SmartHealth®

Member guide

Ascension

Table of contents

Getting started

Understanding your plan

Getting started

Welcome to SmartHealth

SmartHealth is a health plan designed by Ascension for you and your covered dependents. SmartHealth covers medical, dental, vision, pharmacy and ancillary benefits for their members.
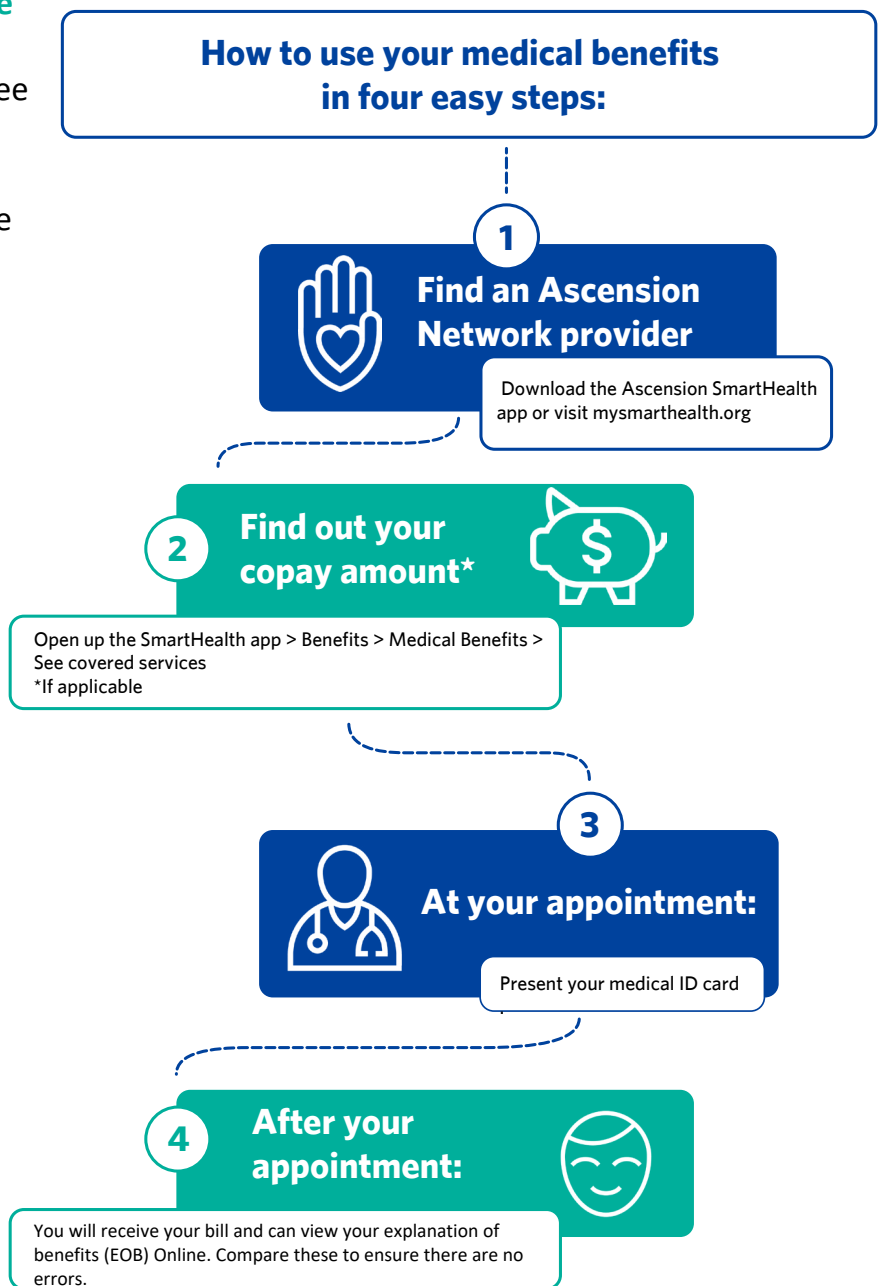
Ascension's medical coverage for you and your eligible family members is provided through SmartHealth, which was designed in house leveraging our experience in healthcare. While you are not required to see an Ascension Network provider, by staying within the Ascension Network, you will experience increased coordination of care and lower total out-of-pocket costs.

What does it mean to stay within the Ascension Network?

Members are highly encouraged to see Ascension employed or contracted providers when possible. This option provides the highest level of coverage and the lowest out-of-pocket costs.

To learn how to find an Ascension Network provider, see page 8.

To learn more about the levels of coverage, see page 15.

