



## Welcome to your new health benefit plan

You're one step closer to making the most out of your new plan. It's important for you to take an active role in your health care choices to maximize your benefits and savings. Inside are all kinds of information to better understand how your plan works.

### What you'll find in your kit



**How your plan works** – This guide walks you through how your plan works after you see a provider. If you have any questions about your plan or bills, the team through your Member Advocacy Program is ready to help.



**myCigna Pharmacy Benefit Manager** – myCigna gives you all the information you need about your pharmacy coverage. You'll have access to resources such as drug price quoting tools, pharmacy searches, and much more with your myCigna account.



**How to Read Your Explanation of Benefits (EOB)** – An EOB is a summary of your health care claims during a period of time. This guide explains each section of an EOB so you know exactly what your plan covered and what you need to pay.



**Allied Member Portal** – Take advantage of the web portal. Log in from a mobile device or desktop to access your ID card, view your personal health record, view claims, and find answers to your claims questions.



**Healthcare Bluebook™** – Healthcare Bluebook is an easy-to-use tool that helps you find low-cost, high-quality providers in your area for different procedures and services.



**Teladoc®** – Through the web, telephone, or mobile app, a Teladoc doctor can diagnose and treat many common medical conditions. The service is available 24 hours a day and often more affordable than urgent care or a doctor visit. For a complete list of covered medical conditions go to [teladoc.com](https://www.teladoc.com).

**We encourage you to take advantage of all the benefits your plan offers and we look forward to fulfilling your health insurance needs.**

Your plan pays providers based on a multiple of the Medicare reimbursement rate (or derived equivalent) for each service you receive. There is no correlation between the Healthcare Bluebook Fair Price service and a provider accepting the payment made by your Core Value plan.

The National General Benefits Solutions (NGBS) Self-Funded Program provides tools for employers owning small- to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Stop-loss insurance for the NGBS Self-Funded Program is underwritten and issued by National Health Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation. NGBS-COREVALUE-EKIT-COVERLETTER-WELLNESS (09/2019) © 2019 National Health Insurance Company. All rights reserved.

## How It Works

Your plan pays providers based on a multiple of the Medicare reimbursement rate<sup>1</sup> for each service you receive. There is no network<sup>2</sup>, so you can go to any provider you want. Here's how it works:



### Seek Care

You can go to any doctor or hospital<sup>2</sup>; simply show your Medical ID card to the provider. If they have any questions, they can call the Customer Service number on the back of your card.



### Receive Your EOB

You will receive an Explanation of Benefits (EOB) showing your Patient Responsibility. This includes copays, coinsurance, charges for non-covered services, and deductible amounts.



### Review Your Bill

Your provider will send you a bill for any amounts due to them. This bill should not exceed the Patient Responsibility as shown on your EOB.



### When to Call

If your bill shows an amount that exceeds the Patient Responsibility on your EOB, call the MAP Team immediately.



### The Team Gets to Work

MAP will work with your provider to resolve any inconsistencies on your bill. Afterward, you'll receive a letter explaining the resolution.

### The Member Advocacy Program<sup>3</sup> (MAP) is here to:

- Answer questions about billing.
- Clarify your EOB.
- Find providers.
- Help you understand your benefits and how to use your plan.

**Call at 888-306-0905**

**888-306-0905**

<sup>1</sup> Or a derived equivalent of the Medicare reimbursement rate.

<sup>2</sup> Pharmacy benefits and transplants still rely on the use of network providers.

<sup>3</sup> Non-covered services and certain other charges are not eligible for the program.

# YOUR PHARMACY BENEFITS



## Five ways to get the most out of your pharmacy benefit plan

### 1. Use myCigna.com

Use the website or app for quick access to:

- › See your pharmacy claim history
- › Read your benefit details
- › See medication prices based on your plan
- › Ask a pharmacist a question
- › Manage your Cigna Home Delivery Pharmacy<sup>SM</sup> orders and request refills<sup>1</sup>

### 2. Learn what medications are covered

Save money by checking out the list of medications covered under your plan on **myCigna.com**. The amount you pay depends on whether your medication is listed as a generic, preferred brand, non-preferred brand or specialty medication.

### 3. Use the Drug Cost tool<sup>2</sup>

View medication costs based on your pharmacy plan, see if there are lower cost alternatives and compare prices between retail pharmacies and Cigna Home Delivery Pharmacy.<sup>1</sup> When discussing medicines with your doctor, use the tool on the myCigna<sup>®</sup> app.



