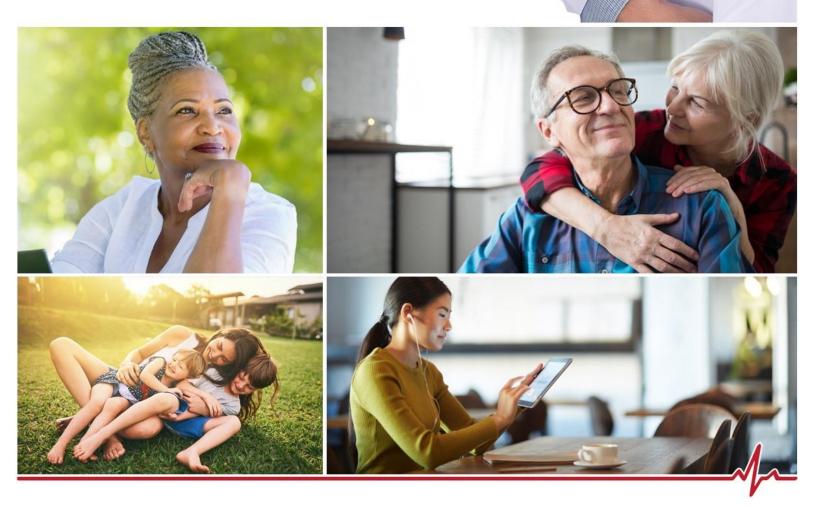


Alabama Dental Association

2022 Employee Benefit Guide



ALABAMA DENTAL ASSOCIATION 2022 SUMMARY OF BENEFITS

Effective April 1, 2022, your health insurance benefits will include a Blue Cross Blue Shield of Alabama primary plan and a MedPlus supplemental gap plan provided by Gulf Guaranty Health. MedPlus supplemental coverage is offered to enhance benefits provided by the major medical plan by lowering your deductible and reducing your out-of-pocket exposure. The combination of your Blue Cross Blue Shield of Alabama plan and our supplemental MedPlus plan results in the following overall benefits:

BCBSAL - BS 4000

MEDPLUS

Member Cost Share		
Calendar Year Deductible (CYD)	Single \$4,000 / Family \$8,000	Single \$750 / Family \$1,500
Coinsurance after Deductible	BCBSAL 80% / Member 20%	Medplus 100% / Member 0%
Out of Pocket Maximum (OPM)	Single \$6,800 / Family \$13,600	Single \$750 / Family \$1,500 *
Cost after Deductible and OPM have been met	BCBSAL covers 100%	BCBSAL covers 100%
Inpatient Services		
Inpatient Hospital	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Inpatient Hospital Physician Services	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Outpatient Services		
Emergency Room + Physician	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Outpatient Facility & Ambulatory Centers	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Outpatient Physician (surgery and anesthesia)	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Outpatient Diagnostic	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Ambulance	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Other Covered Services - PT, Chiro, DME	\$4,000 CYD then 80%	MedPlus pays up to \$6,050
Physician and Rx Copays		
Preventative/Wellness	BCBSAL covers at 100%	Covered under BCBSAL
Primary/Specialist Physician Copay	\$45 PCP / \$65 Specialist	Covered under BCBSAL
Prescription Drug Benefits: Tier 1,2,3,4	\$0 ded \$15/\$60/\$100/\$425	Covered under BCBSAL

JKA/HRK V3.2

Effective Date: April 1, 2022

* The Out of Pocket with Medplus does NOT include Doctor Copays or Pharmacy deductibles or Copays.



Only eligible charges allowed by the Primary Plan will be applied to Gap benefits. No more than 100% of charges will be paid by both plans.



Alabama Dental Association

Policy# LICG221561 Effective Date: April 01, 2022

The following benefits apply to covered employees subject to all provisions of this Policy/Certificate of Insurance.

SCHEDULE OF BENEFITS

Annual MedPlus Poli	cy Deductible	Single Family	\$750 \$1,500
Annual MedPlus Policy Benefit		Single Family	\$6,050 \$12,100
MedPlus Policy Coinsurance			100%
Primary Health Plan: BCBSAL - BS 4000 Deductible Out of Pocket Coinsurance			\$4,000 \$6,800 80%

This plan pays 100% of eligible charges¹ which are consistent with the Primary Health Plan deductible and coinsurance. The maximum benefit is limited to \$6,050 per person per calendar year for all services combined.

¹Eligible charges refer to any charges which are eligible under the Primary Health Plan. Charges which are not covered under the Primary Health Plan will not be covered by this plan. No more than 100% of eligible charges will be paid by both plans.