How to use your medical benefits in four easy steps:

1 Find an Ascension Network provider

Download the Ascension SmartHealth app or visit mysmarthealth.org

2 Find out your copay amount*

Open up the SmartHealth app > Benefits > Medical Benefits > See covered services
*If applicable

3 At your appointment:

Present your medical ID card

4 After your appointment:

You will receive your bill and can view your explanation of benefits (EOB) Online. Compare these to ensure there are no errors.

Setting up your Ascension One app

Ascension One is the easier way to manage care for you and your family:

- See what your plan covers.
- Find a doctor that's right for you.
- View your health spending account balance, deductible amounts, claims, EOBs and ID cards.
- View and pay your bills in one place
- Access virtual urgent care and mental healthcare services.
- View Prescription information and request prescription renewals

To download the app, visit the URL below or search your app store for "Ascension One."

Download the Ascension One app

Register at
healthcare.ascension.org/ascension-one

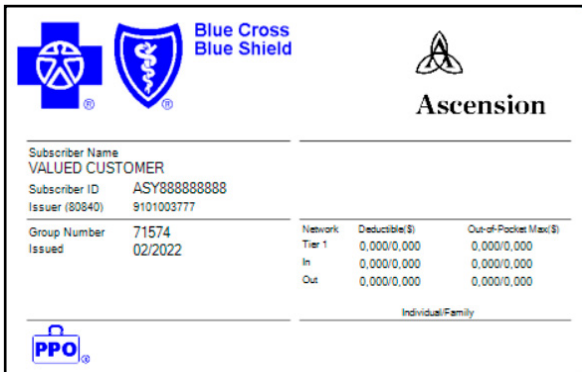Download on the App Store

GET IT ON Google Play

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ID cards

You will receive your medical and prescription ID cards seven to 10 business days after you become effective with SmartHealth. You can access digital versions of these cards by downloading the Ascension One app.

Medical

Be sure to carry your medical ID card with you. This ID card holds important information about your healthcare plan, including which plan you are enrolled in. This card will come from Blue Cross Blue Shield. With questions, or to order a replacement card, call customer service at 888-492-6811.

Prescription

This ID card will be used for your prescription drug benefits and will come from MaxorPlus. With questions, or to order a replacement card, call MaxorPlus customer service at 1-888-820-4082.

Dental

Ascension and your ministry offer dental care coverage through Delta Dental of Missouri.

Find a network dentist, print a claim form, request an ID card, ask questions and more:
deltadentalmo.com/ascension
(800) 335-8266

Although an ID card is not required, a card will be mailed to your home after your first enrollment with Delta Dental of Missouri. You may also visit the website to print a card to take with you. This will help dentists understand that your coverage is with Delta Dental of Missouri (if your ministry is outside Missouri).

Vision

Ascension and your ministry offer vision coverage through VSP Vision Care (VSP). You will not receive an ID card. When you make an appointment with the doctor, simply identify yourself as an Ascension associate with VSP coverage. The VSP provider's office can confirm that you are a VSP participant.

Find a VSP provider, review your benefits, ask questions and more:
vsp.com
VSP Member Services, available 24–hours a day: 800-877-7195
(TDD for the hearing impaired: 800-428-4833)

Please note: Illness and injury treatments for your eyes are covered by your SmartHealth medical plan, not through the vision plan.

The Ascension Network

Find providers and facilities in your area

Downloan the **Ascension One app** or visit **mysmarthealth.org > Find a doctor** to find an in-network provider or facility.

Popular search terms include:

- Family medicine or family practice.
- Pediatrics.
- Internal medicine, internal medicine-pediatrics, internal medicine adolescent medicine.
- Geriatric medicine.

Be sure to check with the provider that they are a participating Ascension Network (Tier 1) provider and facility before you schedule your appointment. **To learn about the three tier coverage levels, see page 15.**

If you don't live near a Tier 1 facility or needed provider, those services may qualify for benefit elevation (see more about this on page 15).

Pharmacy benefits

SmartHealth offers comprehensive pharmacy benefits, administered through MaxorPlus. Ascension Rx, the preferred pharmacy for SmartHealth members for specialty and maintenance medications, offers home delivery services on certain maintenance medications in 90-day supplies. Outpatient specialty prescription medications must be filled by Ascension Rx Specialty Pharmacy to avoid paying the full out-of-pocket cost. For more information on how to enroll with Ascension Rx, visit **ascensionrx.com**.

For more information about SmartHealth pharmacy benefits, including the plan's prescription drug formulary, copay amounts and other details, visit **mysmarthealth.org/plan-coverage/pharmacy**.