**Questions? Call the toll-free number on the back of your ID card.**

### 4. Fill your medications in a 90-day supply

**Cigna 90 Now<sup>SM</sup> makes it easier to fill the medications you take every day.**

- › Choose where you want to fill your 90-day prescriptions – at a 90-day retail pharmacy in your plan's network, or through Cigna Home Delivery Pharmacy<sup>1</sup>
- › Make life easier by taking fewer trips to the pharmacy to refill, and help stay healthy – with a 90-day supply on hand, you're less likely to miss a dose<sup>3</sup>
- › Go to **Cigna.com/Rx90network** to learn more about the benefits of a 90-day supply and the pharmacies in your plan's network.

### 5. Get help with specialty medications

We can help you understand, manage and treat your condition. Our therapy management teams, made up of health advocates with nursing backgrounds and pharmacists, are specially trained to help deliver the best experience possible. We offer:

- › Personalized, 24/7 support
- › Condition-specific education on medication therapy and side effects
- › Help with medication approval process
- › Financial assistance programs if needed

**Together, all the way.<sup>®</sup>**



1. Plans vary, so some plans may not include Cigna Home Delivery Pharmacy or 90-day retail pharmacy. Please check your plan materials for more information on what pharmacies are covered under your plan.  
2. Prices are not guaranteed, nor is the display of a price a guarantee of coverage. Your costs and coverage may vary at the time you fill your prescription at the pharmacy, and pricing at individual pharmacies may vary. Coverage and pricing terms are subject to change. Your pharmacy may offer a special sale price on a specific medication which may be less than the price displayed here. Please consult your pharmacy.  
3. Internal Cigna analysis performed March 2016, utilizing 2015 Cigna national book of business average medication adherence (customer adherent > 80% PDC), 90-day supply vs. those who received a 30-day supply taking antidiabetics, RAS antagonist and statins.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Tel-Drug, Inc., and Tel-Drug of Pennsylvania, L.L.C. "Cigna Home Delivery Pharmacy" refers to Tel-Drug, Inc. and Tel-Drug of Pennsylvania, L.L.C. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.



# How to read your EOB

An Explanation of Benefits (EOB) is a summary of your health care claims during a period of time noted as "Dates of Service." Your EOB includes details on how claims were processed. This will help you understand what the plan pays and what you owe your provider(s). Remember your EOB is NOT a bill.

**ALLIED**  
ALLIED BENEFIT SYSTEMS, INC  
200 W Adams St Ste 500  
Chicago IL 60606-5215

20181228B04  
JC8A  
1014-4960

Page 1 of 4

JC8A [4,840] 1 of 3

## Explanation of Benefits

**RETAIN FOR TAX PURPOSES  
THIS IS NOT A BILL**



### Forwarding Service Requested



### Customer Service

For questions, please visit us at  
[www.NGBSSselffunded.com](http://www.NGBSSselffunded.com)  
or contact us at  
(888) 292-0272  
*Electronic Claim Submission*  
Please refer to the member's ID card

Enrollee Information

**Dates of Service: 09/17/2018 thru 10/24/2018**

Dear ,

The information below is a summary of the healthcare claims you incurred for the period 09/17/2018 through 10/24/2018. This information is commonly referred to as an "Explanation of Benefits" (EOB). **This is not a bill.** It is a summary, followed by the claim details, of how your recent claims were processed. It includes any co-pay, deductible, coinsurance (%) or non-covered amounts that you may owe to the provider(s) of service. Use this EOB to verify the accuracy of any bill you may receive from the provider(s) listed below. If you did not receive service from the provider(s) listed below or suspect fraudulent charges, please contact the customer service department at the number listed above.

Amount your provider(s) charged

Amount your plan paid

This doesn't include any deductibles, coinsurance, and copays paid by you.

The amount YOU owe

Includes copays, deductibles, coinsurance and other amounts not covered by the plan.

### Total Amount Billed

\$2,524.06

This is the total amount billed for the dates of service of thru .

### Total Amount Paid By Plan

\$1,639.32

This is the amount the plan paid in total for services rendered from thru . Please see the "Claim Detail" section of this document for more information.

### Your Financial Responsibility

\$433.92

This is the amount the provider(s) of service *may* bill you after your health plan benefits were paid. Typically a plan participant may be billed by the provider of service because they may have a deductible, co-pay, coinsurance (%), or the service is not covered by the health plan. Amounts shown here do not reflect any payments made at the point of service. A breakdown of your total financial responsibility is shown in the claim detail for each member.

