Look inside for an overview of your benefits and what’s new for the 2019-20 plan year.
Open Enrollment

May 1-May 31 » This is the time to enroll in or make changes to your benefits and learn more about your options.

How to Enroll in Benefits or Make Changes Online

1. Log in to PEHP for Members at www.pehp.org. To create your personal account, you’ll need your PEHP ID number and the last four digits of your Social Security number. Find your PEHP ID number on your benefits card, your EOBs, or call PEHP at 801-366-7555.

2. From the PEHP for Members homepage, find “Online Enrollment” under the “my Benefits” menu.

Online Enrollment

3. The Online Enrollment page shows benefits available to you and your enrollment status. Click “Enroll” or “Change.” You may change your selections any time before the end of open enrollment.
Highlights: 2019-20 Plan Year

STAR HSA Plan
The STAR HSA Plan provides an 8% higher benefit level than the Traditional Plan. See pages 5-6 to help determine which plan is best for you.

Chronic Medications Covered Before Deductible
This is a major new benefit for STAR HSA Plan members who no longer have to meet their deductible before getting certain chronic medications covered under the plan. See the PEHP Covered Drug List at www.pehp.org for details.

New Cost Comparison Tool
PEHP has replaced its old Cost Calculator with a new and vastly improved Cost Comparison Tool. This tool makes it possible to compare costs based on location and between providers of the same type. You can also find Value Providers, such as clinics and labs. See page 10 for details.

Get Up to $2,000 in Cash Back
You can now share in the savings when you choose a lower-cost provider. Find out about cash back services using PEHP’s new Cost Comparison Tool. Look for the green phone with a dollar sign. See page 11 for details.

Get the Best Care by Asking 5 Questions
When it comes to your health, questions matter. You have a right to know how a recommended treatment will help you; what the potential downsides are; whether there are other simpler, less costly options; what would happen if you didn’t get care; and how much the treatment will cost. See page 13 for details.

Need Immediate Care?
Consider consulting a doctor remotely with your smartphone from Intermountain Connect Care (all networks) or University of Utah Health Virtual Visits (Summit only). It’s convenient and costs less. See page 12 for details.
Your To-Do Checklist

1 Your Network Options

Summit ☐  Advantage ☐  Preferred ☐

Consider the doctors, hospitals, and other healthcare providers you prefer to see when you choose your network. Preferred is the largest network, and it will cost you more in premium. Summit and Advantage cost the same. More About Networks » Pages 8-9.

2 Your Medical Options

STAR HSA Plan ☐  Traditional Plan ☐

By taking the time to understand HSA-qualified plans, such as the STAR HSA plan, you could save hundreds each year and build a nest egg for healthcare and retirement. More About Plans » Pages 5-6.

Need Help Deciding?
Consider calling a Health Benefits Advisor. Call PEHP at 801-366-7555.
Plan Comparison

Figures below based on Advantage & Summit Networks. For more details, see your 2019-20 Benefits Summary. Find it when you log in to your PEHP account at www.pehp.org

**STAR HSA Plan**

<table>
<thead>
<tr>
<th></th>
<th>Medical Deductible</th>
<th>Out-of-Pocket Maximum</th>
<th>Plan Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single</strong></td>
<td>$1,500</td>
<td>$5,000</td>
<td>Pays covered benefits generally at 80% (using in-network providers, after deductible).</td>
</tr>
<tr>
<td><strong>Double</strong></td>
<td>$2,500</td>
<td>$7,500</td>
<td></td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td>$0</td>
<td>$0</td>
<td></td>
</tr>
</tbody>
</table>

**Traditional Plan**

<table>
<thead>
<tr>
<th></th>
<th>Medical Deductible</th>
<th>Out-of-Pocket Maximum*</th>
<th>Plan Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single</strong></td>
<td>$350</td>
<td>$3,000</td>
<td>Pays covered benefits generally at 80% (using in-network providers, after deductible).</td>
</tr>
<tr>
<td><strong>Double</strong></td>
<td>$700</td>
<td>$6,000</td>
<td></td>
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<tr>
<td><strong>Family</strong></td>
<td>$1,202.50</td>
<td>$9,000</td>
<td></td>
</tr>
</tbody>
</table>

**Special Note**

If you enroll in Traditional Plan this year, you can't switch to the Consumer Plus Plan next open enrollment. You'll have to enroll in the STAR HSA Plan first before you can switch to the Consumer Plus Plan.

