



ascend

TO WHOLENESS
HEALTHCARE PLANS

Ascend to Wholeness
Healthcare Plans
2021 Plan Guide

What are your Health Goals?

The Ascend to Wholeness Healthcare Plans (the Plan) are designed to empower you to achieve your personal goals of complete, whole-person health through the mind, body, and spirit. This is accomplished through robust benefits provided by the plan that are designed to assist and educate you on your current health, as well as provide a strong foundation for life-long changes to achieve a “wholistic” lifestyle.

Improving your health can have positive side effects such as improved self-confidence, greater feelings of happiness, and the potential to save you money.

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Important Updates for You to Know!

WELLNESS PLATFORM

- **Update:** Look for a new wellness platform to help support your desire to adopt and maintain healthy behaviors and live it every day.
- **Why:** To provide a tool that is easy to use, interactive, mobile-friendly and makes engaging in healthy lifestyle habits a fun and rewarding activity for members (ages 18 and over).

BEHAVIORAL HEALTH SERVICES

- **Update:** Behavioral health services provided by out-of-network practitioners will be covered at usual and customary rates. This is for outpatient behavior health counseling sessions.
- **Why:** To offer better access to behavioral health resources with fewer restrictions for members.

DEPENDENT SOCIAL SECURITY NUMBER (SSN) REQUIREMENT

- **Update:** The Plan now requires SSN for covered dependents over the age of one.
- **Why:** This is legally required, and provides proper plan administration, and Coordination of Benefits with Medicare/Medicaid.

What is Ascend to Wholeness?

The Ascend to Wholeness Healthcare Plans are focused on whole-person health and invests in you through valuable services.

Ascend to Wholeness offers two health plan options: Accelerate and Access. Both plans provide integrated wellness and care-coordination benefits. The Plan encourages your engagement in wellness activities. Ascend to Wholeness provides access to biometric screenings, wellness assessments, personalized health coaching, a wellness portal, and many educational tools.

Register for an account at AscendtoWholeness.org

to receive health plan updates and access to the Wellness Portal.



The **Accelerate Plan** offers the best benefits at the best value in exchange for your engagement and accountability with your health and wellness. See "Enrollment" for eligibility requirements. This plan encourages active participation, plus offers reimbursement opportunities for the popular lifestyle programs including CHIP and Weight Watchers.



The **Access Plan** provides market-competitive, quality benefits. Participation in the activity-based wellness program is not required and there is a higher financial commitment by members.

Choosing The Right Plan Can Help You Reach Your Health Goals

Eligibility

If you work full-time or part-time for an employer participating in the Ascend to Wholeness Healthcare Plans, you (and your spouse and dependents under the age of 26) may be eligible for health plan benefits. Talk to your employer to learn if you and your dependents qualify for coverage.

Enrollment

Every fall during open enrollment, you can explore the options available to you and your family. Remember that both you and your covered spouse (not your children) must complete the requirement of 10,000 activity points to be eligible for the Accelerate Plan for the following year. If one of you does not complete the points, both of you will only be eligible for Access plan the following year.

New qualifying employees must enroll within the first 30 days following their date of hire or wait until the next open enrollment period, unless a qualifying life event occurs.

If you are hired after April 1 (or have a life changing event and the opportunity to move to the Accelerate Plan) there is a prorated points system to follow:

Employee Joins the Plan	Activity Points for 2022 Accelerate Plan Eligibility
SEPTEMBER 1, 2020 - MARCH 31, 2021	10,000
APRIL 1 - MAY 30, 2021	5,000
JUNE 1 - JUNE 30, 2021	2,500
JULY 1 - DECEMBER 31, 2021	0

Depending on your 2021 engagement level, you have two health plan choices for the plan year starting January 1, both of which are highly competitive in the market. These plans give you full access to whole-person health and wellness programs to help you avoid preventable illnesses or injuries and manage any pre-existing medical conditions.