### Amounts not covered by the plan

Claim Number	Patient Name	Total Charge	Ineligible Amount	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Patient Responsibility	Payment Amount
		\$791.86	\$0.00	\$0.00	\$791.86	\$0.00	\$0.00	\$0.00	\$791.86
		\$787.49	\$0.00	\$0.00	\$787.49	\$0.00	\$0.00	\$0.00	\$787.49
		\$294.00	\$294.00	\$0.00	\$0.00	\$0.00	\$0.00	\$294.00	\$0.00
		\$472.46	\$23.82	\$326.07	\$122.57	\$92.02	\$0.00	\$115.84	\$30.55
		\$60.00	\$0.00	\$30.58	\$29.42	\$0.00	\$0.00	\$0.00	\$29.42
123456789	Ann Member	\$118.25	\$0.00	\$94.17	\$24.08	\$24.08	\$0.00	\$24.08	\$0.00
<b>Totals</b>		\$2,524.06	\$317.82	\$450.82	\$1,755.42	\$116.10	\$0.00	\$433.92	\$1,639.32

Plan discount amounts

Amounts covered by plan

Amounts you owe

# How to read your EOB



ALLIED BENEFIT SYSTEMS, INC  
200 W Adams St Ste 500  
Chicago IL 60606-5215

20181228B04  
FCBA  
1014 4960

Page 3 of 4

JC8A [4,840] 2 of 3

## Reference Info



Amount not covered by the plan

Service and Reason Codes

You can find a description of each of the codes used in your summary in the descriptions boxes below.

Claim#: 123456789  
Patient: Ann Member

Dates of Service	Service Code	Total Charge	Ineligible Amount	Reason Code	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Balance Amount	Paid At	Payment Amount
10/24-10/24/2018	78	\$118.25	\$0.00	M+	\$94.17	\$24.08	\$24.08	\$0.00	\$0.00	100%	\$0.00
<b>Column Totals</b>		\$118.25	\$0.00		\$94.17	\$24.08	\$24.08	\$0.00	\$0.00		\$0.00
<b>Patient's Responsibility:</b>		<b>\$24.08</b>									
										<b>Other Credits or Adjustments</b>	\$0.00
										<b>Total Net Payment</b>	\$0.00

The amount YOU owe

Includes copays, deductibles, coinsurance, and other amounts not covered by the plan. Your provider should not bill you anything over this amount. If they do, call the Member Advocacy Team immediately.

Plan discount amounts

Amounts covered by plan

### Service Code Description

61 INELIGIBLE EXPENSE  
37 LABORATORY  
B2 HOSPITAL OUTPAT XRAY/LAB  
S5 HOSPITAL OUTPAT SURGERY  
66 EXCEPTION CLAIM  
78 BRAND NAME DRUGS

### Reason Code Description

FD Complete accident details needed to process.  
M+ Discount field reflects excess of plan allowable  
28 YOUR PLAN DOES NOT COVER THIS TYPE OF SERVICE.  
ST This claim was processed by Allied Benefit Systems

If you have questions about your EOB, don't hesitate to call the Member Advocacy Program team.



888-306-0905



Use your secure member account to manage your benefits and take control of your healthcare. Log in to your account to experience these features and more.

### ACCESS YOUR ID CARD

National General Benefits Solutions **ALLIED**

**Group number:**  
JOHN SAMPLE

**Subscriber ID: SMPL0001**

**Coverage:** Family

**Medical plan:**

Teladoc: Your virtual Physician 1-800-Teladoc (833-2362) or www.teladoc.com

Maximum Allowable Amounts for plan benefits is:  
150% of Medicare for inpatient  
130% of Medicare for outpatient  
100% of Medicare for dialysis

**Pharmacy benefit:** "S" Cigna

RXBIN: 017010  
RXPCN: 05190000  
RXGRP: 0721419

**Member and Pharmacist Helpline:**  
**800.325.1404**

[www.mycigna.com](http://www.mycigna.com)

### VIEW YOUR PERSONAL HEALTH RECORD



### VIEW YOUR CLAIMS

#### Claim History

**SELECT DISPLAY OPTIONS**

Select Benefit

View Claims for

Reporting Period Options

Sort Options

**APPLY**

### GET ANSWERS TO YOUR BENEFITS QUESTIONS



**GENERAL CLAIM QUESTION**

## HOW TO ACCESS PORTAL

#### NEW MEMBERS

1. Click "REGISTER" on top right corner of AlliedBenefit.com
2. Enter information in "WEBSITE ACCOUNT REQUEST"
3. Click "SUBMIT"

#### EXISTING MEMBERS

1. Click "LOGIN" on top right corner of AlliedBenefit.com
2. Enter account number and password
3. Click "LOGIN"

Stop-loss insurance for National General Benefits Solutions Self-Funded Program is underwritten and issued by National Health Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation.

