
2023

InSync Consulting Services

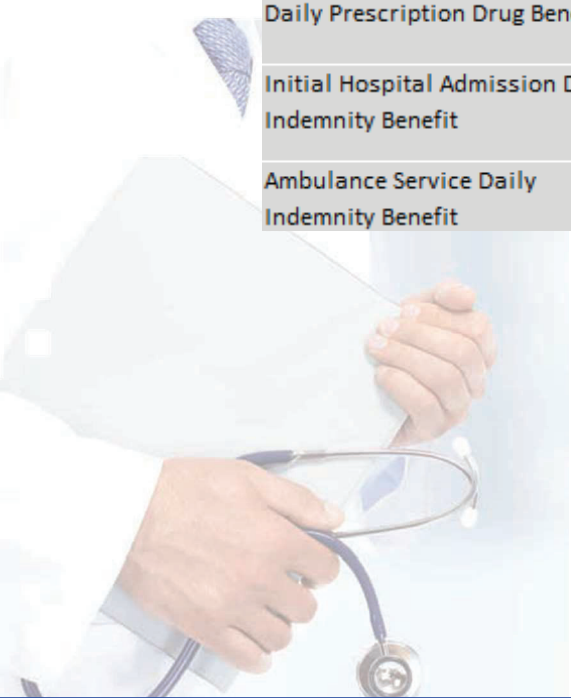
Employee Enrollment Guide



Medical Plan Benefit



	MEC
Covered Benefits	In-Network
Deductible (single/family)	\$0/\$0
Coinsurance	100%
Out-of-Pocket Maximum (single/family)	\$0/\$0
PPO Network	Open Access Solution*
ACA Required Preventive Care/ Screening/Immunization Benefits (MEC)	Covers 100% of the government's listed Preventive and Wellness Benefits
RealTimeTelemed	
Telemedicine	Unlimited Calls
Geo Fencing ER and Rx	Unlimited Access
RealTime Choices Transparency Program	Unlimited Access
RealTime Behavioral Health	N/A
Fully Insured Indemnity Benefits	
Inpatient Hospital Daily Indemnity Benefit	N/A
Outpatient Physician Office Visit Daily Indemnity Benefit	N/A
Outpatient Diagnostic X Ray and Lab Daily indemnity Benefit	N/A
Daily Prescription Drug Benefit	N/A
Initial Hospital Admission Daily Indemnity Benefit	N/A
Ambulance Service Daily Indemnity Benefit	N/A

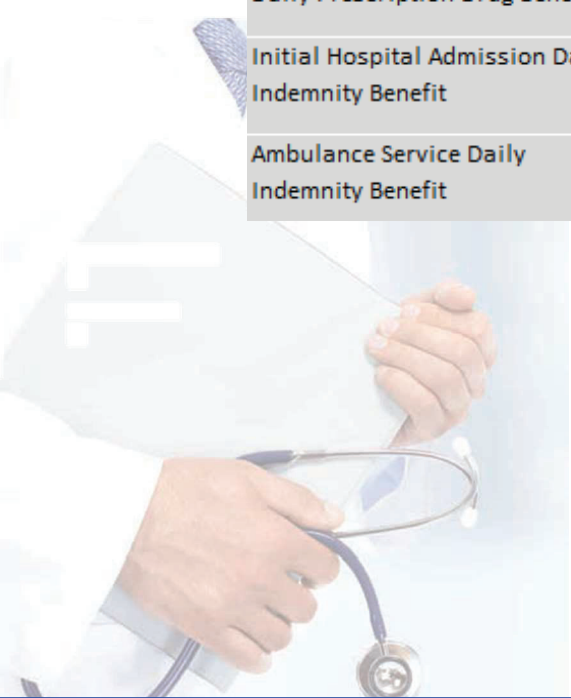


MEC Plan	
Monthly Rates	
Employee Only:	\$81.70
Employee & Spouse:	\$125.43
Employee & Child(ren):	\$193.89
Family:	\$237.61