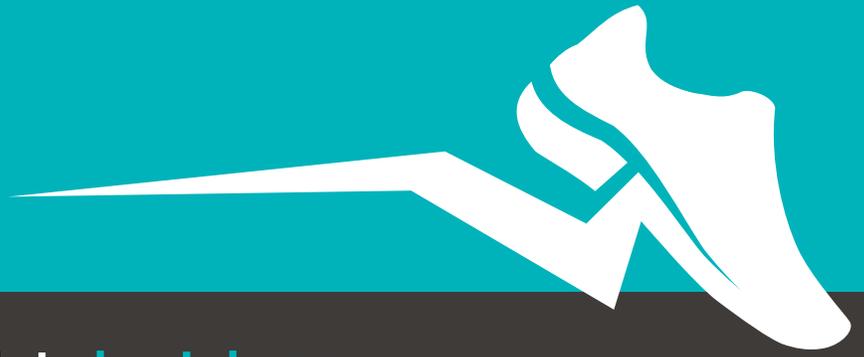
Adding or Deleting Spouse or Dependent

You may make changes during the plan year only when you experience a qualifying life event. Examples include marriage, divorce, birth or adoption of a child, or a spouse who loses or gains health coverage. For details, see the Summary Plan Document (SPD) at AscendToWholeness.org



Accelerate Plan

Eligibility Requirements



Earn 10,000 Activity Points by July 31

To be eligible for the Accelerate Plan you must earn a minimum of 10,000 activity points by choosing activities you enjoy on the wellness platform. There are options for everyone. As a Plan member, you and your covered spouse (if applicable), must each earn a minimum of 10,000 points to qualify for the Accelerate Plan for the following year. If you or your covered spouse (if applicable) does not reach the minimum of 10,000 points, your only plan option for the following year will be the Access Plan.

	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
POINT THRESHOLD	10,000	10,001 - 30,000	30,001 - 45,000	45,001 - 70,000
REWARD	Accelerate Plan Eligible for Following Year	2 Raffle Entry Tickets	4 Raffle Entry Tickets	8 Raffle Entry Tickets

You, your covered spouse, and dependents age 18 and over will be eligible to receive a FREE Max Buzz step tracker as a welcome gift after registration on the new wellness platform (if product is unavailable the Plan reserves the right to provide a substitute welcome gift).

Above is the table that shows the point levels and rewards per level.

The new wellness platform has a different point structure than in the past, as well as more opportunities for your engagement to earn points. Earning your points is simple and at your fingertips with a mobile app. Go explore the different activities you can do to earn points through [the Wellness platform](#).

Below are some of the point comparisons between the new wellness platform vs the previous wellness platform.

	New Wellness Platform	Previous Wellness Platform
5,000 Steps	50 points	2 points
30 min workout	100 points	2 points
Sleep tracker, >7 hours	50 points	0 points
Attending Week of Prayer	200 points	0 points

Activity Points are easy to get when you develop Healthy Habits

Here are a few examples of activities you can do to earn points:

- Helping your community through blood donation, mission trips, and participating in community service or Week of Prayer.
- Preventive care such as dental cleaning, annual physical exam, or vaccinations.
- Tracking your sleep, nutrition, steps, and much more!
- Reading your daily cards with healthy hints and advice, with bonus points for consistency.
- Choose activities you enjoy which meet your specific needs. There are options for everyone, and you can invite your friends and family to join you!



Sync the wellness mobile app with these qualifying applications and devices to begin logging your activity points within the **Ascend to Wholeness Wellness platform:**

- **Virgin Pulse Max Buzz**
- **S Health**
- **Fitbit**
- **Garmin Connect**
- **iHealth**
- **Apple Watch**
- **MyFitnessPal**
- **Polar**
- **Misfit Wearables**
- **Runkeeper**
- **Mi Band**
- **Striiv**
- **Health Meter Nuyu**
- **Azumio**
- **Strava**
- **Under Armour Record**
- **Withings**

Register NOW

The 1 - 2 - 3 of How to Get Started Earning Points

1 Register

Register on AscendToWholeness.org Members, covered spouses, and covered dependents* (18 and over) each need their own account with different emails. Once registered, select Login, Points, and Assessment. You will need your member ID from your healthcare ID card. See your Human Resource representative if you don't have one yet, or call member services at 888-276-4732.

*Only the member and covered spouse (if applicable) are required to earn the 10,000 activity points to be eligible for the Accelerate Plan the following plan year.

2 Create Profile

On the wellness platform, create your profile by clicking on the profile icon at the top right of the screen and enter your information. During your profile setup, you can also connect your fitness tracking device and apps if you choose.

3 Earn Points

With your connected fitness tracking device or app, start earning your activity points by engaging in wellness activities. If you choose not to connect a fitness tracking device, you can enter activities manually to earn points. You can begin earning points in September.

Protecting your **privacy** in the wellness program.