Sample MedPlus ID Card

<u>MedPlus</u>

JASON BARNES

Supplemental Health Plan ID: *Refer to your member ID Card* Group Number: 1561 Alabama Dental Association

Gulf Guaranty Health P.O. Box 14977 Jackson, MS 39236-4977 Customer Service: 800-890-7337



MedPlus

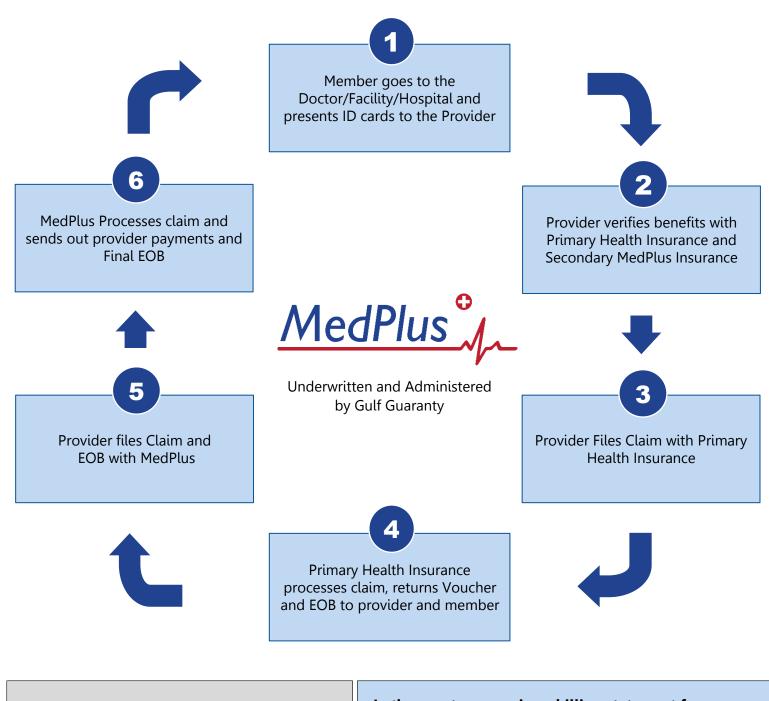
Mail Claims to:Gulf Guaranty Claims Department
P.O. Box 14977
Jackson, MS 39236-4977Fax Claims to:601-981-6805EDI Payor ID:99943Email Claims to:claims@gulfguaranty.comEligibility and Verification of Benefits: 800-890-7337

Note: Services excluded under the primary health plan are not covered.



Alabama Dental Association

MedPlus Claim Process



Definition of Terms: EOB: Explanation of Benefits Primary Insurance: Blue Cross Blue Shield of Alabama Secondary Insurance: Gulf Guaranty/MedPlus

In the event you receive a billing statement from your Provider requesting payment and you have not received an EOB from Gulf Guaranty:

- 1. Call 601-981-9505 or email all claim information to claims@gulfguaranty.com
- 2. Information can also be faxed to: 601-981-6805



Ensure Your Claims are Filed with MedPlus Correctly

- MedPlus is known by your provider as your "Secondary Insurance".
- When possible, call your provider prior to your appointment to update plan information.
- Upon arrival to Doctor/Hospital, submit both your «Primary_Plan» & MedPlus ID cards
- If you should have any issues with providers refusing to file your secondary insurance, please notify Gulf Guaranty Employee Benefits and we will contact the provider for you.

800-890-7337

SAMPLE PATIENT REGISTRATION FORM

PATIENT NAME:	
PRIMARY INSURANCE Blue Cross Blue Shield of Ala	bama
Insured's Name:	Relation to Patient:
Group Number:	Insured's Policy ID Number:
Insured's Date of Birth:	Insurance Company Phone:
Insured's Employer	Insured's Work Number:
Effective Date of Policy:	Is there a Deductible?
Co-Payment or Co-Insurance:	If yes, how much?
Maximum number of visits per year:	Dollar amount per year:
Are Exams, Physical Therapy, Modalities and Manipula	ation covered?
Is Doctor in Network?	
What is the claims' address?	
SECONDARY INSURANCE MedPlus, Gulf Guaranty, F	P.O. Box 14977, Jackson, MS 39236-4977
Insured's Name:	Relation to Patient:
Group Number: 1561	Insured's Policy ID Number:
Insured's Date of Birth:	Insurance Company Phone: 601-981-9595



Gulf Guaranty Health

P.O. Box 14977 Jackson, MS 39236 1-800-890-7337

This booklet is provided solely as a reference overview of current medical benefits and is not intended to replace comprehensive primary plan summary, group policy or individual certificates of coverage.