Medical Plan Benefit



MEC Plus	
Covered Benefits	In-Network
Deductible (single/family)	\$0/\$0
Coinsurance	100%
Out-of-Pocket Maximum (single/family)	\$0/\$0
PPO Network	Open Access Solution*
ACA Required Preventive Care/ Screening/Immunization Benefits (MEC)	Covers 100% of the government's listed Preventive and Wellness Benefits
RealTimeTelemed	
Telemedicine	Unlimited Calls
Geo Fencing ER and Rx	Unlimited Access
RealTime Choices Transparency Program	Unlimited Access
RealTime Behavioral Health	N/A
Fully Insured Indemnity Benefits	
Inpatient Hospital Daily Indemnity Benefit	\$100 daily benefit, 180 maximum days
Outpatient Physician Office Visit Daily Indemnity Benefit	\$30 per day, 6 day maximum per benefit period
Outpatient Diagnostic X Ray and Lab Daily indemnity Benefit	\$50 per day with a 2 day maximum per benefit period
Daily Prescription Drug Benefit	\$15 per day, 20 day maximum per benefit period
Initial Hospital Admission Daily Indemnity Benefit	\$500 per day, 1 day maximum with 1 Admission per benefit period
Ambulance Service Daily Indemnity Benefit	\$100 per day, 3 day maximum per benefit period



MEC Plus Plan	
Monthly Rates	
Employee Only:	\$121.11
Employee & Spouse:	\$209.75
Employee & Child(ren):	\$260.65
Family:	\$368.87

Medical Plan Benefit



	MVP*
Covered Benefits	In-Network
Deductible (single/family)	\$6,500/\$13,200
Coinsurance	60%
Out-of-Pocket Maximum (single/family)	\$6,500/\$13,200
PPO Network	Multiplan Limited Network
Emergency Room Services	\$6,500 deductible
Inpatient Hospital Services	You pay \$6,500 deductible
Primary Care Visit to Treat an Injury or Illness	\$50 copay and 60% coinsurance
Specialist Visit	\$70 copay and 60% coinsurance
Mental/Behavioral Health and Substance Abuse Disorder Outpatient Services	NOT COVERED
Imaging (CT, PET Scans, MRIs)	\$6,500 deductible
Rehabilitative Speech Therapy	NOT COVERED
Rehabilitative Occupational and Rehabilitative Physical Therapy	NOT COVERED
Preventive Care/ Screening/Immunization (MEC)	Covers 100% of the government's listed Preventive and Wellness Benefits
Laboratory Outpatient and Professional Services	\$6,500 deductible
X-rays and Diagnostic Imaging	\$6,500 deductible
Outpatient Facility Fee	NOT COVERED
Outpatient Surgery Physician/Surgical Services	NOT COVERED
Chronic Disease Management (CDM) Benefit	Covered Services at 100% (61) for 26 Predefined Chronic Diseases
Life AD&D Benefit	Not Available
RealTime Choices Transparency Program	Unlimited Access
RealTime Health Diabetic Program	100% covered
Prescription Drugs	
Generic Drugs	\$6,500 deductible
Certain Preferred Brand Drugs	\$6,500 deductible
Certain Non-Preferred Brand Drugs	NOT COVERED
Specialty Drugs & Compounds	NOT COVERED

* The MVP plan does not cover out-of-network benefits.

The MVP Self-Funded benefit plan design excludes the following major service categories: Mental/Behavioral Health and Substance Abuse Disorder Outpatient Services, Rehabilitative Speech Therapy, Rehabilitative Occupational and Rehabilitative Physical Therapy, Skilled Nursing Facility, Outpatient Facility Fees, Outpatient Surgery Physician/Surgical Services, Specialty Drugs (including compound drugs), and Drugs related to mental health and substance abuse such as ADHD.



MVP Plan	
Monthly Rates	
Employee Only:	\$759.77
Employee & Spouse:	\$1,460.51
Employee & Child(ren):	\$1,955.60
Family:	\$2,435.46

Key Group Dental Insurance

THE GROUP DENTAL PLAN*

Key Group dental plans cover allowable charges for dental services at 100% coverage for preventive services, 80% coverage for basic services and 50% coverage for major services. The combined annual deductible is only \$50 per person, which applies to all covered dental services.

PREVENTIVE SERVICES INCLUDE:

Routine exams and cleanings, emergency treatment for dental pain (minor), bitewing x-rays and fluoride, fluoride treatment for children under age 19.

