

COMPASS ROSE HEALTH PLAN

2022 BENEFITS SUMMARY GUIDE

compassrosebenefits.com

WELCOME

WE ARE HERE TO HELP YOU SOLVE THE COMPLEXITIES OF INSURANCE

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COMPASS ROSE HEALTH PLAN





FREE PREVENTIVE CARE*



WORLDWIDE **COVERAGE**



NO **REFERRALS**



FREE TELEHEALTH VISITS**



WELLNESS **REWARDS**

MAKING INSURANCE SIMPLER, EASIER AND MORE CONVENIENT.

Visit compassrosebenefits.com to learn more.

EXCLUSIVE MEMBERSHIP

Intelligence Community Department of Defense

Department of **Homeland Security** Department of State

^{*} Using the UnitedHealthcare Choice Plus Network.

^{**} Using Doctor On Demand or a Network Provider.

YOUR HEALTH, OUR PLAN

WE ARE COMMITTED TO SERVING OUR MEMBERS

WHO WE ARE

Compass Rose Benefits Group is a not-for-profit association that has been offering affordable insurance coverage for federal employees and their families since 1948.

We originated as the preferred plan for employees of the Central Intelligence Agency (CIA). Over the years, we have expanded our eligibility to include active and retired civilian employees of the Intelligence Community, Department of Defense, Department of Homeland Security and Department of State.

To see if you are eligible, visit

compassrosebenefits.com/Eligibility

SERVICE. STABILITY. SECURITY.

We pride ourselves on offering individual attention to each insured employee and their family. Our mission is to provide you with a health plan that best meets your personal needs.

HOW OUR PLAN WORKS

GET TO KNOW US A LITTLE BETTER

COMPASS ROSE HEALTH PLAN

The Compass Rose Health Plan offers a nationwide PPO — giving you and your family access to high-quality health care. We work with the Office of Personnel Management to bring you our Federal Employees Health Benefits (FEHB) Plan.

We strive to keep your out-of-pocket expenses low and are committed to providing you with exceptional service. We raise the bar on what you can expect from a health care company.

HELPFUL **TIP**

Using in-network providers and facilities can help you save on your health care costs.

COVERAGE

You may be subject to either a copayment or coinsurance for covered services. A coinsurance is the percentage of the plan's allowed amount that you pay. When a coinsurance applies, the plan's coverage is as follows:

In-Network Coverage: covered at 90% **Out-of-Network Coverage:** covered at 70%

Overseas Coverage: no networks, covered at the in-network level* * Members are required to pay 100% at the time of service, and submit a claim for reimbursement.

The next page lists costs for common covered services when visiting a network provider.

ANNUAL DEDUCTIBLE

PLAN TYPE	IN-NETWORK	OUT-OF-NETWORK
SELF ONLY	\$350	\$400
SELF + ONE AND SELF & FAMILY	\$700	\$800

OUT-OF-POCKET MAXIMUM

PLAN TYPE	IN-NETWORK ¹	OUT-OF-NETWORK ²
SELF ONLY	\$5,000	\$7,000
SELF + ONE AND SELF & FAMILY	\$7,000	\$9,000

BENEFITS

GET THE MOST FROM YOUR PLAN TO HELP YOU SAVE MONEY

Your cost when you use **in-network** providers for covered services:

BENEFIT	STATESIDE AND OVERSEAS
ROUTINE PREVENTIVE CARE (ADULT AND CHILDREN)	\$0
DOCTOR OFFICE VISITS - PRIMARY PHYSICIAN	\$15 copayment (No Deductible*)
DOCTOR OFFICE VISITS - SPECIALIST	\$25 copayment (No Deductible)
TELEHEALTH - PRIMARY PHYSICIAN & DOCTOR ON DEMAND	\$0
LABWORK (LABCORP & QUEST DIAGNOSTICS)	\$0
SIMPLE DIAGNOSTIC TESTING (X-RAY, ULTRASOUND)	\$0 in free-standing imaging center (No Deductible) 10% of the plan allowance outside free-standing imaging center
ADVANCED IMAGING ¹ (MRI, MRA, SPECT, CTA, PET & CT SCANS)	10% of the Plan Allowance (No Deductible in free- standing imaging center)
URGENT CARE FACILITY	\$50 copayment, waived if admitted (No Deductible)
EMERGENCY ROOM	\$200 copayment, waived if admitted (No Deductible)
INPATIENT HOSPITAL CARE ¹	\$200 copayment per hospital stay (No Deductible)
SURGICAL SERVICES ¹	10% of the Plan Allowance (No Deductible)
ROUTINE MATERNITY CARE	\$0
BASIC CHIROPRACTIC CARE	10% of the Plan Allowance (24 visits max)
ACUPUNCTURE CARE	10% of the Plan Allowance (24 visits max)
MASSAGE THERAPY	Reimbursed up to \$60 per visit (12 visits max)
OUTPATIENT THERAPY ^{1,2}	10% of the Plan Allowance (90 visits max)

¹⁾ Precertification is required.