**You can contribute to an HSA. Contribution limits: $3,500/single, $7,000/double & family.**

**You can contribute to an HSA. Contribution limits: $3,500/single, $7,000/double & family.**
Plans at a Glance

**STAR HSA Plan**
- The STAR HSA Plan provides 8% higher benefit than the Traditional Plan.
- You can put money into an HSA for health-related expenses.
- HSA funds carry over from year-to-year and grow tax-free. You never forfeit what you don’t spend. Save for healthcare and retirement expenses.
- It covers the most preventive care services paid at 100% compared to other plans.
- Certain preventive medications are now covered before you meet your deductible.

**The STAR HSA Plan is likely your better choice, unless:**
- Costs for just one individual’s treatment is enough to reach the STAR HSA Plan out-of-pocket maximum, and the rest of your family’s claims are minimal.
- You don’t have enough accumulated in your HSA to pay for a known, high drug expense at the beginning of the plan year.

**Traditional Plan**
- You pay a portion of the plan from your paycheck and are unable to have an HSA.
- It has a lower deductible and gives you predictable costs through fixed co-pays.
- Each family member has their own deductible and out-of-pocket maximum.
- Deductible does not apply to out-of-pocket maximum.
Utah State University - Eastern

Monthly Insurance Premiums
Full-Time Benefitted Employee (2019-2020 Plan Year)

Below are the monthly Insurance premiums for Benefitted employees working at least 30 hours per week.

*If you are a Benefitted employee and work less than 30 hours per week, please see Part-Time Premium information.*

Utah State University-Eastern pays an average premium of $1,103 per participating employee per month in our Health Plan.

Utah State University-Eastern pays an average premium of $55 per participating employee per month in our Dental Plan.

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>Star Health Insurance Plan (HDHP)</th>
<th>Traditional Health Insurance Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Person</td>
<td>$0.00</td>
<td>One Person</td>
</tr>
<tr>
<td>Two People</td>
<td>$0.00</td>
<td>Two People</td>
</tr>
<tr>
<td>Three or More People</td>
<td>$0.00</td>
<td>Three or More People</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>Star Health Insurance Plan (HDHP)</th>
<th>Traditional Health Insurance Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Person</td>
<td>$169.76</td>
<td>One Person</td>
</tr>
<tr>
<td>Two People</td>
<td>$350.03</td>
<td>Two People</td>
</tr>
<tr>
<td>Three or More People</td>
<td>$467.28</td>
<td>Three or More People</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>Average USU-Eastern Health Premium Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Person</td>
<td>$6.92</td>
</tr>
<tr>
<td>Two People</td>
<td>$13.12</td>
</tr>
<tr>
<td>Three or More People</td>
<td>$22.60</td>
</tr>
</tbody>
</table>
Summit

Steward Health*, MountainStar, and University of Utah Health Care providers and facilities. You can also see Advantage providers on the Summit network, but your benefits will pay less.

Participating Hospitals

Beaver County
- Beaver Valley Hospital
- Milford Valley Memorial Hospital

Box Elder County
- Bear River Valley Hospital
- Brigham City Community Hospital

Cache County
- Cache Valley Hospital

Carbon County
- Castleview Hospital

Davis County
- Lakeview Hospital
- Davis Hospital

Duchesne County
- Uintah Basin Medical Center

Garfield County
- Garfield Memorial Hospital

Grand County
- Moab Regional Hospital

Iron County
- Cedar City Hospital

Juab County
- Central Valley Medical Center

Kane County
- Kane County Hospital

Millard County
- Delta Community Hospital
- Fillmore Community Hospital

Salt Lake County
- Huntsman Cancer Hospital
- Jordan Valley Hospital
- Jordan Valley Hospital - West
- Lone Peak Hospital
- Primary Children’s Medical Center
- Salt Lake County (cont.)
  - Riverton Children’s Unit
  - St. Marks Hospital
  - Salt Lake Regional Medical Center
  - University of Utah Hospital
  - University Orthopaedic Center