BASIC SERVICES INCLUDE:

Simple restorative services, simple teeth removal, sealants for children ages 6-15 (one per 36 months), x-rays (full mouth or panorex, one per 36 months), x-rays of the roots of teeth.

MAJOR SERVICES INCLUDE:

Space maintainers, endodontics (includes root canals), periodontics, surgical teeth removal and other oral surgery, medically appropriate anesthesia related to covered surgery, major restorative services (crowns and inlays), dental implants (age 17 and up), denture relines (if over six months of installation), recementation and repair of crowns, inlays, bridges and dentures.

	Plan 3	Plan 4
PREVENTIVE		
Deductible	\$50	\$50
Waiting Period	N/A	N/A
Coinsurance	100%	100%
Exams	2 per Calendar Year	2 per Calendar Year
Bitewing and Fluoride	1 per Calendar Year	1 per Calendar Year
BASIC		
Deductible	\$50	\$50
Waiting Period	N/A	N/A
Coinsurance	80%	80%
MAJOR		
Deductible	\$50	\$50
Waiting Period	12 month	12 month
Coinsurance	50%	50%
ORTHO CHILD ONLY**		
Coinsurance	N/A	N/A
Deductible	N/A	N/A
Lifetime Max	N/A	N/A
Waiting Period	N/A	N/A
CALENDAR YEAR MAX	\$1,000	\$750

*Payment is based upon allowable charges in the area in which service is rendered. This is a general outline of covered benefits and does not include all the benefits, limitations and exclusions of the policy. Please see your certificate for details.

Minimum participation of 10 employees is required.

Dental Plan

Region 1

MONTHLY RATE	Plan 3	Plan 4
Employee Only	\$36.96	\$33.66
Employee + Spouse	\$73.92	\$67.31
Employee + Children	\$79.71	\$78.08
Family	\$118.38	\$110.14

REGION 1

Alabama, Alaska, Arkansas, Arizona, Florida, Georgia, Idaho, Iowa, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, New Mexico, Ohio, Oklahoma, South Carolina, Tennessee, Texas, Utah, West Virginia

**Region is based on your Domicile State.*

KG_DE_09212022



Key Benefit Administrators, Inc.

VISION CARE SERVICES	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSEMENT
----------------------	------------------------	-------------------------------------

EXAM SERVICES

Exam	\$10 copay	Up to \$40
------	------------	------------

FRAME

Frame	\$0 copay; 20% off balance over \$130 allowance	Up to \$104
-------	-------------------------------------------------	-------------

CONTACT LENSES

(Contact Lens allowance includes materials only)

Contacts - Conventional	\$0 copay; 15% off balance over \$130 allowance	Up to \$130
Contacts - Disposable	\$0 copay; 100% of balance over \$130 allowance	Up to \$130
Contacts - Medically Necessary	\$0 copay; paid-in-full	Up to \$300

STANDARD PLASTIC LENSES

Single Vision	\$25 copay	Up to \$30
Bifocal	\$25 copay	Up to \$50
Trifocal	\$25 copay	Up to \$70
Lenticular	\$25 copay	Up to \$70
Progressive - Standard	\$80 copay	Up to \$50
Progressive - Premium Tier 1	\$110 copay	Up to \$50
Progressive - Premium Tier 2	\$120 copay	Up to \$50
Progressive - Premium Tier 3	\$135 copay	Up to \$50
Progressive - Premium Tier 4	\$200 copay	Up to \$50

LENS OPTIONS

Anti Reflective Coating - Standard	\$45 copay	Up to \$5
Anti Reflective Coating - Premium Tier 1	\$57 copay	Up to \$5
Anti Reflective Coating - Premium Tier 2	\$68 copay	Up to \$5
Anti Reflective Coating - Premium Tier 3	\$85 copay	Up to \$5
Polycarbonate - Std < 19 years of age	\$0 copay	Up to \$20

Proposed Benefits

EyeMed Vision Care in conjunction with Fidelity Security Life Insurance Company

Option Shelf Plan 1

Exam & Materials

Insight Network

Fully Insured

Employee Paid

Funded Benefits

Frequency

Examination

Once every 12 months

Lenses (in lieu of contacts)