^{*} A deductible is the annual amount you pay for medical bills before the Plan pays. It is not required for some covered services. For details, see FEHB Plan Brochure.



See 2022 FEHB Plan Brochure for complete benefits information:

compassrosebenefits.com/Brochure

²⁾ Combined 90 visits for Physical, Occupational and Speech therapy services. Prior authorization required after 12th visit.

USING YOUR BENEFITS

YOU CHOOSE YOUR OWN HEALTH CARE PROVIDERS

OUR NETWORK

The Compass Rose Health Plan is a nationwide Preferred Provider Organization (PPO). When you visit a network provider, you receive covered services at a reduced cost.

The Plan is powered by the **UnitedHealthcare (UHC) Choice Plus network** in all states. The UHC network consists of over 414,000 primary care providers, 798,000 specialists and more than 5,000 hospitals. Our health plan gives you the freedom to choose ANY doctor or hospital, in- or out-of-network, and we **never** require a referral.



Find a provider using our online Provider Directory:

compassrosebenefits.com/UHC

HELPFUL TIP

Providers may not recognize our Plan name, be sure to ask if your provider participates in the **UnitedHealthcare Choice Plus** network.

MEDICARE ADVANTAGE

DUAL COVERAGE, DOUBLE PROTECTION

MEDICARE COORDINATION

Being enrolled in Medicare Part A and Part B and the Compass Rose Health Plan can help significantly decrease your out-of-pocket health care costs. Even though enrolling in Medicare is not required, there are some definite advantages to having BOTH Medicare and the Compass Rose Health Plan.

Compass Rose waives certain deductibles, copayments and coinsurance. Plus, Compass Rose offers prescription drug copayments at a reduced rate for Medicare Part B participants. The Compass Rose Health Plan also provides coverage for some services that Medicare does not cover.

In addition, if you are a retiree enrolled in both Medicare Part A and Part B and the Compass Rose Health Plan, you are eligible for Compass Rose Medicare Advantage, a UnitedHealthcare® Group Medicare Advantage PPO Plan.

Learn more about Compass Rose Medicare Advantage:

compassrosebenefits.com/MedAdvantage

HELPFUL TIP

When you enroll in Medicare, be sure to let your Plan know so that your claims get processed correctly.

PRESCRIPTION DRUG PROGRAM

CONVENIENT OPTIONS TO FILL PRESCRIPTIONS

PHARMACY BENEFITS

Express Scripts, a leader in pharmaceutical care and services, is the Pharmacy Benefit Manager for the Compass Rose Health Plan. For more information, or to find out if your prescription is covered, please call Express Scripts at **(877) 438-4449**.



Access our list of preferred medications and exclusions:

compassrosebenefits.com/Formulary

RETAIL PHARMACY IN-NETWORK

You can fill your prescriptions at thousands of in-network retail pharmacy locations nationwide.



Locate a network pharmacy in your area:

express-scripts.com/CompassRose

HOME DELIVERY PROGRAM

Eliminate the trip to the pharmacy and consider home delivery for **maintenance drugs** — drugs that can be prescribed for a 3-month supply.

Prescriptions are delivered to your front door at no additional shipping cost, with an option for automatic refills — making it easy and convenient.

SPECIALTY PHARMACY BENEFIT

Specialty medications used to treat severe, chronic medical conditions (usually administered by injection or infusion), must be obtained through *Accredo*. Specialty medications are NOT eligible for the home delivery benefit, nor can they be filled at retail pharmacies.

If you have questions regarding Specialty medications, please contact *Accredo* at **(800) 803-2523**.

HELPFUL TIP

You can receive a 90-day supply at retail by visiting a participating CVS or Walgreens pharmacy.

HELPFUL **TIP**

With the Home Delivery & Smart90 Programs, members receive a 3-month supply of their prescription for the cost of 2 months.

PRESCRIPTION DRUG CO-PAYS

CONVENIENT OPTIONS TO FILL PRESCRIPTIONS

	GENERIC	FORMULARY BRAND NAME	NON- FORMULARY BRAND NAME
NON-MEDICARE:			
NETWORK RETAIL 30-DAY SUPPLY	\$5	\$45	\$75 or 40%, whichever is greater
SMART90 RETAIL 90-DAY SUPPLY ¹	\$10	\$90	\$150 or 40%, whichever is greater
HOME DELIVERY 90-DAY SUPPLY	\$10	\$90	\$150 or 40%, whichever is greater
MEDICARE PART B PR	RIMARY:		
NETWORK RETAIL 30-DAY SUPPLY	\$3	\$25	\$50 or 35%, whichever is greater
SMART90 RETAIL 90-DAY SUPPLY ¹	\$6	\$50	\$100 or 35%, whichever is greater
HOME DELIVERY 90-DAY SUPPLY	\$6	\$50	\$100 or 35%, whichever is greater
SPECIALTY PHARMAC	CY:		
ACCREDO 30-DAY SUPPLY	10% up to a maximum of \$100	25% up to a maximum of \$250	35% up to a maximum of \$400

¹⁾ Limited to participating CVS and Walgreens pharmacies.

