



Reimagine · Rediscover Benefits

Lakeland Provider Conference 2023
October 18, 2023

We're Here to Help!




- Member Health & Wellness at Whirlpool
- Benefits
 - ✓ ID Cards
- Customer Service
 - ✓ Provider Network verification
 - ✓ IVR- Available 24/7
 - ✓ 1st Level Appeals
- Precertification Procedures
- EOBs


HealthSCOPE
BENEFITS

800-660-6212

Whirlpool Medical Plan Options for 2024


Whirlpool CORPORATION
 Issuer (80840) 911-40026-00
 Member ID: 32685304 Group Number: 76-414943
 Member:
 BENNY SAMPLE 00 MED
MegImpact
 Rx BIN: 003585
 Rx PCN: ASPROD1
 Rx GRP: WHR01
 UnitedHealthcare
 Choice Plus Network
 Self-funded plan administered by HealthSCOPE Benefits

This card must be presented each time services are requested. Printed: 09-30-2022
 Medical: In Net Out of Net
 Ded: \$1,200* \$4,900
 OOPM: \$3,200* \$12,900
*Includes pharmacy
 Call Healthscope at the customer service number listed on this ID Card for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS.
 For Members: www.healthscopebenefits.com 800-660-6212
 For Providers: www.healthscopebenefits.com 800-660-6212
 Claims: EDI # 40026, HealthSCOPE Benefits, PO Box 30962, Salt Lake City, UT 84130
 
 Pharmacists & Members: 844-587-7387



HealthSCOPE BENEFITS
 4307 1234 5678 0000
 John Q. Cardholder
 Employer Name 

Savings Plan (HDHP)

- Lower premiums, higher deductible
- No more biometric incentives provided.
- Members can contribute to account



HealthSCOPE BENEFITS
 4307 1234 5678 0000
 4307
 John Q. Cardholder
 Employer Name 

Rewards Plan

- Higher premiums, lower deductible
- No longer providing biometric incentives into account
- Members can use the debit card until funds are exhausted

Prescription Coverage


 1.844.587.7387


 1.888.504.5563

- Automatic part of medical insurance
- Members are encouraged to get scripts filled by Walgreens
- Archimedes Specialty RX PBM

Whirlpool's HealthSCOPE Benefits ID card



NEW ID CARDS TO BE ISSUED DUE TO DEDUCTIBLE/COINSURANCE CHANGES. OLD CARDS WILL STILL BE GOOD IF PRESENTED!

Front

HealthSCOPE BENEFITS Issuer (80840) 911-40026-00
Whirlpool CORPORATION
Member ID: 32685304 Group Number: 76-414943
Member: BENNY SAMPLE 00 MED
MegImpact
Rx BIN: 003585
Rx PCN: ASPROD1
Rx GRP: WHR01
UnitedHealthcare Choice Plus Network
Emergency Room \$150*, Outpatient Surgery Ctr \$150*
*Copay does not apply prior to meeting your deductible
Routine Wellness 100% NO COPAY
5030 Self-funded plan administered by HealthSCOPE Benefits

Back

This card must be presented each time services are requested. Printed: 09-30-2022

Medical: In Net	Out of Net
Ded: \$1,200*	\$4,900
COPI: \$3,200*	\$12,900

*Includes pharmacy

Call Healthscope at the customer service number listed on this ID Card for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS.
For Members: www.healthscopebenefits.com 800-660-6212

For Providers: www.healthscopebenefits.com 800-660-6212

Claims: EDI # 40026, HealthSCOPE Benefits, PO Box 30962, Salt Lake City, UT 84130

Preferred Lab
Pharmacists & Members: 844-587-7387

2024 Highlights:

- Member ID's and claims submission address
 - Claims: EDI # 40026,
 - HealthSCOPE Benefits, PO Box 30962, Salt Lake City, UT 84130
- United Healthcare Choice Plus Network for Lakeland
- Preferred labs include Quest and LabCorp.
- CAA compliance and transparency out-of-pocket amounts-new cards will have updated out of pocket amounts for 2024.
- Copays highlighted for providers on the front of card.
- Dependent names will be listed on card if covered

