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Dear Members:

As I reflect on the past year since I began the role of Executive Director of The PAISBOA Health Benefit Trust (HBT), I am extremely proud of what we have accomplished in continuing to provide high-quality health care benefit plans at affordable rates to the employees of our member schools. Our membership is growing, which helps ensure the strength and financial stability of the HBT. I am thrilled that this growth has increased our ranks to 159 member schools to cover more than 11,000 employees and over 20,000 lives, including family members.

As a participating member of the HBT, you have access to a collection of comprehensive health care benefits designed to keep you and your enrolled family members healthy. The 2023-2024 Open Enrollment Benefits Guide is an invaluable resource that highlights many of these benefit offerings. Please take the time to become familiar with the programs included in your health care coverage.

Independence Blue Cross remains our partner for medical benefits, prescription drug coverage, and innovative wellness offerings. We have enhanced the Delta Dental benefits and added a new program called TruHearing. The TruHearing program offers a hearing exam at no cost with deeply discounted rates on the purchase of hearing aids.

I am pleased to share that Maven has been selected as the HBT’s vendor partner to provide expanded fertility and family-forming benefits. This offering supports our inclusive and diverse employee population with various needs including fertility, adoption, and surrogacy.

We will maintain our vendor partnerships with VBA for vision benefits and Doctor On Demand (DOD) for telemedicine services. DOD will continue to provide an effective and efficient means of care, offering 24/7 access to board-certified medical doctors, psychiatrists, and licensed therapists.

The PAISBOA Health Benefit Trust staff, our partners at Conner, Strong, & Buckelew, and the Independence Customer Service Champion Team look forward to providing support during the open enrollment process and throughout the entire 2023-2024 plan year.

Please keep an eye out in your email for our monthly newsletter which highlights many of your benefit offerings, topical information, and fun wellness challenges.

Wishing you and your families good health in the year ahead!

Be well,

Heather Gelting
Board of Trustees
2023-2024

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Salus University

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Aquinas Academy
Armenian Sisters Academy
The Baldwin School
Benchmark School
Bethany Christian School
Buckingham Friends School
 Cabrini University
Caskey Torah Academy
Cedar Grove Christian Academy
Center School
Chestnut Hill College
The Children's School at Saint John’s Church Farm School
Community Partnership School
The Concept School
Cornerstone Christian Academy
Cranaleith Spiritual Center
The Crefeld School
Cristo Rey Philadelphia High School
The Curtis Institute of Music
Delaware County Christian School
Delaware Valley Friends School
Delaware Valley University
Eastern University
The Episcopal Academy
Fleisher Art Memorial
Frankford Friends School
French International School of Philadelphia
Friends’ Central School
Friends Council on Education
Friends School of Haverford
Friends Select School
Gemma Services
Germantown Academy
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Gesu School
Gladwyne Montessori School
Goshen Friends School
Gratz College
Greene Street Friends School
Greene Towne Montessori School
Grier School
Gwynedd-Mercy Academy Elementary
Gwynedd Mercy Academy High School
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Harcum College
Harrisburg Academy
The Haverford School
The Hill School
Hill Top Preparatory School
HMS School for Children with Cerebral Palsy
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Holy Ghost Preparatory School
Hope Lutheran School
Hope Partnership for Education
Immaculata University
The Institutes
International Christian High School
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The Janus School
Kimberton Waldorf School
The Kiski School
Kohelet Yeshiva
Kosloff Torah Academy
La Salle College High School
La Salle University
Lancaster Country Day School
Lansdowne Friends School
Linden Hall School for Girls
Lititz Area Mennonite School
Logan Hope School
Malvern Preparatory School
Manheim Christian Day School
Manor College
The Meadowbrook School
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The Waldorf School of Philadelphia
Waldron Mercy Academy
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Westtown School
William Penn Charter School
Williamson College of the Trades
Windsor Christian Academy
Won Institute of Graduate Studies
Woodlynde School
The Wyndcroft School
Make one call for all your health care needs

With your Independence Blue Cross coverage, you have a Champion to support you! Your Champion is ready to help you live your healthiest life and make the best decisions based on your health plan.

We want to make sure you have the support you need along your unique health journey. You can count on your Champion for all your health care needs.

With one call, you can get:

- **Information about your benefits** from someone who is trained specifically on your health plan and ready to help you get the most out of it
- **One-on-one support** from your dedicated Registered Nurse Health Coach for your physical, mental, emotional, and even financial well-being — and personalized outreach based on your health
- **A multi-specialty care team** to help you navigate your health care journey

To reach your Champion, call 1-833-444-BLUE (2583).

Get connected to maximize your benefits

Sign up to receive text alerts from Independence Blue Cross, and you’ll get:

- Personalized reminders about your health, such as annual visits and screenings
- Notifications about important plan information
- Alerts to help you learn more about benefits you may not be taking advantage of

Visit ibx.com/getconnected to enroll.
Check out the PAISBOA Health Benefit Trust microsite!

