

THE PROACTIVE HEALTH MANAGEMENT PLAN

ENROLLMENT FAQS



866-673-2140

WHAT IS THE PHMP?

The Proactive Health Management Plan (PHMP) is a plan that encourages you to proactively assess and improve your health and lifestyle. The plan utilizes proven and patented techniques to improve an individual's health.

WHY SHOULD I ENROLL?

The PHMP is customized to assess and prevent multiple health issues using benefits that allow you to take control and manage your health. Enrollment in the plan may increase your take-home pay and participation may also reduce your medical spending. In addition, you'll receive a monthly benefit of \$625 when you utilize one of the participation benefits.

IF I'M NOT CURRENTLY ENROLLED IN MY COMPANY'S BENEFIT PLAN, CAN I STILL ENROLL IN THE PHMP?

Yes! The PHMP is available to everyone in the Company regardless of whether you are currently participating in its health plan.

HOW DO I COMPLETE THE PARTICIPATION BENEFITS?

There are several ways: You can engage once a month with a healthcare coach; visit the member portal for online coaching sessions; utilize the free 24/7 telemedicine benefit; get a biometric screening; and many more. A full listing of participation methods are detailed in the Welcome Kit you will receive after enrollment.

I'M A NEW HIRE - HOW WILL I KNOW WHEN MY PLAN GOES INTO EFFECT?

Your plan will become effective on the first day of the month that you are eligible for benefits. An enrollment specialist will reach out to you to confirm your effective date and answer any questions you may have about the plan. Your enrollment specialist will also be able to tell you how much additional income you will receive just for your participation! If you decide the plan isn't for you, you will have until the 12th day of your effective month to opt out. If you decide to opt out, you must call an enrollment specialist at 866-673-2140. If you miss the deadline of the 12th, you must cease participation for two months. At that time, you will be removed from the plan and your paycheck will return to its pre-PHMP amount. Participation includes opening emails and text messages.

HOW DO THE NON-PARTICIPATORY BENEFITS WORK?

The PHMP includes an Indemnity Benefit, which pays set amounts for each covered service. The services include: in-patient hospital stay; chest x-ray; stress test; and specific cancer screenings. Benefits are paid directly to you to offset costs.

WILL THE PREMIUM EVER BE DEDUCTED FROM MY PAYCHECK WITHOUT **RECEIVING THE CLAIM PAYMENT?**

No. We will never deduct the premium from your pay without providing the reimbursement. If you fail to participate during the month, we will reach out to you via phone, text, email, or newsletter to maintain your compliance in the program.



WHEN IS THE FIRST DEDUCTION TAKEN FROM MY PAYCHECK?

The first deduction occurs in the month the benefit becomes effective. Once your payroll department has set up your PHMP enrollment, the benefit premiums and reimbursement payments are reflected on the same paycheck.

WHAT IS AN INDEMNITY BENEFIT? (WHAT DOES INDEMNITY MEAN?)

An indemnity benefit is a set amount that is paid regardless of the cost of the procedure. Each indemnity benefit has a maximum yearly amount of usage and a maximum amount of benefit. The benefit amount can range from \$50 to \$100 per benefit unit and is paid directly to you.

GAN I GO TO ANY PROVIDER TO GET A NON-PARTICIPATORY BENEFIT COMPLETED?

Yes, you can go to any provider.

I DON'T WANT TO ENROLL, NOW WHAT?

You can choose to opt out. You may go online through the link that you were emailed.

WHAT IF I ENROLL AND THEN I CHANGE MY MIND?

If after enrollment you change your mind, contact an Enrollment Specialist at enrollment@prorisksolution.com or 866-673-2140 for instructions. You have from the date you enroll until the 12th day of the effective month to opt out. Please be advised: if you do not complete your required monthly participation activity, your plan will automatically cancel after two (2) months.

WHAT IF I DON'T PARTICIPATE IN A MONTHLY ACTIVITY?

You have a grace period. If you don't complete a participatory service for any two months within the benefit year your plan will be canceled. This doesn't have to be a consecutive two month period. However, the PHMP Participation Specialists will proactively contact you with reminders to complete your monthly service and may offer ways to complete your service over the phone.

HOW DO I ACCESS THE TELEMEDICINE BENEFITS?

After enrollment, you'll receive telemedicine ID cards and instructions. You can access telemedicine services online, on the phone, or through a smartphone app.

HOW MUCH DOES IT COST TO ACCESS A DOCTOR THROUGH TELEMEDICINE?

There is no fee to access a telemedicine doctors, no copays, and nurses are available 24/7!

WHEN DO I GET MY PHMP ID CARD?

Your ID card is mailed to you directly and is normally received within 7 to 10 business days from the end of enrollment.

• CAN MY SPOUSE OR DEPENDENT CHILDREN ENROLL?

No. This plan is only for employees. There is no spouse or dependent coverage.