Plan extras

Care management

Ascension's Care Management teams work in partnership with your doctors and multidisciplinary team members to better manage your medical, behavioral, and social conditions. Our care managers can also provide you with the education, resources and encouragement you need to support your healthcare journey.

Ascension's Care Management team is made up of registered nurses, social workers and wellness coaches, who can help with:

- Complex Care and disease management.
- Behavioral Health
- High-risk maternity.
- Transitional care management.
- Wellness and prevention programs.
- Resource referrals.

These services are available at no extra cost to you and your covered dependents. To get started, call **855-288-6747** or email **acmmembers@ascension.org**.

Pharmacy care management

Managing your medications can be complicated. The pharmacy care management team of pharmacists and pharmacy technicians can help ensure your medications are working for you, help you understand what your medications are for, identify possible lower cost options and answer any medication questions or concerns.

How the program works:

The pharmacist will conduct a personalized one-on-one review of your medications by phone or video chat. During the review the pharmacist may discuss:

- Understanding your medications, what they are for, what they do, when and how to best take them.
- Safety and effectiveness of the medications.
- Any side effects you might be experiencing.
- Tips and tools to help you to remember to take your medications.
- Prescription costs and possible lower-cost alternatives.
- Any of your medication concerns or questions.
- Strategies to help you reach your chronic disease state goals (e.g. diabetes, hypertension, heart failure).

Each consultation can range from 10-30 minutes, and the pharmacist can follow up with you as needed to help reach your health goals.

How to qualify:

Members with certain types of prescriptions, a large number of prescriptions, multiple chronic conditions and high prescription costs are automatically identified and will receive an offer to participate from the pharmacy care management team.

A member may also ask to participate by calling or emailing the pharmacy care management team.

These services are available at no extra cost to you and your covered dependents. To get started, call 877-560-4303 or email **rxmedadherence@ascension.org**.

Enhanced Disease Management program for diabetes

Ascension's care management team offers an Enhanced Disease Management program for patients with diabetes. The program is designed to help you (or your covered dependents) better self-manage your diabetes while giving you the confidence you need to make informed choices regarding your health. If you are interested in enrolling in the EDM program, please call 855-288-6747.

SmartHealth Center of Excellence Travel Benefit program for substance use disorder and addiction treatment

This program offers help to members struggling with substance use disorder and addiction. The treatment facility is the Ascension Illinois Foglia Family Foundation Residential Treatment Center outside of Chicago. This benefit includes:

- Assistance with travel arrangements.
- Coverage of travel to the facility for you and your travel companion.
- Reduced out-of-pocket costs for those on the SmartHealth PPO plan.

Understanding your plan

Key terms to know

Covered services
Any service, procedure or supply covered by your SmartHealth plan.
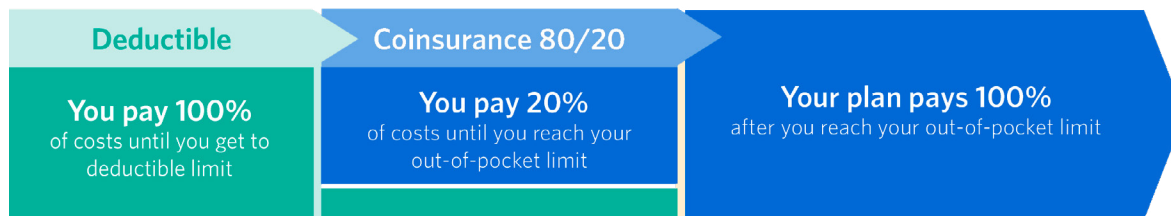
Copay
A specific, fixed amount the member must pay at the time and place services are rendered. Copays may be different amounts for different services, and a deductible may need to be met before copay rates apply. This also counts toward your out-of-pocket limits. Example: Within the Ascension Network, members pay a set copay for office visits.

Coinsurance
The share of the cost of covered services for which the member is responsible after the applicable annual deductible is met. Coinsurance payments accumulate throughout the calendar year until the individual or family out-of-pocket maximum is reached. For example, if you have a $1,000 deductible and a 20% coinsurance responsibility, and you receive a service at a cost of $2,000, you would be responsible for paying the full deductible ($1,000) and 20% of the remaining balance ($200) for a total of $1,200, while the plan pays the remaining $800. The $1,200 you pay would apply to your individual and family out-of-pocket maximum for the benefit year.

