I have till the tw- Okay, let's do it now. Okay. Which plans would you like to be enrolled into? Well, I'm really not sure, but I know I have a lot of, uh... I, I be having a lot of medicines that I get from the pharmacy and I, uh, have frequent doctor visits. So whatever can cover that, do whatever I can to have a lower copay. Uh... I'm not really sure what type of benefits, but I know what I usually have to do with my medical. Okay. So they offer a total of five different plans. Out of all of the plans we do now that they offer, there's only one that's a major medical insurance, which is the Minimum Volume Plan, MVP. This is the only plan that would be a monthly. Actually, it is weekly. They changed it. Um, so this would be a weekly deduction of \$812 with 50 cents per paycheck for the employee only. This plan works with in and out of network deductibles. The in-network deductible is \$6,500 and out of network is \$10,000. Your primary care visits will have a copay, in-network of 15 and 30 for specialists, and out of network it will be a 50% after the deductible. The plan does have a prescription package which will cover the generic subject to the deductible in the preferred plan, as well as subject to the deductible. Um, however, non-preferred plans are not covered on the plan. So aside from that plan, there are four other plans. They are divided into preventative and hospital indemnity, and there are PPO-limited plans. First one is the Stay Healthy MEC. This one only covers the preventative services like your screenings for the blood pressure, iron deficiency, your counseling for a healthy diet, avoiding UV exposures from the sun. Your preventative immunization like tetanus and varicella, as well as your generic preventative prescriptions. So the plan is 10 dollars and 27

cents per paycheck. It does not cover hospital indemnity which are the hospital services, um, such as like your doctor visits, emergency room, ER urgent care, surgeries or advanced tests. The Insure Plus plans will be the ones that cover those type of services called hospital indemnity. The Insure Plus Basic is 17.39 and the Insure Plus Enhanced is 24.69. Now the Insure Pluses, due to the fact that they are hospital indemnity plans, they don't cover anything preventative. The same way that the preventative plan Stay Healthy doesn't cover any hospital services. You're able to enroll into that Stay Healthy with one of the Insure Plus plans. If you like, you just can enroll into both Stay Healthy or both Insure Pluses. And then the last plan, um, that is a limited PPO plan is the Stay Healthy MEC Enhanced. This one is 24.89 per paycheck. Um, the difference between this one and the other three PPO plans will be the fact that this is the only PPO plan they offer that has both preventative and your hospital services, as well as the fact that this is the only plan that has a copay for the primary care visits which is a \$10 copay. Specialist visits are a \$50 copay and urgent care visits are a \$60 copay. Now the only thing to keep in mind, Mr. Simmons, um, with this one is the fact that all PPO plans, the Insure Pluses as well as the... Actually it's only going to be the MEC Enhanced. They only cover four visits. That plan only- And for those ob- That plan only covers four visits? Yes, sir. Four visits per year so it will only be four visits for primary care, four visits for specialist care and four visits per urgent care. Okay. I don't, I don't go but three times a year, so. Okay. So it's up to you to decide which one of those plans I listed you would like to be enrolled into. So which one of those plans will c- if I go... Which one of those... I think I want the last one, the one you just said, but I'm trying to see where they cover my, uh, my medical, my, my, my prescriptions. The Insure Pluses as well as the last, MEC Enhanced, they have the Pharmicare prescription package. It works with a tier system of \$10, \$20 and \$30 for generics. Depending on where it falls, that will be how much you will pay out of pocket, and then they give a discount for non-generics. But aside from that, the only other plan that will have an additional package will be that MEC Enhanced 'cause it also has that preventative medication package, which will cover the generic prescriptions at a \$5 copay with in-network providers and the mail order with a \$15 copay, um, the only thing about well, with Stay Healthy, sir, to keep in mind, that Stay Healthy Enhanced, the last one, that's \$24.89, it requires network. What you mean network? Do you know what that means? No, I do not. So when they have a medical plan insurance-wise, let's just say in general, um, when you have an insurance plan that has a network requirement, it means that there's a specific list of doctors that you will have to go to for those benefits to be covered under your insurance. So, let's say you were to go for a wellness check to your primary care doctor, right? If that primary care doctor is not within that network list, the visit itself won't be covered. Anything that you get done at that specific office that's not under their list won't be covered by your insurance company. Okay. So, is there any way that I can look over these plans or read the plans myself before I decide today? Yeah, so I can send you a copy of your staffing company's benefit guide to the email that we have on file if you would like. And then- Yeah, can you do that? Okay. Yeah, can you do that for me? That way I can, I can look over it and if I have any questions when I get ready to apply, I can ask you through that. That way, we will both be looking at the same thing, correct? Yes, sir. That is correct. Um, and if you run into any questions before you decide what you want to enroll into, you can still give us a call. Just keeping in mind if there's any coverage specific questions, we will have to get you over to a carrier 'cause bene- basically, the benefit guide that I'm going to be sending over to you is