As your health plan administrator, Adventist Risk Management, Inc. (ARM) and its partners adhere to HIPAA privacy regulations. We take your privacy and confidentiality seriously. No personally identifiable health information will be shared with your employer, including the Human Resources department, managers, supervisors, or other non-health plan employees. Your employer receives only aggregated statistics, which have been stripped of identifying information.

Free Benefits From Your Plan To You

Knowing Your Numbers

Biometric screenings help you know what your numbers are related to cholesterol, blood sugar, blood pressure, height, weight, and body mass index (BMI). Knowing your biometric values help you and your physician catch potential health issues.

The Plan provides methods to find out what your numbers are. Go to the Biometric Screening page on the Ascend to Wholeness website for more information.

Health Risk Assessment

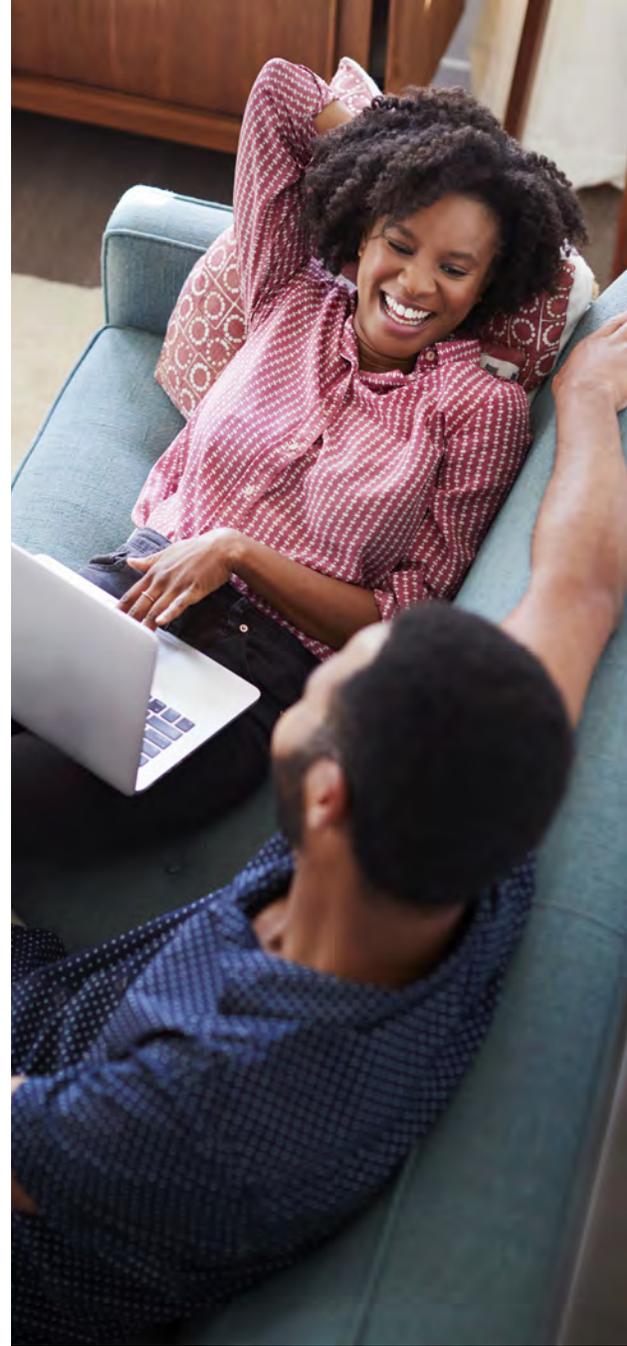
A health risk assessment, or an HRA, analyzes self-reported data about your lifestyle, behaviors and demographics to give you a better understanding of your health and risk factors for illness. This survey usually takes no longer than 15 minutes to complete but can be incredibly eye-opening for the survey-taker. HRAs can bring awareness about your health and identify opportunities for crucial preventive care. Take your HRA on the wellness platform.

Health Coaching

Health coaching is available through the wellness platform to all plan members who are over the age of 18. Health coaching is designed to support you in your personal health goals.

Care Management

Care management is a benefit to members who are experiencing a more serious health episode or have a chronic condition. A care management representative is available to assist and be an advocate on behalf of the member. For more information on this benefit please contact Member Services.



Medical Prior-Authorization Required for Out-of-Network Care

Our preferred provider network for medical (Aetna Signature Administrators PPO) is not changing. However, please note all non-emergency, out-of-network care still requires prior authorization, except for outpatient behavioral health counseling sessions. If specialized care is unavailable in network, member services will help you complete an out-of-network service request.