Deductible

Coinsurance: who pays what and when

Deductible	Coinsurance 80/20	
You pay 100% of costs until you get to deductible limit	**You pay 20%** of costs until you reach your out-of-pocket limit	**Your plan pays 100%** after you reach your out-of-pocket limit

The amount of covered expenses that an individual or family must pay out of pocket before the plan begins to pay for covered services. Deductible amounts are accumulated per calendar year. Once the deductible is reached, the member may still be responsible for other cost-sharing amounts, such as coinsurance or copays, until the out-of-pocket limit is met for the year.

In-network
This refers to any provider, service or procedure that is contracted with the applicable network. With SmartHealth, there are two levels of in-network providers: the Ascension Network and the Blue Cross Blue Shield National Network.The Ascension Network is considered Tier 1 and Ascension providers, services and procedures are covered at a higher rate than National Network and out-of-network services.

Out-of-network

This refers to any provider, service or procedure that is not contracted with a network covered under the plan. Out-of-network services are covered at a lower rate than in-network services. In some plans, there is no out-of-network coverage at all.

Out-of-pocket maximum

The out-of-pocket maximum is the maximum amount of covered expenses required to be paid each calendar year, including deductibles, copays and similar charges. Once you reach your out-of-pocket maximum, you will not pay any further covered expenses for the year. Note: The amount of the annual out-of-pocket maximum differs based on the plan option you choose (e.g., PPO or HDHP) and the applicable tier (e.g., Ascension Network, National Network or out-of-network).

Schedule of benefits

This document outlines the various services covered under SmartHealth by tier, as well as any fees associated with each type of healthcare service covered (deductibles, coinsurance, copays and maximums) and whether prior authorization is required.

Visit **mysmarthealth.org** to locate your schedule of benefits.

Summary of benefits coverage

This document will help you choose a SmartHealth coverage option by showing you how you and the plan would share the cost for covered healthcare services under each option.

Visit **mysmarthealth.org** to locate your summary of benefits coverage.

Guidance on SmartHealth tier coverage

How do I determine what network tier my doctor is in?
SmartHealth offers three tier levels of coverage:

Tier 1 ($): This option includes staying within the Ascension Network, seeing **Ascension employed or contracted providers**.

- Highest level of coverage and lowest out-of-pocket costs.
- Provides coordination of care; your providers will have access to your health history, providing a more seamless experience when visiting other Ascension Network providers.
- Find providers on **mysmarthealth.org**.

Tier 2 ($$$): This option includes seeing providers in the **Blue Cross Blue Shield (BCBS) network**.

- Higher out-of-pocket costs (more expensive than Tier 1).
- Limited coordination of care; providers may use different systems to maintain your health records.
- Find providers on **bcbs.com/find-a-doctor*** (This link does not apply to ILARL/OKTUL.)
  *OKTUL members, visit **bit.ly/bcbsoktul** and review providers with the "BlueOptions OK" label.
  *ILARL members visit **bit.ly/bcbsilarl** and review providers with the "BlueChoice Options IL" label.

Tier 3 ($$$$): This option includes providers who are not in the Ascension or BCBS Network, making it out of network.

- Limited coordination of care; providers may use different systems to maintain your health records.
- Most expensive option.

Not all providers at an Ascension facility are part of the Ascension Network — be sure to check with the provider that they are a participating Ascension Network (Tier 1) provider and facility before you schedule your appointment.

If you don't live near an Ascension Network (Tier 1) facility or needed provider, those services may qualify for benefit elevation.

Benefit elevation*
When an Ascension Network (Tier 1) facility is not available within 50** miles from your address, the Benefit Elevation program expands the network for needed specialties. This will allow you to use a Blue Cross Blue Shield (Tier 2) Network provider and receive the Tier 1 benefit. For more information, or to request benefit elevation, visit **mysmarthealth.org**.

*Benefit elevation does not apply to members on an EPO plan.
**20-50 miles for some Ascension Illinois members.

Benefit elevation requests must be submitted up to 30 days in advance of the treatment or services.

Benefit elevation is typically granted for up to 90 days after approval, after which an extension will need to be requested. It takes a minimum of 10 business days to process a benefit elevation request. If the medical service has already occurred, the member may submit an appeal. The appeal must include the reason services were not rendered at an Ascension Network (Tier 1) facility. If referred, a copy of the referral should be included.

Members will be notified by email if their request is approved. If denied, members will be notified by email with a letter attached explaining the denial.

Out-of-area plan*
If you live 50+ miles from the nearest Ascension Network (Tier 1) facility, you will automatically be placed in an out-of-area (OOA) plan. When you are enrolled in the OOA plan and you receive care from Blue Cross Blue Shield (Tier 2) providers, services will be elevated to the Tier 1 benefit level. You will receive an email from SmartHealth to confirm your enrollment. For more information, visit **mysmarthealth.org**.