Once every 12 months

Contacts (in lieu of lenses)

Once every 12 months

Frame

Once every 24 months

Terms

Contract Term

48 months

Rate Guarantee

48 months

MONTHLY RATES

Subscriber	\$7.02
Subscriber + Spouse	\$13.34
Subscriber + Child(ren)	\$14.04
Subscriber + Family	\$20.64

Preventive Care



Covered Preventive Services for Adults (ages 18 and older)

1. Abdominal Aortic Aneurysm one-time screening. Age 65-75.
2. Alcohol misuse screening and counseling.
3. Aspirin use for adults to prevent Cardiovascular Disease and Colorectal Cancer when prescribed by a physician. Ages 50-59.
4. Blood Pressure screening for all adults.
5. Cholesterol screening for all adults
6. Colorectal Cancer screening for adults. Age 45-75 (see plan document for additional information)
7. Depression screening for adults.
8. Type 2 Diabetes screening for adults
9. Diet counseling for adults.
10. Fall prevention to include physical therapy to prevent fall in community dwellings. Ages 65 and older.
11. Hepatitis B screening for adults.
12. Hepatitis C screening for adults at high risk and one-time for everyone between the ages on 18-79 years old.
13. HIV screening for all adults
14. immunization vaccines for adults; Hepatitis A and B, Herpes Zoster, Human Papillomavirus, Influenza (Flu Shot), Measles, Mumps, Rubella. Meningococcal, Pneumococcal, Tetanus, Diphtheria, Pertussis, and Varicella.
15. Lung Cancer screening for adults age 50-80 who are at high risk because they smoke 30 pays a year (or have quit in the past 15 years).
16. Obesity screening and counseling for all adults.
17. Sexually Transmitted Infection (STI) prevention counseling and screening for adults
18. Skin Cancer behavioral counseling for adults to age 24 with fair skin.
19. Tobacco use screening, counseling, and cessation interventions for all adults.
20. Syphilis screening for adults
21. Latent tuberculosis infection screening for adults.
22. Statin preventive medication for adults ages 40-75 with no history of cardiovascular disease, 1 or more cardiovascular disease risk factors and a calculated 10-year cardiovascular disease event risk of 10% or greater.
23. Prevention of Human Immunodeficiency Virus (HIV) Infection (see plan document for additional information)
24. Unhealthy drug use screening

Covered Preventive Services for Women, Including Pregnant Women

1. Anemia screening on a routine basis for pregnant women.
2. Aspirin for pregnant women at high risk for preeclampsia.
3. Bacteriuria urinary tract or other infection screening for pregnant women.
4. BRCA counseling and genetic testing for women at higher risk.
5. Breast Cancer Mammography screenings every 1 to 2 years for women age 40 and over.
6. Breast Cancer Chemoprevention counseling as well as breast cancer testing and medications for women with increased risk for breast cancer.
7. Breastfeeding comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women. (see plan document for additional information)
8. Cervical Cancer screening
9. Chlamydia Infection screening
10. Contraception (see plan document for additional information)
11. Diabetes screening for women with a history of gestational diabetes who are not currently pregnant and who have not previously been diagnosed with type 2 diabetes.
12. Domestic and interpersonal violence screening and counseling for all women.
13. Folic Acid supplements for women who may become pregnant when prescribed by a physician.
14. Gestational diabetes screening
15. Gonorrhea screening for all women
16. Hepatitis B screening for pregnant women
17. Human Immunodeficiency Virus (HIV) screening and counseling
18. Human Papillomavirus (HPV) DNA Test (see plan document for additional information)
19. Osteoporosis screening over age 65 and older and post-menopausal women at increased risk.
20. Perinatal Depression counseling interventions for pregnant and postpartum persons at risk.
21. Preeclampsia screening in pregnant women with blood pressure measurements throughout pregnancy.
22. Routine prenatal visits for pregnant women
23. Rh Incompatibility screening for all pregnant women and follow-up testing.
24. Tobacco use screening and interventions for all women, and expanded counseling for pregnant tobacco users.
25. Sexually Transmitted Infections (STI) counseling
26. Syphilis screening
27. Urinary Incontinence screening
28. Well-woman visits to obtain recommended preventive services.
29. Behavioral screening for pregnant persons to promote healthy weight gain and prevent excess weight gain
30. Anxiety screening in adolescent women and adult women, including but not limited to, those who are pregnant or postpartum.