**AlliedBenefit.com**



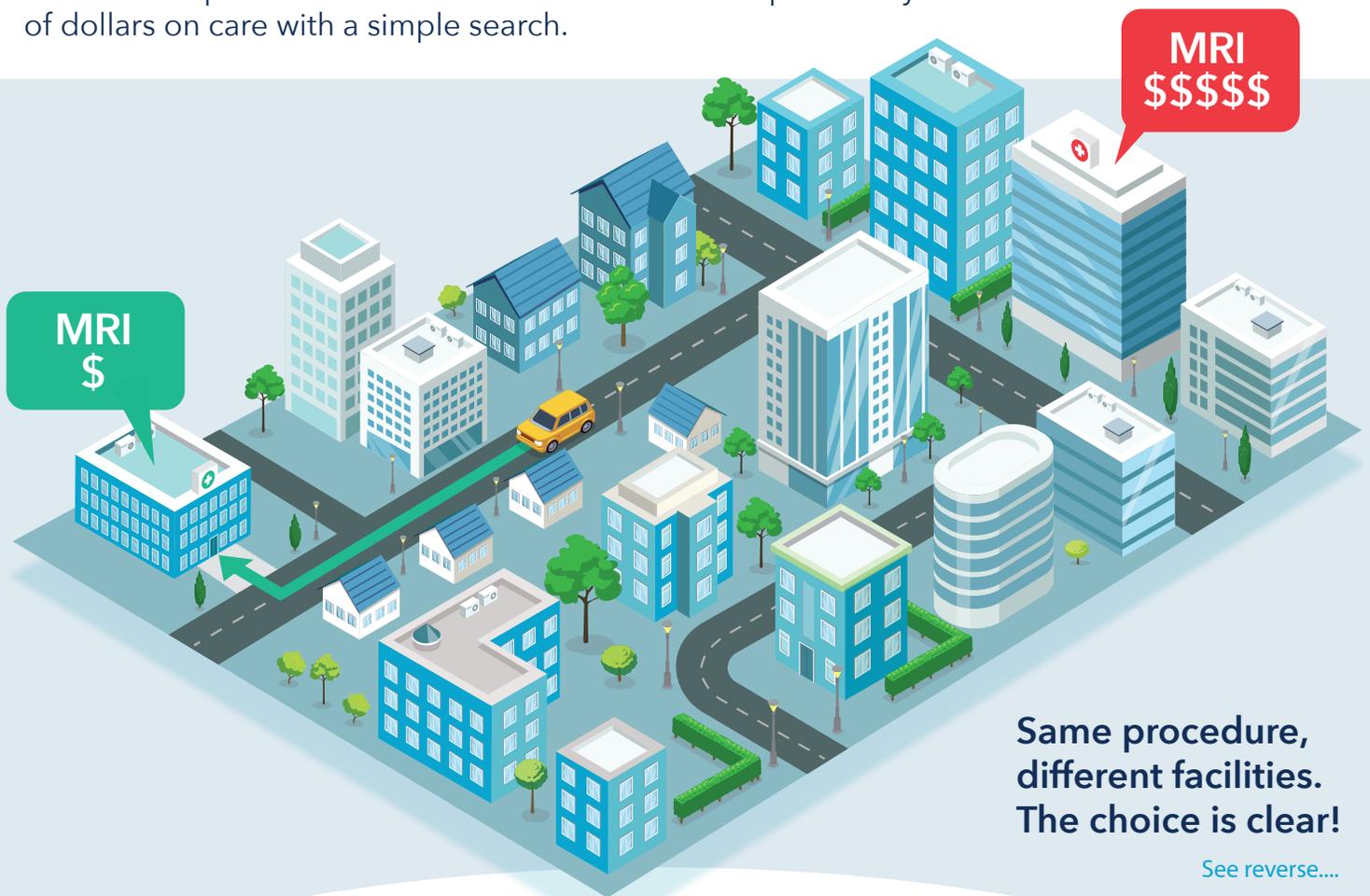
Healthcare Bluebook™



# You're probably overpaying for health care and don't even know it.

Prices for the same procedure can vary up to 500% depending on where you go. It's true!