what we have access to as far as information on the plan. All right, I understand. Anything farther than that, you'll have to transfer me over. Yes. Um, and then I did also want to send you an additional email. Um, it's going to have the network providers' information. That way, in the event that you are still interested in that plan that does require network, you can take a look and see if any of your current doctors are under their network. Yeah, exactly. As well as put the information for PharmaBill in there so that you can call them and see if those medications you're looking to have covered are covered under PharmaBill if it is within their net- um, their prescriptions list. Sorry. Okay. I just got a email from you, benefits in a card. So this 1-800 number, 497-4855, 4856, that's the number I should be calling? That will be our number, yes, sir, and then I'm working right now on the second number with the... I mean, the second email with the network providers' information as well as a phone number for the pharmacy prescription plan. Okay. Let's see. So this first email, what is, what is it telling me at the bottom? The different services? What bottom, sir? The first email you sent me with, with your number on it. I went to the PDF and it, oh, okay. This is the different benefit plan summaries. This is the plan benefit summary. That's the benefit guide, sir. Okay. I see. Okay. I see it now. All right. All right. Thank you. Yes, and then... No problem. And then the second one that you should be receiving, that's the one that's going to have the information for those phone numbers. So the one that says for the medical provider list, regardless of whether you choose a medical plan within or out of network, they will be the ones to assist you in locating providers in your area that either work with the insurance or are within that network list. Okay, so these are all the, these are all the providers I... These are the numbers of the providers I can call to see if my provider are under those guidelines, correct? Yes, sir. The only thing is you're not calling providers, you're calling network providers. Okay, then they going to let me know what's in my, what y'all cover, basically. No, sir. Once again, they're going to give you the list of the doctors in your area that work with the insurance. Okay. As well as the ones that are in that specific list. Okay, then. All right. Thank you. Thank you so much. No problem. Now I think you're getting it confused with the top one that says for any questions about prescription coverage under PharmaBill, that's the one that you're calling for your medications to see if they're covered under them. Okay, to see if my... Okay, so the prescription, the, the PharmaBill, I'm calling to see if my prescription are covered by that, correct? Yes, sir, and then the other three numbers- Uh-huh. ... you're calling to see if any of the doctors, dentists or eye doctors in your area accept the insurance or are within- Okay. ... the list. Okay? Okay, cool. I got it. Perfect. All right. All right. No problem. Thank you so much. And then if you- All right. ... get it confused or have any issues reaching them, you can always give us a call and then just ask that you're trying to get transferred to the prescription provider, anything like that, and we can also get you transferred to them. All right. Thank you. No problem. Was there anything else I can assist you with today? Well, no. Yeah, I'll talk to you later. Have a good one. You too.

Conversation Format

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

Speaker speaker_1: Thank you for calling American Top. My name is Francesca. How can I assist you today?

Speaker speaker_2: Uh, yes, how are you doing today?

Speaker speaker_1: Good. How are you today?

Speaker speaker_2: Good. I'm trying to see if I can get some insurance, some medical insurance.

Speaker speaker_1: What staffing company do you work with?

Speaker speaker_2: Uh, M-A-U-Yama.

Speaker speaker_1: What are the last four of your social and the last name?

Speaker speaker_2: Uh, last four of my social's 5183 and my last name is Simmons. First name Andre.

Speaker speaker_1: Can you verify the mailing address and date of birth for security purposes?

Speaker speaker_2: Uh, mailing address 5474 Oakland Industrial Boulevard, Fairburn, Georgia, Apartment 228, 30213. Uh, date of birth 12/11/83.

Speaker speaker_1: And you said it was Apartment 228?

Speaker speaker_2: Yeah, Apartment 228.

Speaker speaker_1: We have the best phone number to reach you down as 404-437-1142.

Speaker speaker_2: Yes, that's the correct number.

Speaker speaker_1: And lastly, we have your email down as samiah_simmons83@yahoo.com.

Speaker speaker_2: Yes, ma'am. That's it.

Speaker speaker_1: So you're currently within your personal enrollment period. You're able to enroll into benefits all the way to the 22nd of this month.

Speaker speaker_2: 22nd? All right. Thank you.

Speaker speaker_1: Mm-hmm. No problem. Now, did you know which plan you wanted to enroll into?

Speaker speaker_2: Uh, I'm not sure. I have to, uh... Can you email me the plan and I can look over it? But I'm not sure. I was just really trying to get some medical. But if I have to wait for the, um, 22nd, I'll, um, be glad to, uh, look over it or discuss it with you then.