2024 Whirlpool Medical Benefit Plan Options



Benefit Changes for 2024

- **REWARDS** plan deductible REDUCED to \$800 individual/\$1,600 family
 - Added embedded family deductible (no one family member can contribute more than the single amount toward the family deductible)
- **SAVINGS** plan deductible REDUCED to \$1,800 individual/\$3,600 family
 - Removed embedded family deductible- A family can meet the deductible by pooling eligible expenses. There is no limit to the amount one member can pay towards the family deductible
- **SAVINGS** plan coinsurance REDUCED to \$4,200 individual/\$8,400 family
- Increased PT/ST/OT visits from 20 to 40 before medical review required
- Enhanced preventive care- Mammograms & Pap Smears- will pay preventive screening plus 1 additional test (includes CT, MRI, Ultrasound, Lab) if medically necessary at 100% (including a repeat mammogram)
- Hearing Aids are now covered. Covered every 3 years up to \$3,000.
 - Coverage includes audiometric hearing visit and eval for hearing aid RX
 - Electronic hearing aids, installed in accordance with an RX written during a covered hearing exam
 - Testing and fitting of hearing aid devices at physician office visit subject to applicable deductible and coinsurance

2024 Benefit Plan Options

	Savings Plan		Rewards Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Emergency room	Emergency: 15% coinsurance + \$150 copay ^{4,6} Non-Emergency: 50% coinsurance + \$150 copay ^{4,6}		Emergency: 20% coinsurance + \$150 copay ^{4,6} Non-Emergency: 50% coinsurance + \$150 copay ^{3,6}	
Urgent Care	15% coinsurance	50% coinsurance	\$75 copay ⁷ (no deductible for office visit)	50% coinsurance
Mental Health/Substance Abuse ¹ : Inpatient	15% coinsurance	50% coinsurance	20% coinsurance	50% coinsurance
Mental Health/Substance Abuse: Outpatient	15% coinsurance	50% coinsurance	Outpatient office visit: \$20 copay ⁸ / office visit (deductible does not apply) Outpatient facility: 20% coinsurance	50% coinsurance
Chiropractic care Limit: 24 visits per calendar year	15% coinsurance	50% coinsurance	20% coinsurance	50% coinsurance
Lab work	Preventive: No charge Other: 15% coinsurance	50% coinsurance	Preventive: No charge Preferred Lab: \$100 copay ⁹ (deductible does not apply) Other: 20% coinsurance	50% coinsurance
High-Tech Imaging (MRI, MRA, CT, PET)	15% coinsurance	50% coinsurance	Free-standing facility: \$100 copay ⁹ (deductible does not apply) Other: 20% coinsurance	50% coinsurance
Physical Therapy, Occupational Therapy, Speech Therapy	15% coinsurance	50% coinsurance	\$20 copay ⁶ (deductible does not apply)	50% coinsurance
Home healthcare (limit 120 visits per calendar year)	15% coinsurance	50% coinsurance	20% coinsurance	50% coinsurance
Lifetime maximum	None	None	None	None

REWARDS plan features copays including:

- \$20 PCP / \$50 Specialists OV
- Preferred Lab \$100
- Mental/Behavioral Health OV \$20
- PT/ST/OT \$20 per visit
- MRI/CT/PET \$100 at a free standing facility
- Outpatient Surgery Center \$150

Whirlpool plan does cover SNF under both plan options at deductible and then coinsurance

Whirlpool 2024 Prescription Drug Benefits

REWARDS PLAN Changes below- NO change to Savings Plan RX benefit

**Prescription
coverage**

Now:

~~\$\$\$\$~~

Tier 0: \$0

Tier 1: 10% coinsurance

Tier 2: 20% coinsurance

Tier 3: 50% coinsurance

More details regarding your prescription coverage can be found by visiting the Whirlpool Benefits Center at my.Whirlpool.com



ARCHIMEDES™

1.888.504.5563

MedImpact

1.844.587.7387

Walgreens

Preferred Pharmacy

Archimedes is Whirlpool's Specialty Pharmacy PBM. There is a specific list of specialty drugs that Archimedes administers. Contact HSB at 800-660-6212 to determine if the drug should be administered through Archimedes or HSB medical and for eligibility and authorization information.

Whirlpool Telehealth 2024



Virtual care

Download the Doctor on Demand app:
Enter UMR as your health insurance
provider and Whirlpool as your
employer.

www.doctorondemand.com

REWARDS PLAN

All General Medicine (includes routine dermatology)

100% no deductible, no copay

Behavioral Health

Mental health therapy (25 minutes) – \$20 copay

Mental health therapy (50 minutes) – \$20 copay

Psychiatry initial visit (45 minutes) - \$20 copay

Psychiatry follow-up visit (15 minutes) - \$20 copay

SAVINGS PLAN (Subject to deductible/coinsurance)

Dr on Demand Fees Listed Below

All General Medicine (includes routine dermatology) –:\$49

Behavioral Health

Mental health therapy (25 minutes) - \$79

Mental health therapy (50 minutes) - \$129

Psychiatry initial visit (45 minutes) - \$229

Psychiatry follow-up visit (15 minutes) - \$99

Whirlpool Benefit Partners 2024



Medical and health advocate team
1.800.660.6212

Hearing impaired:
1.844.386.7491 (TTY 711)



Virtual care

Download the Doctor on Demand app:
Enter UMR as your health insurance
provider and Whirlpool as your
employer.