- Find information about your medical plan, including plan features and access to the member portal
- Learn about the innovative tools and services you can access
- Discover helpful flyers on a variety of topics

ibx.com/paisboa
Log in at ibx.com to Find a Doctor

The Find a Doctor tool at ibx.com helps you make confident decisions about your health care.

Easy-to-use search
Simple navigation helps you get faster, more accurate results when looking for doctors, hospitals, or other facilities.

Doctor and hospital profiles
Informative doctor and hospital profiles and nationally recognized quality measurements help you find the doctor that is right for you. Our provider profiles offer more than just location and phone number. You can also view credentials, hospital affiliations, reviews from other members, office hours, gender, specialty, language spoken, and whether they’re accepting new patients.

Rate and review your experience
See what other members thought about a doctor or hospital, and share your own experiences. Anyone can read ratings and reviews, but you must log in at ibx.com to submit a review.

Compare doctors and facilities
Easily compare up to five doctors and hospitals at once. You can compare specialties, education, board certifications, quality reviews, and more.

Questions?
Call the PAISBOA Health Benefit Trust Customer Service Champion Team at 1-833-444-BLUE.
As a PAISBOA Health Benefit Trust member, you can earn $200 in gift cards just by completing five healthy actions!

With Achieve Well-being, you can bring healthy habits within reach. This online program offers a personalized set of well-being tools and resources to help you achieve your health goals in a way that’s simple, easy, and fun. And as a PAISBOA Health Benefit Trust member, you’ll get rewarded!

Enrolled spouses/partners of PAISBOA Health Benefit Trust members are eligible to participate in the program.

You’ll earn $200 in gift cards when you complete all the following activities:

- Visit your primary care physician for an annual check-up.
- Complete an eligible preventive health screening.*
- Complete your Well-being Profile (takes about 15 minutes).
- Sign up for and visit the Wellbeing Hub at https://hub.onthegoga.com/paisboa/sign-up OR complete an Achieve Well-being web-based program. For instructions on completing a program, use the Achieve Well-being Rewards Step-by-Step Guide, which you can find on the microsite under Member Flyers.
- Opt in for IBX Wire® to get important plan notifications, health screening reminders, and information about your rewards progress by text. To sign up, text IBX Wire to 77576.

After completing all five activities, you’ll earn $200 in gift cards. You may redeem your reward once per plan year (now through October 31, 2024).†

Log in today at ibx.com to start earning your rewards!

* You can find a list of preventive services that are part of the Achieve Well-being program when you log in at ibx.com in the Achieve Well-being section.
† IRS rules require that the gift card(s) be reported as income.
Looking for motivation to exercise?

The Healthy Lifestyles™ Fitness Program will reimburse you $150 for working out regularly.

Four easy steps

1. **Join an approved fitness center.** Choose a full-service fitness center that includes amenities for continuous cardiovascular, flexibility, and resistance training. You may also submit a reimbursement request for virtual fitness subscriptions or apps and membership costs for workouts.

2. **Exercise regularly.** Complete 120 workouts within a 12-month period, either at a fitness center or through a virtual fitness program. You may combine workouts from a fitness center with virtual programs to meet the 120 workout requirement.

3. **Record your workouts.** After you complete 120 workouts, you can request reimbursement. Your logged workouts must be at least eight hours apart.

4. **Submit your documentation and request reimbursement.** Log in at [ibx.com](http://ibx.com), go to Health & Well-being and click on Discounts & Reimbursements. Choose Fitness Program, sign in on the Reimbursement site, and upload copies of the following documentation:
   - Proof of payment
   - Record of your workouts

Once your documentation is submitted, you can request your reimbursement to be paid by direct deposit or a Visa rewards card.*

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**Program guidelines**

**Eligible members**

Participants must be 18 or older.

**Selecting an approved fitness center**

To be eligible for the fitness center reimbursement, you must choose a full-service fitness center that offers a variety of cardiovascular, flexibility, and resistance training in a supervised setting.

**Eligible fitness centers**

Eligible full-service fitness centers generally feature most of the following amenities:

- Group exercise classes (e.g., aerobics, spinning, body sculpting, kickboxing)
- Resistance training equipment (e.g., weight machines)
- Free weights
- Cardiovascular training equipment (e.g., treadmills, stationary bicycles, elliptical trainers)
- Pool for swimming laps
- Track for running/walking

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*Please note that Visa charges a $4 fee plus three percent of reimbursement amount.

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Get $150 back!

Complete 120 workouts at an approved fitness center or with a virtual fitness subscription.

Start your well-being journey today!