San Juan County
- Blue Mountain Hospital
- San Juan Hospital

Sanpete County
- Gunnison Valley Hospital
- Sanpete Valley Hospital

Sevier County
- Sevier Valley Hospital

Summit County
- Park City Medical Center

Tooele County
- Mountain West Medical Center

Utah County
- American Fork Hospital
- Orem Community Hospital
- Utah Valley Hospital

Wasatch County
- Heber Valley Medical Center

Washington County
- Dixie Regional Medical Center

Weber County
- McKay-Dee Hospital

Salt Lake County (cont.)
- Primary Children’s Medical Center
- Riverton Hospital

San Juan County (cont.)
- Blue Mountain Hospital
- San Juan Hospital

Sanpete County
- Gunnison Valley Hospital
- Sanpete Valley Hospital

Sevier County
- Sevier Valley Hospital

Summit County
- Park City Medical Center

Tooele County
- Mountain West Medical Center

Uintah County
- Ashley Regional Medical Center

Utah County
- American Fork Hospital
- Orem Community Hospital
- Utah Valley Hospital

Wasatch County
- Heber Valley Medical Center

Washington County
- Dixie Regional Medical Center

Weber County
- McKay-Dee Hospital

Out-of-State – Colorado
- St. Mary’s Hospital – Grand Junction
- Southwest Memorial Hospital – Cortez

No-Pay Providers

PEHP doesn’t pay for any services from certain providers, even if you have an out-of-network benefit. Find participating providers and see a list of No-Pay Providers at www.pehp.org.

Advantage

Intermountain Healthcare (IHC) providers and facilities. You can also see Summit providers on the Advantage network, but your benefits will pay less.

Participating Hospitals

Beaver County
- Beaver Valley Hospital
- Milford Valley Memorial Hospital

Box Elder County
- Bear River Valley Hospital

Cache County
- Logan Regional Hospital

Carbon County
- Castleview Hospital

Davis County
- Intermountain Layton Hospital
- Davis Hospital

Duchesne County
- Uintah Basin Medical Center

Garfield County
- Garfield Memorial Hospital

Grand County
- Moab Regional Hospital

Iron County
- Cedar City Hospital

Juab County
- Central Valley Medical Center

Kane County
- Kane County Hospital

Millard County
- Delta Community Hospital
- Fillmore Community Hospital

Salt Lake County
- Alta View Hospital
- Intermountain Medical Center
- The Orthopedic Specialty Hospital (TOSH)
- LDS Hospital

Preferred

Consists of all providers and facilities in both the Summit and Advantage networks.

*Formerly IASIS Medical Networks
Network Considerations

With both networks you get access to hospitals and doctors’ offices, where prices can vary. The Summit network provides more cash back (💰) opportunities for certain services. See sample procedures and price estimates for both networks below.

**ADVANTAGE** Price estimates for Intermountain Healthcare hospitals

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Doctor’s Office</th>
<th>Surgery/Imaging Center</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colonoscopy</td>
<td>$956</td>
<td>N/A on Wasatch Front</td>
<td>$2,421</td>
</tr>
<tr>
<td>Back MRI</td>
<td>$326</td>
<td>Not Available</td>
<td>$1,205</td>
</tr>
<tr>
<td>Knee Replacement</td>
<td>Not Available</td>
<td>Not Available</td>
<td>$35,048</td>
</tr>
</tbody>
</table>

**SUMMIT** Price ranges for Steward (formerly IASIS), MountainStar, University of Utah, surgical centers, imaging centers

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Doctor’s Office</th>
<th>Surgery/Imaging Center</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colonoscopy</td>
<td>$1,057</td>
<td>$1,673</td>
<td>$2,590</td>
</tr>
<tr>
<td>Back MRI</td>
<td>$328</td>
<td>$468</td>
<td>$1,800</td>
</tr>
<tr>
<td>Knee Replacement</td>
<td>Not Available</td>
<td>$15,483</td>
<td>$36,851</td>
</tr>
</tbody>
</table>

*For illustrative purposes only. Based on PEHP average-cost data from March 2019 using cost comparison tool. Costs may vary. Estimates shown reflect the total cost — not necessarily your portion of the cost.