Specialty medications
1.888.504.5563

Hearing impaired:
Dial 711 to be automatically connected
to a TRS communications assistant



Preferred pharmacy



Pharmacy
1.844.587.7387

Hearing impaired:
Dial 711 to be automatically connected
to a TRS communications assistant



Dental plan
1.800.524.0149

Hearing impaired:
Dial 711 to be automatically connected
to a TRS communications assistant



Vision plan
1.800.877.7195

Hearing impaired:
1.800.428.4833



Family benefits
1.844.930.3304



Financial coaching
OnSmartPath.com/whirlpool



**STD, LTD, FMLA,
Paid parental leave**
1.855.350.0552



**401(k) retirement plan,
Roth 401(k) retirement
savings account**
1.800.523.1188

Hearing impaired:
1.800.749.7273 (TTY 711)



Life insurance, AD&D coverage
1.800.638.6420

Legal plan
1.800.821.6400



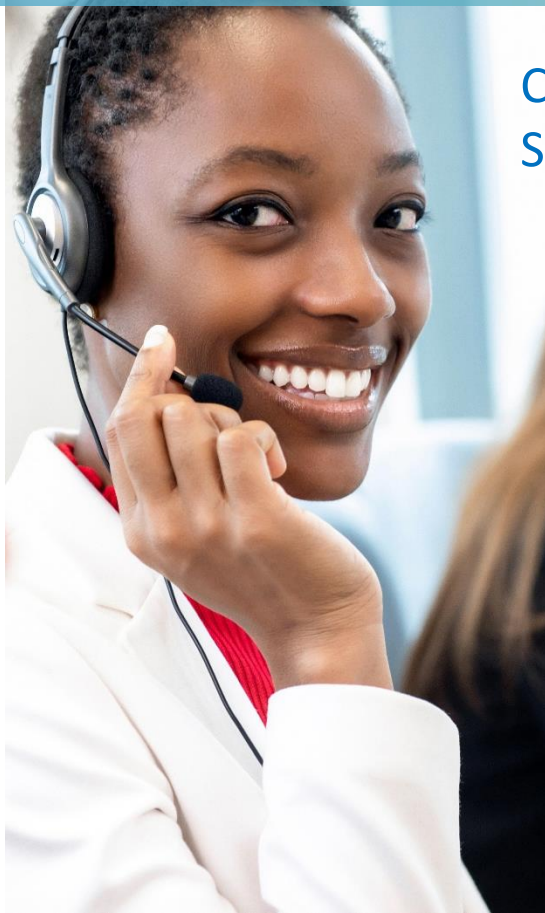
Expert medical opinion
1.800.Teladoc (835.2362)

Hearing impaired:
TTY 1.855.636.1578



**Life services: behavioral
and mental health**
LifeWorks is now Telus Health.
whirlpool.lifeworks.com
1.800.253.9060

Customer Care from HealthSCOPE Benefits



Customer Care Representatives are available at the Whirlpool Service Line Monday – Friday, 8 a.m. till 6 p.m. EST

- Pre-certification/Pre-authorization
- Claim Status
- Eligibility
- Benefit Information
- Provider Network verification
- IVR- Available 24/7
- 1st Level Appeals

The logo for HealthSCOPE BENEFITS. It features the word "HealthSCOPE" in blue and green, with "BENEFITS" in smaller blue letters below it. A decorative arc of blue dots is positioned above the "SCOPE" part of the word.

HealthSCOPE
BENEFITS

800-660-6212

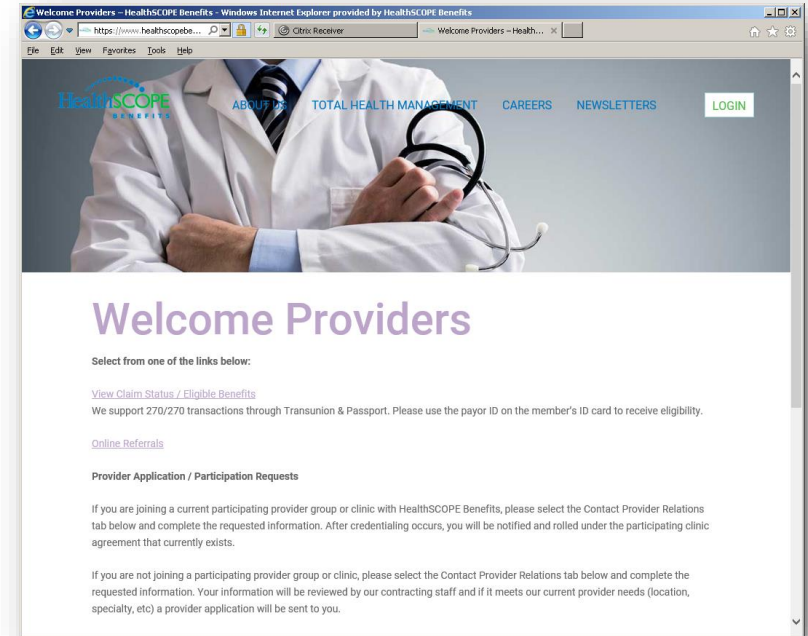
www.healthscopebenefits.com for Providers