To get started, call 888-276-4732.

NOTE: It is your responsibility to confirm the facilities and providers you use are in-network. If you go out of network without prior authorization from the Plan, charges **will not be covered**. To search for an in-network provider, visit AscendToWholeness.org/providers.

Where to go for What?

If in Doubt go to the Emergency Room

When you're sick, it's difficult to function, much less try and decide where to see the doctor. **You have several options**—from your primary care physician to telehealth or Urgent Care clinics to the Emergency Room—but where should you go?

Let us help you make sense of all of this. It's important to note that the level of care is the main difference among your options; each has their benefits depending on your medical needs.

WHEN SHOULD YOU USE Telehealth?

- Cough / Sore throat
- Pink eye
- Cold & Flu
- Fever
- Allergies and rash
- Mild abdominal pain
- Headache and migraine
- Sinus Pain
- Ear Pain
- Urinary tract infections

WHEN SHOULD YOU GO TO Urgent Care?

- Symptom onset is gradual
- You already know the diagnosis but are unable to get to a same-day appointment with your primary care physician
- Conditions that are not life—or limb—threatening, but require immediate care
- Sprains
- Mild asthma
- Rash
- Fever
- Fevers with rash
- Broken bones of the wrist, hand, ankle or foot that have no obvious need to reset and have not broken the skin
- Moderate abdominal pain

WHEN SHOULD YOU GO TO Emergency Room?

- Broken Bones and dislocated joints
- Deep cuts that require stitches—especially on the face
- Head or eye injuries
- Severe flu or cold symptoms
- Sudden change in mental state
- High fevers
- Fevers in infants
- Fainting or loss of consciousness
- Severe pain, particularly in the abdomen or starting halfway down the back
- Bleeding that won't stop or large open wound
- Vaginal bleeding with pregnancy
- Repeated vomiting
- Serious burns
- Seizures without a previous diagnosis of epilepsy

PRIMARY CARE

Reasons for having a primary care physician:

- Having a physician who knows your medical history
- They coordinate and oversee your care
- They can ensure your medications are not hurting you
- They know you best and can identify changes in your health
- They can recommend specialists, if necessary
- Primary care appointments are cost effective

TELEHEALTH

This is a simpler way for you and your family to see a doctor any time day or night from the comfort of your home. It gives you instant access to physicians and therapists right from your phone, tablet or computer, 24/7.

Your copay for telehealth is \$0. This \$0 copay includes behavioral health/ mental health counselling visits.

The Plans telehealth platform (Amwell) is available in all 50 states and D.C. Each family member covered on the Plan (18 and older) must create their own account.

Doctors available through this service (Amwell) have an average of 15 years of experience, are board certified, licensed and credentialed, and are rated by other patients.

■ Other In-network Providers

Your in-network provider may offer this service as a substitute for an office visit. Your copay will remain \$0, however you will need to schedule an appointment. The PPO provider needs to be appropriately licensed and must have the appropriate technology to provide and bill for the covered service. To find an in-network provider go to the [Ascend to Wholeness](#) website.

■ Get Access to Amwell

1. Download the iOS or Android mobile app
OR visit <http://webtpa.amwell.com>
2. Fill in the contact information form
3. Set up your username and password
4. In the "Do you have insurance?" drop down please select WebTPA
5. Enter Service Key: **WebTPA4**
6. The Subscriber ID is your Member # that is located on your healthcare ID card

Service Key Required for Registration is: **WebTPA4**

URGENT CARE

Urgent care centers are useful options when you don't have a Primary Care Physician or when your doctor is unavailable because of short notice, it's after hours, or the weekend.

Urgent care visits can be utilized for a vast array of sicknesses, such as common cold symptoms, minor cuts/lacerations, minor sprains and strains, minor burns, insect bites, or dehydration. If you display more serious signs, it would be recommended to go to the ER.

While urgent care facilities are an excellent resource for medical issues that arise outside of regular business hours, you should still follow up with your doctor after your urgent care visit to ensure your health and wellbeing is restored.