**Compare Medical Costs by Network**

Log in to your PEHP account, then click on the “Find a Provider & Costs” icon on the top right. Compare price differences for medical services between the Advantage and Summit networks. Choose a network and then click on “Find and Compare Costs” tab. You’ll see prices for your chosen treatment by type of facility. Learn more on pages 10-11.

**Using Your Out-of-Network Benefit** Under this benefit, PEHP credits up to 100% of the in-network rate toward your remaining deductible for services from a non-contracted provider. Once you reach your deductible, PEHP pays 20% less than normal, including after you reach your out-of-pocket maximum. This ensures you receive some benefit when you either mistakenly or purposefully use a non-contracted provider. Because there is no contract with PEHP, you may be subject to balance billing unless you have negotiated a price with the provider.

**Seeking Reimbursement for Cash Payments** You may elect to pay cash for covered medical services. Check your Benefits Summary to see which services are allowed out-of-network. When you do obtain eligible services, just submit your receipt to PEHP for reimbursement or credit towards your deductible. PEHP will follow the same process and rules in paying for the claim as if submitted by a provider. For services beyond what PEHP covers, see if you can use HSA or Flex funds, which come under much broader IRS rules.
Search by medical services to find providers and costs using PEHP’s new and improved Cost Comparison Tool. Plus, find cash back opportunities.

**To get started**
Log in to your PEHP account at www.pehp.org. Next, click on the “Find a Provider and Costs” icon on the top right, then choose your network.

Under the “Find & Compare Costs” tab, you can search by medical services. You’ll see cost information for services based on past claims PEHP processed.

Your search results will display common procedures to give you a better idea of total costs at different locations where the service has been performed.

Learn more:
www.pehp.org/general/how-to-use-cost-saving-tools

See Other Side for Cash Back Information
Get Cash Back

PEHP offers cash back opportunities for certain medical services performed by lower-cost providers. The amount of cash back can range from $50 to $2,000.

Eligible services include:
» Colonoscopies
» Some outpatient surgeries
» Some inpatient stays
» MRIs and CT scans
» Some medications
» Pharmacy tourism

We Pay, You Save
1. PEHP pays you for using lower-cost providers through a cash back program created by the Legislature.
2. Not only do you get cash back, it saves you money on deductibles and co-insurance.
3. You help keep overall healthcare costs down and help preserve your benefits.

How is Cash Back Determined?
The amount eligible for cash back depends on the amount of savings available in your network for a specific service. Cash back can range between $50 and $2,000. Cash back is only available if PEHP is your primary insurance.

How to Find & Apply for Cash Back Opportunities
1. Log in to Your PEHP Account
   When you log in to your PEHP account at www.pehp.org, click on the “Find a Provider and Costs” icon on the top right, then choose your network.

2. Search for Medical Services
   Under the “Find & Compare Costs” tab, you can search by medical services. You’ll see cost information for services based on past claims PEHP processed. Your search results will display common services based on the treatment you entered to give you a better idea of total costs at different locations where the service has been performed. For each location, you’ll see a list of providers who have performed your desired treatment.

3. See Cash Back Opportunities & Apply
   If cash back is available for the service, you’ll see a cash back indicator next to the location and provider name. To qualify for cash back, you must contact PEHP at 801-366-7555 or through the secure Message Center before receiving services. A Health Benefits Advisor will help you determine where to go for the best value and tell you how much cash back you can expect to receive. When you call and apply, you’ll have 90 days to get the service done. Once PEHP has processed your claim, please allow up to 60 days to receive your cash back. Please note this is taxable income and FICA is withheld. All PEHP cash back incentives cannot exceed $3,900 per calendar year.
Need Immediate Care? Consult a Doctor Remotely

A Fast, Easy Way to See a Doctor »
Families have access to care 24/7/365 (even on holidays) for urgent, low-level needs such as:
- Eye infections
- Painful urination
- Joint pain or strains
- Minor skin problems

Intermountain Connect Care »
- Summit
- Advantage
- Preferred

University of Utah Health Virtual Visits »
- Summit only

If You’re on the Traditional Plan
Each on-demand doctor consultation costs only a $10 co-pay.