Speaker speaker_1: No, sir. I said you have till the 22nd to enroll into benefits.

Speaker speaker_2: Oh, I have till the tw- Okay, let's do it now.

Speaker speaker_1: Okay. Which plans would you like to be enrolled into?

Speaker speaker_2: Well, I'm really not sure, but I know I have a lot of, uh... I, I be having a lot of medicines that I get from the pharmacy and I, uh, have frequent doctor visits. So whatever can cover that, do whatever I can to have a lower copay. Uh... I'm not really sure what type of benefits, but I know what I usually have to do with my medical.

Speaker speaker_1: Okay. So they offer a total of five different plans. Out of all of the plans we do now that they offer, there's only one that's a major medical insurance, which is the Minimum Volume Plan, MVP. This is the only plan that would be a monthly. Actually, it is weekly. They changed it. Um, so this would be a weekly deduction of \$812 with 50 cents per paycheck for the employee only. This plan works with in and out of network deductibles. The in-network deductible is \$6,500 and out of network is \$10,000. Your primary care visits will have a copay, in-network of 15 and 30 for specialists, and out of network it will be a 50% after the deductible. The plan does have a prescription package which will cover the generic subject to the deductible in the preferred plan, as well as subject to the deductible. Um, however, non-preferred plans are not covered on the plan. So aside from that plan, there are four other plans. They are divided into preventative and hospital indemnity, and there are PPO-limited plans. First one is the Stay Healthy MEC. This one only covers the preventative services like your screenings for the blood pressure, iron deficiency, your counseling for a healthy diet, avoiding UV exposures from the sun. Your preventative immunization like tetanus and varicella, as well as your generic preventative prescriptions. So the plan is 10 dollars and 27 cents per paycheck. It does not cover hospital indemnity which are the hospital services, um, such as like your doctor visits, emergency room, ER urgent care, surgeries or advanced tests. The Insure Plus plans will be the ones that cover those type of services called hospital indemnity. The Insure Plus Basic is 17.39 and the Insure Plus Enhanced is 24.69. Now the Insure Pluses, due to the fact that they are hospital indemnity plans, they don't cover anything preventative. The same way that the preventative plan Stay Healthy doesn't cover any hospital services. You're able to enroll into that Stay Healthy with one of the Insure Plus plans. If you like, you just can enroll into both Stay Healthy or both Insure Pluses. And then the last plan, um, that is a limited PPO plan is the Stay Healthy MEC Enhanced. This one is 24.89 per paycheck. Um, the difference between this one and the other three PPO plans will be the fact that this is the only PPO plan they offer that has both preventative and your hospital services, as well as the fact that this is the only plan that has a copay for the primary care visits which is a \$10 copay. Specialist visits are a \$50 copay and urgent care visits are a \$60 copay. Now the only thing to keep in mind, Mr. Simmons, um, with this one is the fact that all PPO plans, the Insure Pluses as well as the... Actually it's only going to be the MEC Enhanced. They only cover four visits.

Speaker speaker_3: That plan only-

Speaker speaker_1: And for those ob-

Speaker speaker_3: That plan only covers four visits?

Speaker speaker_1: Yes, sir. Four visits per year so it will only be four visits for primary care, four visits for specialist care and four visits per urgent care.

Speaker speaker_2: Okay. I don't, I don't go but three times a year, so.

Speaker speaker_1: Okay. So it's up to you to decide which one of those plans I listed you would like to be enrolled into.

Speaker speaker_2: So which one of those plans will c- if I go... Which one of those... I think I want the last one, the one you just said, but I'm trying to see where they cover my, uh, my medical, my, my, my prescriptions.

Speaker speaker_1: The Insure Pluses as well as the last, MEC Enhanced, they have the Pharmacare prescription package. It works with a tier system of \$10, \$20 and \$30 for generics. Depending on where it falls, that will be how much you will pay out of pocket, and then they give a discount for non-generics. But aside from that, the only other plan that will have an additional package will be that MEC Enhanced 'cause it also has that preventative medication package, which will cover the generic prescriptions at a \$5 copay with in-network providers and the mail order with a \$15 copay, um, the only thing about well, with Stay Healthy, sir, to keep in mind, that Stay Healthy Enhanced, the last one, that's \$24.89, it requires network.

Speaker speaker_2: What you mean network?

Speaker speaker_1: Do you know what that means?

Speaker speaker_2: No, I do not.

Speaker speaker_1: So when they have a medical plan insurance-wise, let's just say in general, um, when you have an insurance plan that has a network requirement, it means that there's a specific list of doctors that you will have to go to for those benefits to be covered under your insurance. So, let's say you were to go for a wellness check to your primary care doctor, right? If that primary care doctor is not within that network list, the visit itself won't be covered. Anything that you get done at that specific office that's not under their list won't be covered by your insurance company.