Covered Preventive Services for Children

1. Alcohol and Drug Use assessments
2. Anemia screening for children
3. Autism screening for children limited to two screenings up to 24 months
4. Behavioral assessments for children limited to 5 assessments up to age 17.
5. Bilirubin concentration screening for newborns
6. Blood screening for newborns.
7. Blood pressure screening
8. Cervical Dysplasia screening
9. Congenital Hypothyroidism screening for newborns.
10. Depression screening for adolescents age 12 and older
11. Developmental screening for children under age 3, and surveillance throughout childhood.
12. Dyslipidemia screening for children.
13. Fluoride Chemoprevention to include supplements for children without fluoride in their water source when prescribed by a physician and fluoride varnish to primary teeth through age 5.
14. Gonorrhea preventive medication for the eyes of all newborns.
15. Hearing screening for all newborns and 3 additional screenings at periodic ages up to age 21.
16. Height, Weight and Body Mass Index measurements for children.
17. Hemoglobinopathies or sickle cell screening for newborns.
18. Hepatitis B screening for adolescents.
19. HIV screening for adolescents.
20. Immunization vaccines for children from birth to age 18. (see plan document for additional information)
21. Iron supplements for children ages 6 to 12 months when prescribed by a physician.
22. Lead screening for children.
23. Maternal depression screening for mothers of infants at 1,2,4, and 6 months visits.
24. Medical History for all children throughout development. Ages 0-11 months, 1-4 years, 5-10 years, 11-14 years, 15-17 years.
25. Obesity screening and counseling
26. Oral Health Risk assessment for young children up to age 10.
27. Phenylketonuria (PKU) screening in newborns
28. Sexually Transmitted Infection (STI) prevention counseling and screening for adolescents.
29. Skin Cancer behavioral counseling for children age 6 months and up who have fair skin.
30. Tobacco Use screening, counseling and interventions to prevent initiation of tobacco use.
31. Tuberculin testing for children.
32. Vision screening for children.



Your Chronic Disease Management Program



The American Health Data Institute is excited to be your chronic disease management partner! Our program covers 27 chronic conditions like, asthma, diabetes, high blood pressure, high cholesterol, and coronary artery disease, just to name a few. If you or a family member have been diagnosed with a chronic illness you have access to talk to a Registered Nurse called a Healthcare NavigatorSM Nurse Coach. Our Nurse Coaches are here to work with you to enhance self-care, identify warning signs, access resources for assistance and live a healthier lifestyle.

How Does the Program Work?

1

STEP 1

If you have one of the 27 chronic conditions you will receive an introductory letter inviting you to partner with our Healthcare Navigator Nurse Coaches.

2

STEP 2

Following the introductory letter, you can either contact one of the nurses or they will reach out to you. During the initial call with the Nurse Coach you will explore possible choices for self-managing your illness(es).

3

STEP 3

You and the Healthcare Navigator Nurse Coach will discuss your healthcare needs and create a personalized service plan. The Healthcare Navigator Nurse Coach is there as your partner to help you self-manage your chronic condition.

It's Easy!
Start Now and Take
Control of Your Health!



Chronic Disease Management (CDM)



Chronic Disease	Minimum Annual Care Recommended
Asthma	2 Clinical Evaluations 1 Spirometry (for patients 10 years of age or older)
Atrial Fibrillation	1 Clinical Evaluation
Chronic Obstructive Pulmonary Disease	1 Clinical Evaluation 1 Spirometry
Chronic Venous Thrombotic Disease <i>*previously listed as Thrombo-embolic Disease</i>	1 Clinical Evaluation
COPD with Pulmonary Hypertension/Cor	2 Clinical Evaluations 12 months of supplemental O2 Tx
Chronic Kidney Disease	1 Clinical Evaluation 1 Hgb or Hct 1 Serum Creatinine 1 Serum Potassium 1 Serum Calcium 1 Serum Phosphorus
Congestive Heart Failure	1 Clinical Evaluation 1 Serum Creatinine 1 Serum Potassium
Coronary Artery Disease	1 Clinical Evaluation 1 LDL
Depression	1 Clinical Evaluation
Diabetes	2 Clinical Evaluations 2 Glycohemoglobins 1 Serum Creatinine 1 Lipid Panel IF no nephropathy Dx or ACE/ARB Rx, 1 Urine Albumin/Creatinine ratio, Total Protein
Epilepsy	1 Clinical Evaluation
Human Immunodeficiency Virus Infection	2 Clinical Evaluations 2 CBCs 1 T-Cell/CD-4 Count 2 HIV Quantifications 1 Pap Smear (for women only, 21 years of age or older)