The OOA plan does not apply to members on an EPO plan.

Healthcare claims process

1. **You visit your provider** and show them your ID card.

2. **You pay the copay** at the time of service (this varies depending on your plan, i.e PPO or HDHP).

3. **Your provider sends the claim** to the appropriate location specified on the back of your ID card.

4. **The claim is processed** by Automated Benefit Services (ABS), Ascension's wholly owned administrator.

5. **ABS reviews the claim** for accuracy and completeness, then determines which services will be covered by SmartHealth.

6. **SmartHealth pays or denies the claim** - this could be the entire bill or just a portion of the services, depending on your plan.

7. **You can view your explanation of benefits** (EOB) **online**.

8. **You then receive a bill from your provider** with your remaining balance. (If SmartHealth covered the bill at 100%, it would show $0 patient responsibility.)

9. **Verify that your EOB and bill match** for that date of service and for the services provided.

10. **You pay the remaining balance** to your provider.

How to read an explanation of benefits (EOB)

An EOB is a great way to keep track of your healthcare benefits an d how your medical plan processes a healthcare claim. You will receive one of these for every service or claim billed to SmartHealth. They look similar to a bill, but they function a little differently. The EOB includes a chart, outlining how your claim was processed. You should make sure your EOB and bill from your provider match. EOBs will no longer be sent via mail (paper) beginning 8/1/2024. To access your EOB electronically, visit healthcare.ascension.org/ascension-one.

1. Patient name: The recipient of the service provided.

2. Patient account number: Your identification number with your doctor's office.

3. Claim number: The number by which you and your SmartHealth medical plan will be able to refer to this claim should you have any questions or concerns.

4. Provider: The name of the healthcare provider or facility that rendered the services.

5. Date of service: The start and end date of the referenced service.

6. Type of service: A standard numerical description of the service received.

7. Total charge: The amount billed to your insurance by the provider or facility.

8. Allowed amount: The sum your health plan paid for your services.

9. Ref no.: This code will provide a brief description of service in the "Reference Code Explanation" section.

10. Patient responsibility: Any balance the provider billed that was not covered by your insurance.

EXPLANATION OF BENEFITS
This is NOT a Bill

Patient: JANE SAMPLE
Claim: 1315738593
Provider: PROVIDER GROUP INC   Patient Acct: 765472V3122

Dates of Service	Service	Total Charge	PPO Disc	Allowed Amount	Ineligible Amount	Co-Pay Amount	Deductible Amount	Co-Insur Amount	Paid %	Other Ins	Payment Amount	Paid To	Patient Responsibility	Ref No.
01/23-01/01/01	99214	$192.00	$26.50	$165.50	$0.00	$25.00	$0.00	$0.00	100%	$0.00	$140.50		$0.00	S10
Column Totals		$192.00	$26.50	$165.50	$0.00	$25.00	$0.00	$0.00		$0.00	$140.50		$25.00	

Patient's Responsibility........ $25.00

Reference Code Explanation

Code	Explanation
S10	This could be provider plan participation, deductible amount, duplicate service, etc.

What is balance billing? This happens when your insurance does not have an agreement with the healthcare provider (i.e. an out-of-network provider). This lack of agreement may mean the provider charges more than your medical plan has paid the provider. The amount you owe after insurance will be billed to you directly. This is not allowed for Tier 1 and Tier 2 providers; however, if you go to an out-of-network provider, balance billing may occur. If you receive a bill from a Tier 1 or Tier 2 provider for an amount above your patient responsibility, please contact SmartHealth customer service at 888-492-6811.

Know where to go

Your doctor's office	Virtual urgent care	Retail-convenience clinics	Urgent care centers	Hospital-based emergency rooms	
Your first call	Convenient	Easy in and out	When your doctor can't see you	For life-threatening illnesses or injuries	
$	$	$$	$$	$$$	Cost
				✔	Chest pain Head trauma Seizures Difficulty breathing Neurological changes
✔		✔	✔		Vaccinations Vomiting/diarrhea
✔	✔	✔	✔		Earache Flu or sore throat Sinus infections Sprains Urinary tract infection
			✔	✔	Broken arm Knee injury
✔		✔	✔		Small cuts/lacerations

Thank you for being a valued SmartHealth member. If you have any questions, download the **Ascension One app**, visit **mysmarthealth.org** or call SmartHealth customer service at **888-492-6811**.