1. Go to www.healthscopebenefits.com.
2. Click Login.
3. Click Provider.
4. Click either View Claims Status/Eligible Benefits or Online Referrals.
5. Enter WHIRL for group name and Submit.
6. Select if prior to 1/1/2023
7. After 1/1/23, set up or use your One Healthcare ID on UMR base portal .



Check on:

- Claim Status/Eligibility
- Benefit Information
- Precert Information
- Copies of EOBs



Member Self-Service

- [Online Claims and Customer Care after 4/1/2021](#)
- [Online Claims prior to 4/1/2021](#)

Precertification Procedures

All members, along with their providers, will be required to pre-certify all:

- Non-emergency inpatient admissions
- Outpatient surgical procedures not performed in a physician's office
- Non-stat MRI, PET and CT Scans
- Outpatient mental health facility admits or visits
- Dialysis
- Chemotherapy

Contact HealthSCOPE Benefits for pre-certification at **1-800-660-6212**

The member's ID card has a reminder statement regarding pre-certification.

The screenshot shows a web portal for "PREAUTHORIZATION" with the following elements:

- Navigation:** "Member search" and "myMenu" buttons on the left; "Hi Demo Provider" and a "< Back" button at the top right.
- Header:** "PREAUTHORIZATION" in large blue letters, with the subtext "Submit your requests electronically" and a background image of a hand writing on a document.
- Section:** "Preauthorization" with a heading and a paragraph: "Please select the appropriate method below to submit a prior authorization request on behalf of a patient participating in a UMR-administered medical plan."
- Options:** Three columns of options, each with a "Get started" button:
 - PeaceHealth & ZOOM+Care members:** "For providers treating patients covered by PeaceHealth and ZOOM+Care health care plans". Instruction: "Please select the Get started button below to begin the Prior Authorization process."
 - West Virginia PEIA members:** "For providers treating patients covered by the West Virginia Public Employees Insurance Agency (PEIA)". Instruction: "Please log in or register for an iExchange account to submit prior authorization requests for medical services and specialty medications administered in a provider's office."
 - All other UMR plan members:** "For providers treating patients covered by any other UMR-administered group health care plan". Instruction: "Please complete the online UMR Authorization Submission Form to begin the prior authorization process."
- Additional Info:** A note at the bottom states: "iExchange allows you to submit requests, check the status of pending authorizations, and look up member eligibility online."

Provider Claims Submission & EFT/RA

NO CHANGE FROM 1/1/2023 ON CLAIM SUBMISSION. MAKE SURE YOUR CLEARING HOUSE HAS SUBMISSION INFO BELOW:

Claims: EDI # 40026

HealthSCOPE Benefits

PO Box 30962

Salt Lake City, UT 84130

The screenshot shows the HealthSCOPE Benefits provider portal. At the top, there are navigation icons for Home, Messages, Contact us, Account settings, and Log out. The main content area is divided into several sections:

- Member search:** A section with a search input field and a "Go" button. Text below reads: "Find everything you need to know about a member with just one search!"
- myMenu:** A vertical list of green buttons: "Advanced claims", "Get preauthorization", "Claim submissions", and "Refund tracking".
- GO PAPERLESS!** A banner with the text "Submit your documents online" and a "Show me how" button. A note below states: "*Requires Internet Explorer 11 or higher. Support for Chrome and Safari is currently not available." A small image of a doctor is visible on the right.
- Enhanced messaging coming soon!** A section with the text: "Introducing secure, two-way delivery of messages with Message Center. Contact UMR directly and add attachments to messages to provide relevant information. Look up patient information by member ID number, get alerts, responses to messages and more all on one place." Below this, it says: "This new feature will be available to providers on Aug. 19."
- Hello Demo Provider:** A section with the text: "PROVIDER: Sample Provider", "Sample Provider", "123 Main Street", "Wausau, WI 54401", and a "TIN maintenance" button.
- Bottom navigation:** Four icons with labels: "Electronic funds transfer (EFT)", "Remittance advice preference", "Forms", and "Surprise Billing".