Chronic Disease	Minimum Annual Care Recommended
Hyperlipidemia	1 Lipid Panel
Hypertension	1 Clinical Evaluation 1 Serum Creatinine
Hyperthyroidism	1 Clinical Evaluation 1 TSH 1 T4
Hypothyroidism	1 Clinical Evaluation 1 TSH
Metabolic Syndrome	1 Clinical Evaluation 1 Lipid Panel 1 FBS or HgbA1c
Multiple Sclerosis	1 Clinical Evaluation
Parkinson's Disease	1 Clinical Evaluation
Peripheral Arterial Disease (Atherosclerosis)	1 Clinical Evaluation 1 LDL
Pre-Diabetes	1 Clinical Evaluation 1 Lipid Panel 1 FBS or HgbA1c
Polymyalgia Rheumatica	2 Clinical Evaluations 2 ESR or CRP 1 CBC
Pulmonary Hypertension (unrelated to COPD)	2 Clinical Evaluations
Regional Enteritis (Inflammatory Bowel Disease)	1 Clinical Evaluation
Rheumatoid Arthritis	1 Clinical Evaluation
Sleep Apnea	1 Clinical Evaluation
Ulcerative Colitis (Inflammatory Bowel Disease)	1 Clinical Evaluation



RealTime Telemed



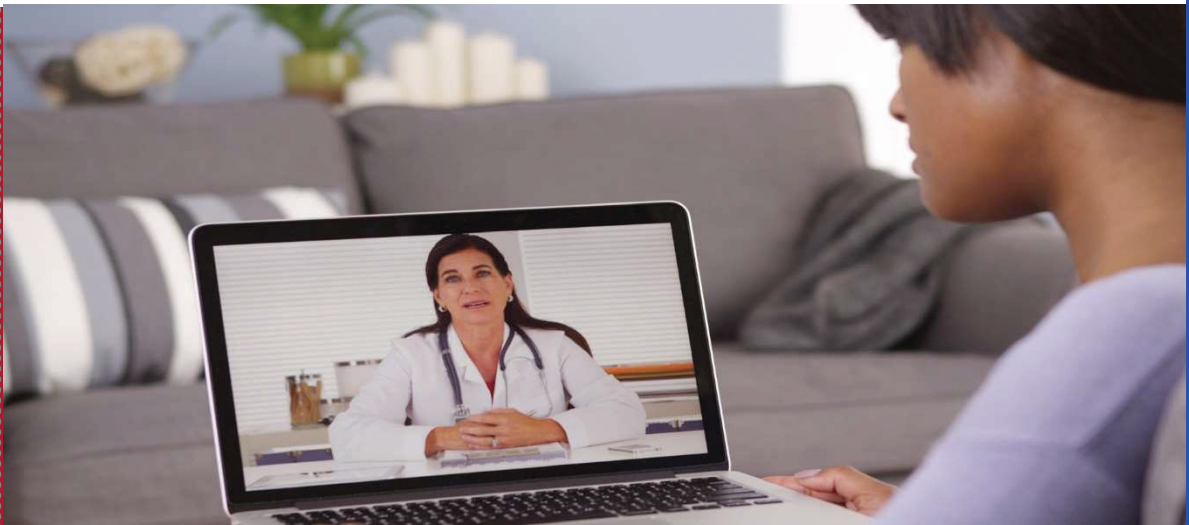
CONSULT WITH A BOARD-CERTIFIED DOCTOR



RealTimeTelemed gives you access to doctors 24/7/365.