^{*} No deductible applied.

LIVE HEALTHY, GET REWARDED

EARN REWARDS FOR TAKING AN ACTIVE ROLE IN YOUR HEALTH

WELLNESS REWARDS PROGRAM

We want to recognize members for making healthy choices and working towards their health goals. Adult members and their covered spouse can each earn up to **\$250** per calendar year by completing qualifying activities through our Wellness Rewards Program.

WAYS TO EARN



Complete an online clinical health risk assessment (CHRA)

50 reward points



Receive your yearly biometric screening

50 reward points



Meet health targets for blood pressure and A1C

50 reward points each



Get your annual routine preventive care check-up

50 reward points



Receive preventive care screenings: cervical cancer screening, mammogram and colorectal cancer screening

100 reward points each



Estimate your costs online using the UMR Health Cost Estimator or **Express Scripts Price a Medication tool**

50 reward points



Complete health coaching like Care Management, Tobacco Cessation and Maternity Management

100 reward points each



Complete an Action Plan in the UMR Activity Center

50 reward points



Learn more about the Wellness Rewards Program:

compassrosebenefits.com/Rewards

HEALTH TOOLS & WELLNESS PROGRAMS

GET THE MOST OUT OF YOUR COVERAGE + LIVE A HEALTHIER LIFE



COMPASS ROSE MEMBER PORTAL

The Member Portal provides secure online access to claims, Explanation of Benefits (EOBs), ID cards and more.

The Member Portal allows you to:

- Print and request Health Plan Member ID card(s)
- View Explanation of Benefits (EOBs)
- Review claims status
- Locate in-network providers
- Estimate the cost for health services
- Access health and wellness resources
- Manage prescriptions



WEIGHT LOSS PROGRAM

Need help losing weight? We offer a FREE online weight loss program through Real Appeal to motivate eligible members to make long-term healthy lifestyle changes. This program provides:

- A Transformation Coach to motivate you to reach your goals
- Online tools and trackers available 24/7
- A Success Kit with scales, recipes, workout DVDs and more



DENTAL & VISION DISCOUNT PROGRAM

We partner with Careington International

Corporation to provide members with a national Dental and Vision Discount Program at no additional cost. (This plan is not insurance and is not intended to replace health insurance.)



24/7 VIRTUAL DOCTOR'S VISITS

Skip the waiting room with **Doctor On Demand** — a service that lets you see a board-certified physician face-to-face over live video from your smartphone, tablet or computer. They can diagnose, treat and even prescribe medication if necessary. They are available 7 days a week — even when other health care options are closed — for free!



MATERNITY MANAGEMENT

A healthy pregnancy is key to having a healthy baby. Our **FREE** Maternity Management program provides access to a nurse coach who will help you learn about healthy lifestyle choices and good medical care during pregnancy. Participants also receive educational materials and their choice of one out of six pregnancy books.



ACTIVE&FIT DIRECT™

We partner with Active&Fit Direct to help members stay active with flexible fitness options starting at just \$25 a month. Members have access to thousands of fitness centers and studios, digital workout videos, one-on-one lifestyle coaching and more!

If you would like more information on any of the resources listed above, please visit

compassrosebenefits.com/Programs.

PLAN RATES

2022 HIGH-OPTION MEMBER PREMIUMS

ENROLLMENT TYPE & CODE	BIWEEKLY RATE	MONTHLY RATE
Self Only (421)	\$106.16	\$230.01
Self Plus One (423)	\$247.63	\$536.53
Self & Family (422)	\$268.34	\$581.40

ENROLLMENT

CONVENIENT + EASY

Open Season is November 8 - December 13 — don't miss your chance to enroll. To see if you are eligible, visit **compassrosebenefits.com/Eligibility**.

ACTIVE EMPLOYEES

Contact your Health Benefits Officer or Human Resources Representative within your organization/agency. You will need to complete a Health Benefits Election Form (SF 2809).

RETIREES

Contact OPM directly:

- During Open Season: (800) 332-9798
- Outside of Open Season: (888) 767-6738

Visit **opm.gov** for additional enrollment options.

QUESTIONS?

WE ARE HERE FOR YOU



(888) 438-9135 from 8:00am - 8:00pm (EST)



EMAIL:

UMR-medicalbenefits@umr.com

compassrosebenefits.com