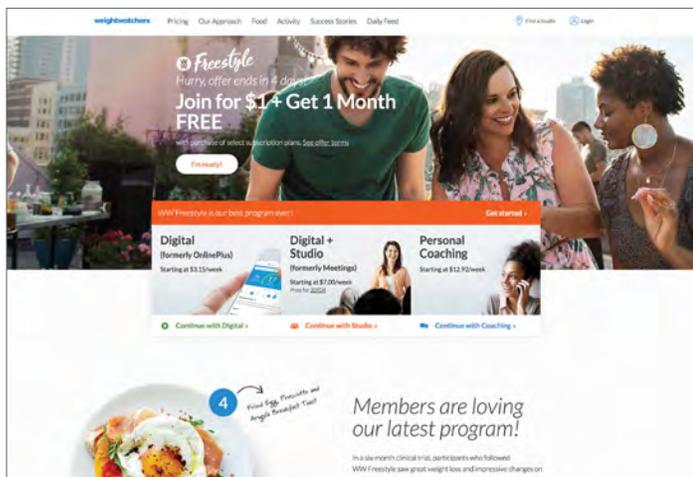
EMERGENCY ROOM

The Emergency Room (ER) should only be used for life-threatening emergencies or acute complications that need advanced imaging. It's the best place to go when you are exhibiting signs or symptoms of a heart attack, stroke, or traumatic injury.

Other situations may include the risk of a loss of limb, broken bones, major head injuries, seizures, severe abdominal pain, severe asthma attack, uncontrollable bleeding, or car accident. In these more serious situations, the ER will be able to provide the advanced care you need.

Lifestyle Programs

There are **two options available for Plan members** looking to participate in a health and wellness program:



Weight Watchers

Weight Watchers offer both online and local meeting programs. A physician's referral is required with the submission of your claim. Participants pay program costs directly to Weight Watchers and the Plan will reimburse 100 percent of the program fees with proof of attendance attached to the claim once you have completed at least 80 percent of the sessions. (This benefit excludes Weight Watchers for diabetes program).

[For Plan eligibility check the Schedule of Benefits in your SPD here.](#)

Complete Health Improvement Program (CHIP)

CHIP is a lifestyle enrichment program designed to reduce disease risk factors through the adoption of better health habits and appropriate lifestyle modifications. CHIP takes participants through an intensive educational program in 18 sessions spanning three months. This program is available for reimbursement through the Plan with a physician's referral and may be completed online. The Plan reimburses 100 percent of fees upon completion of 80 percent of the sessions with proof of attendance attached to the claim form. The program is run as an all-inclusive package and is billed to the Plan and participants as such.



Q&A

You Ask, We Answer

What is a deductible?

The specified amount of money you must pay for covered services before the plan will pay a claim.

What is a copay?

The pre-determined amount you pay for covered services each time you visit a provider or facility. Your copay does not apply toward your annual deductible but does accrue to your out-of-pocket maximum.

What is co-insurance?

The percentage you pay for care after meeting your deductible.

What is included in the medical out-of-pocket?

Your deductible, co-insurance and copays are included in the medical out-of-pocket (OOP) maximum. Both plans will accrue your copays, co-insurance, and deductible toward your OOP maximum, and you will reach your OOP quicker.

What if I am physically unable to participate in wellness activities?

There are many ways to earn points including wellness webinars, vaccinations, workshops and volunteering. We encourage you to choose the activities that work best for you. If you need accommodations for points, contact the Plan administrator at Benefits@adventistrisk.org.

What does self-funded mean and why is that important to me?

The Ascend to Wholeness Healthcare Plan is self-funded. This means your employer pays the actual cost of your healthcare expenses. Stewardship is a key element of the health plan. Controlling costs for coverage while continuing to provide valuable healthcare benefits requires accountability and participation from each of us. The Plan gives you choices and invests in your long-term health while simultaneously saving you money.

How are my activity points tracked?

Earn a minimum of 10,000 activity points on the wellness platform by recording exercise, nutrition, helping your community, vaccinations, sleep hours, viewing your daily cards, and other activities.

Tracking your points is easy when you sync wearable devices such as Max Buzz, Fitbit, Apple Watch, and Garmin, and more. Check your accrued points and learn more at AscendtoWholeness.org under **Login, Points, and Assessment**.

Can my spouse be on a different plan? May I choose the Accelerate Plan and my spouse the Access Plan?

No. All family members must be on the same plan unless you and your spouse are both employees enrolled individually under your own coverage.

Do my children need to meet the wellness requirements for the Accelerate Plan?

No. Only you and your covered spouse (if applicable) are required to complete the Accelerate Plan requirements. However, many of the activities are enjoyable for the entire family and can establish healthy habits for your children, ages 18 and over.