Speaker speaker_2: Okay. So, is there any way that I can look over these plans or read the plans myself before I decide today?

Speaker speaker_1: Yeah, so I can send you a copy of your staffing company's benefit guide to the email that we have on file if you would like. And then-

Speaker speaker_2: Yeah, can you do that?

Speaker speaker_1: Okay.

Speaker speaker_2: Yeah, can you do that for me? That way I can, I can look over it and if I have any questions when I get ready to apply, I can ask you through that. That way, we will both be looking at the same thing, correct?

Speaker speaker_1: Yes, sir. That is correct. Um, and if you run into any questions before you decide what you want to enroll into, you can still give us a call. Just keeping in mind if there's any coverage specific questions, we will have to get you over to a carrier 'cause bene- basically, the benefit guide that I'm going to be sending over to you is what we have access to

as far as information on the plan.

Speaker speaker_2: All right, I understand. Anything farther than that, you'll have to transfer me over.

Speaker speaker_1: Yes. Um, and then I did also want to send you an additional email. Um, it's going to have the network providers' information. That way, in the event that you are still interested in that plan that does require network, you can take a look and see if any of your current doctors are under their network.

Speaker speaker_2: Yeah, exactly.

Speaker speaker_1: As well as put the information for PharmaBill in there so that you can call them and see if those medications you're looking to have covered are covered under PharmaBill if it is within their net- um, their prescriptions list. Sorry.

Speaker speaker_2: Okay. I just got a email from you, benefits in a card. So this 1-800 number, 497-4855, 4856, that's the number I should be calling?

Speaker speaker_1: That will be our number, yes, sir, and then I'm working right now on the second number with the... I mean, the second email with the network providers' information as well as a phone number for the pharmacy prescription plan.

Speaker speaker_2: Okay.

Speaker speaker_1: Let's see.

Speaker speaker_2: So this first email, what is, what is it telling me at the bottom? The different services?

Speaker speaker_1: What bottom, sir?

Speaker speaker_2: The first email you sent me with, with your number on it. I went to the PDF and it, oh, okay. This is the different benefit plan summaries. This is the plan benefit summary.

Speaker speaker_1: That's the benefit guide, sir.

Speaker speaker_2: Okay. I see. Okay. I see it now. All right. All right. Thank you.

Speaker speaker_1: Yes, and then... No problem. And then the second one that you should be receiving, that's the one that's going to have the information for those phone numbers. So the one that says for the medical provider list, regardless of whether you choose a medical plan within or out of network, they will be the ones to assist you in locating providers in your area that either work with the insurance or are within that network list.

Speaker speaker_2: Okay, so these are all the, these are all the providers I... These are the numbers of the providers I can call to see if my provider are under those guidelines, correct?

Speaker speaker_1: Yes, sir. The only thing is you're not calling providers, you're calling network providers.

Speaker speaker_2: Okay, then they going to let me know what's in my, what y'all cover, basically.

Speaker speaker_1: No, sir. Once again, they're going to give you the list of the doctors in your area that work with the insurance.

Speaker speaker_2: Okay.

Speaker speaker_1: As well as the ones that are in that specific list.

Speaker speaker_2: Okay, then. All right. Thank you. Thank you so much.

Speaker speaker_1: No problem. Now I think you're getting it confused with the top one that says for any questions about prescription coverage under PharmaBill, that's the one that you're calling for your medications to see if they're covered under them.

Speaker speaker_2: Okay, to see if my... Okay, so the prescription, the, the PharmaBill, I'm calling to see if my prescription are covered by that, correct?

Speaker speaker_1: Yes, sir, and then the other three numbers-

Speaker speaker_2: Uh-huh.

Speaker speaker_1: ... you're calling to see if any of the doctors, dentists or eye doctors in your area accept the insurance or are within-

Speaker speaker_2: Okay.

Speaker speaker_1: ... the list. Okay?

Speaker speaker_2: Okay, cool. I got it. Perfect. All right.

Speaker speaker_1: All right. No problem.

Speaker speaker_2: Thank you so much.

Speaker speaker_1: And then if you-

Speaker speaker_2: All right.

Speaker speaker_1: ... get it confused or have any issues reaching them, you can always give us a call and then just ask that you're trying to get transferred to the prescription provider, anything like that, and we can also get you transferred to them.

Speaker speaker_2: All right. Thank you.

Speaker speaker_1: No problem. Was there anything else I can assist you with today?

Speaker speaker_2: Well, no. Yeah, I'll talk to you later.

Speaker speaker_1: Have a good one.

Speaker speaker_2: You too.