You can access a board-certified doctor by phone or the mobile application – at anytime, from anywhere. RealTimeTelemed was designed as an alternative to costly urgent care, ER visits or days of waiting for an appointment to see your primary care doctor for non-emergency medical issues.

Phone or
Video
Consultation



Healthcare when and where you need it:

- \$0 Copay
- US Board-Certified Doctors
- 10 Minute average call- back time
- Prescriptions sent directly to your pharmacy
- 24 hours a day
- 365 days a year
- 7 days a week

Non-emergency conditions treated:

- Acne
- Allergies
- Cold/Flu
- Constipation
- Cough
- Diarrhea
- Ear problems
- Fever
- Insect bites
- Nausea/Vomiting
- Pink eye
- Rashes
- Respiratory issues
- Sore



Peace of mind through **RealTimeHealth.**



With RealTimeHealth, AHDl brings to you a solution that is undeniably both high tech and high touch. RealTimeHealth is a diabetic management program that uses a state of the art cellular based glucometer to automatically, consistently and accurately take and record a member's glucose readings.

Wrapped around this hardware is a 24/7 care support system that serves to monitor, encourage and motivate the member to take the steps necessary to control their condition. The member is even able to bring family and friends into this care network.

*When a **RealTimeHealth** member takes a reading, that result is immediately transmitted to our 24/7 care center, to the member's personal **RealTimeHealth** website and to the member's designated care circle.*

Think for a moment about a parent of a young child who is in school, or at a friend's house. Prior to **RealTimeHealth**, that parent had no visibility into their child's condition while away from home. Now, when the child takes a reading, mom and dad get the reading via a text to their phones, in a matter of minutes.

In this example, the parents, as well as those who are responsible for management of the health plan and the care center, will now also know if individuals are not testing. The benefit, of course, is that the family and the care center can provide follow up and encouragement; and we control unnecessary expenses.

Supplies are mailed to the member's home on an as needed basis. Our focus is to make sure our participants are testing...that they are taking the actions necessary to improve their situation.

However, if someone truly does not want to participate, they can opt out of the program.



High tech. High touch. Peace of mind.
Ongoing encouragement and motivation. Results.

RealTimeHealth is a one-of-a-kind, diabetic management program directed at improving the health of one of your most at risk groups.

RealTime Choices



What will a procedure actually cost? Should you use a hospital or a surgery center?

RealTimeChoices is a healthcare price transparency solution Powered by Healthcare Blue Book . Specifically, we give you the ability to shop for and receive a fair price for healthcare services. You are able to quickly and easily understand what you should pay for specific services in your geographic area. We identify the fair price for more than 200 common procedures including surgery, labs and image tests.



RealTimeChoices
AN AMERICAN HEALTH DATA INSTITUTE PRODUCT

Provides you with the data necessary to make intelligent decisions.

RealTimeChoices is delivered directly to you via a website and a mobile app. You are guided by a simple 'traffic light' image that helps you zero in on the best answer to your healthcare need.

Provider	Rating
Greenwich Surgery Center	Green (Fair Price)
Westport ASC	Yellow (Slightly Above Fair Price)
Health City Memorial Hospital	Yellow (Slightly Above Fair Price)
Highlands Health ASC	Red (Most Expensive)
St. Ignace Hospital	Red (Most Expensive)
St. Agnes Hospital	Red (Most Expensive)
St. Joseph's Medical Center	Red (Most Expensive)

- below fair price
- slightly above fair price
- most expensive providers and facilities



Now, you have choices.

Download the Mobile App!

1. Go to the Apple App Store or Google Play to search for **RealTimeChoices**.
2. Select the **RealTimeChoices** app and tap the **Install** button.
 - Permissions may be required to allow the **RealTimeChoices** app to access your location and zip code.
3. Enter the mobile access code, which is found on the **RealTimeChoices** website in the box titled **Fair Prices on the Go**.
4. Tap **Search Costs** to search for a procedure.

Use the app to compare prices for common medical tests and procedures while you're in your doctor's office. Green is the **fair price**.

ShopSmart™ procedures will show a list of providers. Get the best value with providers labeled in green.

If you have questions regarding the **RealTimeChoices** app, please contact **Customer Service** using the phone number listed on your member identification card or this packet.