With Healthcare Bluebook, you can search for low-cost providers for a multitude of procedures. You could save hundreds – potentially thousands – of dollars on care with a simple search.



Same procedure,  
different facilities.  
The choice is clear!

See reverse....

**National General** >>  
Benefits Solutions

Check It Out:

[healthcarebluebook.com/cc/nationalgeneral](https://healthcarebluebook.com/cc/nationalgeneral)

Member Support: 888-306-0905

Stop-loss insurance for the NGBS Self-Funded Program is underwritten and issued by National Health Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation. NGBS-HCBB-MEMBER-INSERT-IDCARDSTUFFER (Rev. 11/22/2019) © 2019 National Health Insurance Company. All rights reserved.

Download the App: App Store

Google play Company Code: NATGEN



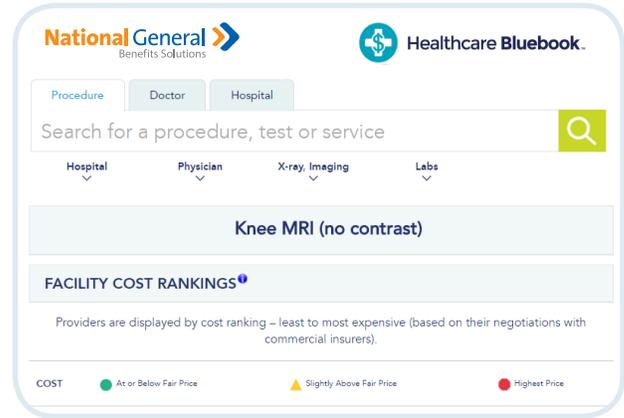
Healthcare Bluebook™

Take a minute to walk through these simple instructions, so that you have quick access to Healthcare Bluebook on all your devices. Anytime, anywhere!

# 1 IT PAYS TO BE PREPARED... GEAR UP! BE EMPOWERED!

On your PC, laptop, and tablet:  
Login to Healthcare Bluebook and bookmark the search page for quick access.

[healthcarebluebook.com/cc/nationalgeneral](http://healthcarebluebook.com/cc/nationalgeneral)



2 On your mobile phone:  
Download the app and login so you'll have Bluebook with you anytime you need to schedule a procedure.

Company Code: NATGEN



# 3 USE HEALTHCARE BLUEBOOK AND KNOW WHERE TO GO

Search for your procedure in Healthcare Bluebook, use a Fair Price™ (green) facility, and save big bucks on care.



GO HERE

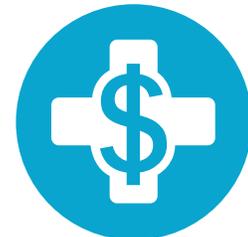
● At or Below Fair Price    ▲ Slightly Above Fair Price    ● Highest Price

- Reasonable Rates Imaging Center (~ 2 miles)
- ▲ XTRA Imaging (~ 3 miles)
- Too Much Medical Center (~ 1 mile)

NOT HERE

FOR EXAMPLE PURPOSES

## BIG SAVINGS ON CARE



This plan pays providers based on a multiple of the Medicare reimbursement rate (or derived equivalent) for each service you receive. Pharmacy benefits and transplants still rely on the use of network providers. There is no correlation between the Healthcare Bluebook Fair Price™ service and a provider accepting the payment made by the Core Value plan.



# Teladoc<sup>®</sup>

A doctor when you need it most

Teladoc gives you 24-hour access, seven days a week, to a U.S. board-certified doctor so you can get care exactly when you need it.

## Three ways to set up your account:

**Online:** Go to [Teladoc.com](https://teladoc.com) and select Set Up Account.

**Mobile App:** Download the app from your mobile store or go to [teladoc.com/mobile](https://teladoc.com/mobile). Once you download the app, tap Set Up Your Account.

**Telephone:** Call or text "Get Started" to 469-844-5637.

## Provide your medical history

Your medical history provides Teladoc doctors with the information they need to make an accurate diagnosis.

## Request a consultation

Once your account is set up, you can request a consultation whenever you need care. You can speak with a doctor over the phone, web, or mobile app wherever you are.

## Set up your account today!

Teladoc doctors can diagnose and treat many common medical conditions, including cold and flu symptoms, allergies, ear infections, sinus problems, and more.



Any day



Any time



Anywhere

The National General Benefits Solutions (NGBS) Self-Funded Program provides tools for employers owning small- to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Stop-loss insurance for the NGBS Self-Funded Program is underwritten and issued by National Health Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation.

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**National General**   
Benefits Solutions