If You’re on the STAR HSA Plan
Each on-demand doctor consultation costs only $49 before you meet your deductible. After your deductible is met, you pay only a $10 co-pay.

Download the app from the Google Play Store or iTunes App Store.
Get the Best Care by Asking 5 Questions

You have the right to know and ask questions about your care. Ask these five questions to make sure you are informed and comfortable with your treatment options.

1. How will this treatment help me?
The effectiveness of a treatment can vary. In fact, some care may even be unnecessary. According to the Institutes of Medicine, more than 30% (or $750B) of healthcare fits this category, which is more than we spend on K-12 education as a nation. Make sure you know how care will help you.

2. What are the potential downsides?
Healthcare helps make our lives better, but it is not without risks. Even routine treatment can have risks due to infections, errors, and adverse reactions. Make sure you know about the risks of care.

3. Are there simpler, less costly options?
Healthcare providers can mistakenly assume they know what you want. This can include surgeries over therapy and medications over lifestyle changes. Make sure you know your options, including those that are less costly and less invasive, so you can decide what is best for you.

4. What would happen if I didn’t get treatment?
Our bodies are amazing in their ability to heal. At times, the best option may be to let the body heal naturally or forego a treatment that potentially may do more harm than good. Make sure you know what would happen if you didn’t get care.

5. How much will this cost?
No one likes to think about costs when it comes to getting the healthcare you need. But it would be a mistake to believe that expensive care is the best care in every situation or that providers who operate in a business environment are not aware of how the cost of care impacts their bottom line. Don’t be afraid to ask about costs. A drug that costs $10 can be better than one that costs $500 and a lab that costs $10 is no different than one that costs $100.
Stay Connected with PEHP

Follow us on social media and watch PEHP informational videos

facebook.com/pehp1
twitter.com/urs_pehp
instagram.com/pehphealthbenefits
youtube.com/search for PEHP Health & Benefits

NEW! Online Tool
Cost Comparison & Cash Back Opportunities

Monthly Tips to Maximize Your Benefits


How to use PEHP Cost Comparison Tool

Know Your Network

Understanding the STAR HSA Plan

PEHP Member Guide

This guide will help you understand basic health insurance terms, how to maximize your PEHP benefits, and give you the tools you need to make the best healthcare decisions for you and your family.

Read it online: pehp.org/healthcaretopics
Email us for a printed copy: publications@pehp.org
CUSTOMER SERVICE
801-366-7555 or 800-765-7347
Weekdays from 8 a.m. to 5:30 p.m.
Have your PEHP ID or Social Security number on hand for faster service. Foreign language assistance available.

HEALTH SAVINGS ACCOUNTS (HSA)
» PEHP FLEX$ Department
  801-366-7503 or 800-753-7703

» HealthEquity
  866-960-8058
  www.healthequity.com/stateofutah

SAVINGS PROGRAM
» PEHPplus
  www.pehp.org/plus
Provides savings of up to 60% on healthy lifestyle products and services. From eyeglasses and gyms to acupuncture and massage, there's a wide variety of discounts for PEHP members. We frequently add new discounts, categories, and vendors, so check back often.

PEHP PHARMACY CUSTOMER SERVICE
801-366-7551 or 888-366-7551

WELLNESS AND DISEASE MANAGEMENT
» PEHP Healthy Utah
  801-366-7300 or 855-366-7300
  www.pehp.org/healthyutah

» PEHP Health Coaching
  801-366-7300 or 855-366-7300

» PEHP WeeCare
  801-366-7400 or 855-366-7400
  www.pehp.org/weecare

» PEHP Integrated Care
  (Ask for Member Services Nurse)
  801-366-7555 or 800-765-7347

ONLINE ENROLLMENT HELP LINE
801-366-7410 or 800-753-7410

BENEFITS SUMMARY
Read the 2019-20 USU-Eastern Benefits Summary for more detailed information about your benefits.

To request printed copies of this Open Enrollment Guide, email publications@pehp.org.