Can I go to any hospital or doctor I want?

Our healthcare plans only cover providers in our preferred provider organization (PPO) network. Exceptions are emergency/urgent care, specialized unavailable care, and behavioral health counseling sessions. If specialized care is unavailable at an in-network facility, member services will help you complete an out-of-network service request which, upon approval, allows coverage at an out-of-network facility.

PLEASE NOTE: It is your responsibility to confirm the facilities and providers you see are in-network. If you go out of network without prior authorization from the Plan, charges will not be covered. Find a PPO provider in your area at AscendToWholeness.org/providers.

What do I do after I have met my requirements to be eligible for the Accelerate plan in the following Open Enrollment?

If you have fulfilled the minimum points requirements, we encourage you to continue to engage on the wellness platform, keep up your good habits, and reach your health goals. Don't forget to enroll in a healthcare plan during Open Enrollment.

Additional Benefits



Pharmacy

Both health plans (Accelerate and Access) include pharmacy coverage administered by our pharmacy benefits manager Express Scripts (ESI). The Plans pay 100 percent of certain medications as preventive care. The Plan covers the majority of the cost of prescription drugs, while you are required to pay a smaller portion. For your member copay amounts please refer to the Schedule of Benefits in the Summary Plan Document (SPD) at AscendToWholeness.org. For information on certain medications that the Plan pays 100 percent please call ESI at 800-841-5396.



Dental Plan

The Dental Plan encourages regular dentist visits for preventive care covered at 100 percent under the Dental Plan. Aetna Dental is the preferred provider organization (PPO) for all dental benefit services. By utilizing providers participating in the dental PPO network, dental costs will be lower. The Plan will pay at a reduced rate for out-of-network dental services. For restorative care and orthodontia, please see the Dental Plan information in the SPD at AscendToWholeness.org.

Click [Dental Provider Search](#) under the Providers and Prescriptions tab to find a dental provider.



Vision Plan

The Vision Plan pays 80 percent of the cost of exams, lenses, frames, and contact lenses up to a maximum of \$450 for the Accelerate Plan and \$225 for the Access Plan (Affordable Care Act guidelines apply). For more information about your vision plan go to the SPD at AscendToWholeness.org



Other Benefits

No PPO network is required for: hearing aids; refractive eye surgery; infertility treatment; and chiropractic services. Acupuncture and massage therapy benefits are only offered on the Accelerate plan. Services will be covered according to your plan policy.

Health Plan Service Providers

Member Services and Claims Processing



WebTPA provides claims processing for all member health services including medical, dental, and vision. In the WebTPA member services portal, you can:

- Submit member paid claims online
- Sign up for member electronic funds transfer (EFT)
- Check your claims status
- Review your benefits
- Order an ID card

Member Login:

[Ascend to Wholeness - Claim Status Login](#)

Member Services: 888-276-4732

You can also submit member paid claims by fax or mail:

Fax: 469-417-1960

Mail: WebTPA
PO Box 99906
Grapevine, TX 76099-9706

Payor ID: #75261



The **WebTPA mobile app** enables members to access information about their plan benefits and claim information.

- View eligibility information.
- Print/order your ID card.
- View claim status and history information.
- Communicate with Member Services.



Scan the QR Code to be directed to the WebTPA website.

Preferred Provider Network – Medical and Dental

Aetna Signature Administrators® PPO

By **aetna**

The AETNA Signature Administrators® Preferred Provider Organization (PPO) network allows you to access the care you need whether at home or when traveling in the United States. When you receive services from a provider participating in the Aetna Signature Administrators® Preferred Provider Organization network, your services will be processed as in network and apply to your in-network deductible and out-of-pocket maximum responsibility. You are responsible for copays at the time of service. Typically you will pay your deductible and/or co-insurance portion after the plan has paid its portion.

Find a provider: [Medical Provider](#) or [Dental Provider](#)

Pharmacy Services



Express Scripts is your pharmacy benefit manager. See the status of your order, search medication information, and more.

Member Login:

[Ascend to Wholeness - Prescriptions Services](#)

Member Services: 800-841-5396

Care Coordination

Provides members personalized care coordination to help you navigate the complexities of acute care, pre-certification, behavioral health services, and case management. Member services will help direct you with prior authorizations for out-of-network requests and pre-certifications for medically necessary procedures and services.

Member Services: 888-276-4732



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