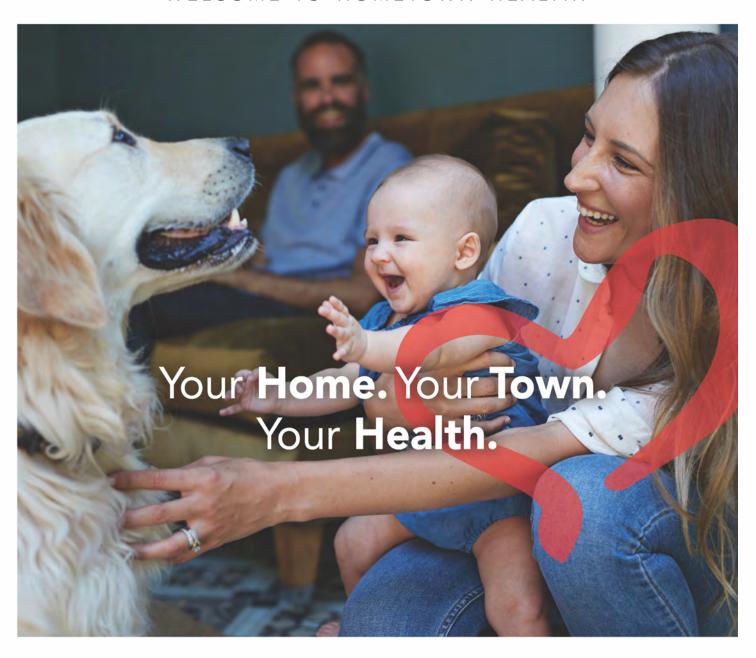
WELCOME TO HOMETOWN HEALTH.



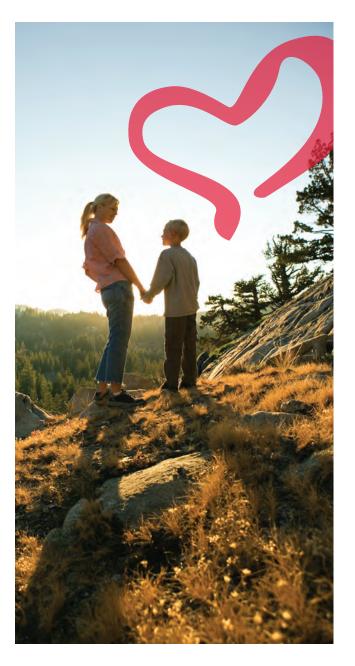




What You **Need to Know Before You Have Enrolled.**

Open Enrollment Period

The Open Enrollment Period is the yearly time period when people can enroll in a health insurance plan. The specific time frame and length may vary by company, but you will want to make your health insurance plan selection before the Open Enrollment Period closes. You cannot enroll outside of the Open Enrollment Period without a Qualifying Life Event.



Eligibility

Full-time employees in good standing are eligible to enroll. In some cases, spouses and dependents may also be eligible. Review the benefit plans offered by your employer to understand coverage guidelines.

Enrollment Process

If you are new to the company, once you have completed your eligibility period, you will receive paperwork that will allow you to make your benefit elections. Existing employees will utilize the Open Enrollment Period to make your benefit selections for the upcoming plan year.

Qualifying Life Event

In most cases, you cannot make changes to your benefits during the plan year unless you have a Qualifying Life Event. A Qualifying Life Event includes changes in marital status like a marriage or divorce. Other Qualifying Life Events include the birth or adoption of a child. If you have questions regarding Qualifying Life Events please check with your Human Resources representative.

Your Hometown Benefit

Hometown Health is your healthcare partner and we encourage you to select the benefit plan that is best for you and your family. To learn more about health insurance, visit **HometownHealth.com**.

WHAT YOU NEED TO KNOW AFTER YOU HAVE ENROLLED.



1. Sign Up for MyChart to Manage Your Benefits

Managing your healthcare benefits with MyChart is easy. MyChart is a free, secure online portal that allows you to access your health insurance benefit information. Through MyChart, members can view benefit and coverage information, review referrals, authorization and claims as well as securely message Renown care teams. Visit **HometownHealth.com/mychart** to set up your MyChart account.

2. Review the Online Provider Directory

You will want to make sure the provider you chose as your Primary Care Provider (PCP) is listed in the online provider directory on **HometownHealth.com**. If you have an HMO plan and you do not select a PCP, one will be assigned to you. The provider directory also tells you which providers are in-network for your plan. You can avoid unnecessary out-of-network provider charges by utilizing this tool.

3. Review the Preferred Drug List and Pharmacy Directory

If you take a specific medication, you should make sure it is listed on the preferred drug list or formulary. If it is not, you will want to discuss with your doctor potential alternatives that are covered by your plan. Visit the **Drug Formularies** page under the **Pharmacy** tab on **HometownHealth.com** to review the preferred drug list. You can also visit the **Pharmacy Networks** page under the **Pharmacy** tab on **HometownHealth.com** to review the online pharmacy directory for your plan to ensure you utilize in-network pharmacies and avoid out-of-network pharmacy charges.

USING YOUR BENEFITS

- Keep your membership card with you or download it for free through MyChart.
- Use in-network providers for routine care to maximize your benefits and save money.
- Emergency room visits should be limited to true emergencies. Visit an urgent care when appropriate to avoid expensive ER charges and out-of-pocket costs.

IF YOU CAN'T FIND WHAT YOU NEED ON OUR WEBSITE, OUR CUSTOMER SERVICE TEAM IS HERE FOR YOU.

Live Person Telephone – 775-982-3232 Monday – Friday | 7 a.m. to 8 p.m.

24 Hour Recorded Assistance – 800-336-0123

What it means to be a member of a **PPO Plan**

WELCOME TO HOMETOWN HEALTH! YOUR INSURANCE PLAN IS WHAT IS KNOWN AS A PREFERRED PROVIDER ORGANIZATION (PPO).

PPO plans are often more flexible when it comes to choosing a doctor or a hospital. These plans include a large network of in-network providers and there are fewer restrictions on the providers you choose. In fact, PPO members have access to Hometown Health's statewide network. Also, PPO plan members may seek services from out-of-network providers at a reduced benefit level (I.e., higher cost to the member/higher out-of-pocket cost). We advise members to receive care from contracted providers to minimize out-of-pocket costs.

Your Primary Care Provider (PCP) will coordinate your medical care including checkups, immunizations, referrals to specialists, lab work, x-ray & imaging and hospital admissions. As part of your plan, a referral from your primary care provider will not be required. You will still have access to urgent and emergent care outside of your specialized Renown network, should you need it while traveling outside of Nevada.

PPO Preferred Provider Organization

- Hometown Health Statewide Network
- Out-of-Network providers (at higher cost share/member out-of-pocket)

PLAN COVERS BOTH IN AND OUT-OF-NETWORK BENEFITS, HOWEVER IN-NETWORK BENEFITS ARE PAID AT A HIGHER LEVEL.

- You may be balance billed when using out-of-network providers
- Ability to see a provider without needing a referral from a PCP
- Larger network of providers