Log in at [ibx.com](http://ibx.com) or download the IBX mobile app.
Support from others can make weight loss feel more manageable. Enroll in WW®, WW® Online, Noom, or an approved weight management program at an in-network hospital, and the Healthy Lifestyles® Weight Management Program will reimburse you up to $150.

**How it works**

1. Sign up for an approved weight management program.
2. Attend the approved program.
3. Submit documentation and request your reimbursement.

Once all of your documentation is submitted, you can request your reimbursement to be paid by direct deposit or a Visa rewards card.* Log in at ibx.com, go to Health & Well-being and click on Discounts & Reimbursements. Choose Weight Loss Program, sign in on the Reimbursement site, and submit the following documentation:

- If attending WW in person, you will need to submit receipts and copies of your booklets.
- If participating in WW Online, you should submit screen prints to show proof of payment and progress in the program.

* If participating in Noom, you should submit screenshots to show proof of payment and participation in the program.

* If attending a hospital-based or youth program, proof of payment and participation is required.

* Please note that Visa charges a fee of $4.00 plus three percent of the reimbursement amount.

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Get $150 back!
Enroll in a weight management program

Start your well-being journey today!
Log in at ibx.com or download the IBX mobile app.
You probably know many of the reasons why you should quit smoking — it can help you breathe easier, live longer, and protect the health of those around you. Quitting isn’t easy, and many people try more than once before they succeed, but it’s worth it.

To help you quit for good, our Healthy Lifestyles™ Tobacco Cessation Program will reimburse you up to $150 for completing an approved tobacco cessation program.*

How it works

1. Sign up for an approved tobacco cessation program.
2. Complete the approved program.
3. Submit documentation and request your reimbursement.

Log in at ibx.com, go to Health & Well-being and click on Discounts & Reimbursements. Choose Tobacco Cessation Program, sign in on the Reimbursement site, and submit the following documentation:

• Proof of your participation in an approved tobacco cessation program or a certificate of completion
• All program receipts and receipts for nicotine replacement products or medications prescribed to you to help you quit

Once your documentation is submitted, you can request your reimbursement to be paid by direct deposit or a Visa rewards card.†

Program guidelines

Selecting a tobacco cessation program

No matter who you are, you can find a program that will give you the type of support and encouragement you need to kick the habit.

Eligible programs include those that focus on behavior modification and provide frequent and regular support, such as weekly meetings or telephone-based sessions.

Work with your health care provider to determine which method is best for you. You can opt for an individual approach or choose a program that offers group support. Some programs can even help you manage stress, avoid weight gain, and overcome barriers to quitting. You can also choose a program offered by an in-network hospital in your area.

Search for an in-network hospital in your area at ibx.com or call the number on the back of your member ID card for more information.

* If you’re 18 or older and your program costs less than $150, you can apply the difference toward reimbursement of nicotine replacement products or medications prescribed to you to help you quit.
† Please note that Visa charges a $4 fee plus three percent of the reimbursement amount.
Global workshops will be streamed live and recorded so you can enjoy them at your convenience. Think of it as a chance to take a recess for your mind and body!

- **Mindfulness techniques:** Explore the basics of mindfulness and learn how to apply these techniques to your daily life.
- **Work-life balance strategies:** Develop emotional intelligence skills and learn to set boundaries to help you thrive in all areas of your life.
- **Nutrition:** Learn how to prepare quick, healthy meals along with a dietitian and get answers to your nutrition questions.

**The work you do helps students reach their full potential. Now it’s your turn to learn how to live a healthier, happier, and more balanced life!**

**Achieve Well-being@Work with Independence** is a wellness program that offers opportunities to help you better manage your mental, emotional, and physical health.

**Take a recess for your mind and body**

You can access free monthly virtual global workshops and an on-demand library of interactive resources on mindfulness, stress management, nutrition, and healthy living.

Check out **hub.onthegoga.com/paisboa/sign-up** to get started today!
Nutrition counseling without leaving home

It’s easier than ever to take advantage of your nutrition counseling visits by seeing a registered dietitian through secure video via your smartphone or other device.

As an Independence Blue Cross (Independence) member, you’re covered for up to six nutrition counseling visits a year at no cost when you use an in-network registered dietitian.*

You can work with an in-network dietitian and get the same benefits of in-person counseling through secure video on your digital device.

Nutrition counseling can help you:

- Look and feel better
- Learn how to eat right
- Have more energy
- Lower cholesterol levels
- Reduce blood pressure
- Decrease risk of heart disease and stroke

Get started today!

1. Log in at ibx.com and use the Find a Doctor tool to find a registered dietitian.

2. Schedule an appointment with a participating registered dietitian, your primary care provider, or another network provider.

Questions?

Call the PAISBOA Health Benefit Trust Customer Service Champion Team at 1-833-444-BLUE.

*Check your benefits to see if you have coverage for nutrition counseling visits.

Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield – independent licensees of the Blue Cross and Blue Shield Association.
The Simpler Way  
To a Healthier You

An advanced blood glucose meter and blood pressure monitor, plus the support you need, 100% paid for by your employer.

COST-FREE PROGRAMS

ADVANCED TECHNOLOGY

ENCOURAGING COACHING

Diabetes Management

Unlimited strips & lancets
Connected blood sugar meter
Personalized insights & more

Blood Pressure Management

One-on-one coaching
Connected monitor
Real-time tips & more

GET STARTED

Text “GO HBT” to 85240 to learn more & join
You can also join by visiting get.livongo.com/HBT/register or call (800) 945-4355 and use registration code: HBT

You have access to this program at no cost through your Independence Blue Cross (Independence) health plan.

Solamente el programa Livongo para Diabetes está disponible en Español
Al inscribirse, podrá configurar el idioma que prefiera para las comunicaciones provenientes del medidor y del programa. Para inscribirse en español, llame al (800) 945-4355 o visite bienvenido.livongo.com/HBT

Once you enroll in Livongo Diabetes, you are entitled to automatically participate for a minimum of four (4) months. During your participation in the program, you will receive an Explanation of Benefits (EOB) even if you do not access services.

Indepenence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield —independent licensees of the Blue Cross and Blue Shield Association.

Program includes trends and support on your secure Livongo account and mobile app but does not include a tablet or phone.

PM09357.A PM08370.A PM02279.A
Acupuncture: What does my health insurance cover?

Find out when and how acupuncture is covered by your health plan

What is acupuncture?
Acupuncture is a health practice that involves using needles placed under the skin to stimulate points in the body and ease symptoms. Studies suggest that acupuncture may help ease chronic pain and certain other conditions and is a reasonable option for people with chronic pain to consider.1

How does Independence cover acupuncture?
Subject to your benefits, Independence Blue Cross (Independence) members are covered for 18 acupuncture visits for pain management and certain other conditions:2

- Headache (migraine, tension)
- Post-operative and chemotherapy-induced nausea, vomiting
- Nausea from pregnancy
- Low back pain
- Pain from osteoarthritis of knee/hip
- Chronic neck pain

Acupuncture for these conditions is available without precertification, and coverage is based on plan type:

- PPO members will pay specialist cost-sharing.
- HMO, POS, and DPOS members will need a referral from their PCP and will pay their specialist cost-sharing.

To learn more about your acupuncture benefits, call the PAISBOA Health Benefit Trust Customer Service Champion Team at 1-833-444-BLUE.

Is acupuncture right for me?
To determine whether you could benefit from acupuncture:

- **Talk with your doctor.** Acupuncture should only be used to complement your doctor’s care, not replace it. Your doctor can help you decide if acupuncture is right for your symptoms.
- **Check covered conditions.** Review Medical Policy #12.00.01 at ibx.com/medpolicy to determine the conditions for which acupuncture is considered medically necessary.
- **Find the right practitioner.** Ask your doctor for a recommendation, or visit ibx.com/findadoctor. Use as much care as you would in choosing a traditional health care professional.

2 For PPO members, the 18 acupuncture visits are combined in- and out-of-network.

Acupuncture is covered for limited conditions. For details on covered conditions, please reference medical policy #12.00.01, which you can find at ibx.com/medpolicy. This plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

1-877-764-6605 (TTY: 1-800-770-5533)

Spanish: **ATENCION:** Si habla español, cuenta con servicios de asistencia en idiomas disponibles de forma gratuita para usted. Llame al 1-800-275-2583 (TTY: 711).

Chinese: 注意：如果您讲中文，您可以得到免费的语言协助服务。请致电1-800-275-2583。
Hearing well is essential to your overall health and well-being. If you think you may be experiencing hearing loss, you don’t have to wait to get quality care.

As an Independence Blue Cross (Independence) member, you have access to TruHearing for an easy and affordable way to help you hear better. With TruHearing, you and your family members are covered for exams and discounts on hearing aids and hardware.

**TruHearing features**

**Excellent service**
TruHearing consultants will help you schedule an exam, fitting, and follow-up care with a licensed provider near you.

**Improved quality of life**
You have access to smartphone apps to adjust your hearing aids and stream your favorite music and shows with Bluetooth®.

**State-of-the-art technology**
Experience clarity in a crowded room with the newest technology that lifts voices from background noise and redefines your ability to have conversations. Rechargeable batteries that last all day are also available.

**Call TruHearing today**
Your dedicated Hearing Consultant can answer your questions, explain your coverage, and schedule an appointment with a TruHearing provider near you.

Call 1-888-933-7861 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m.

**Get complete hearing care**
- Access to a large provider network
- Risk-free 60-day trial period
- One year of follow-up visits
- 80 free batteries per non-rechargeable hearing aid
- Full three-year manufacturer warranty
When it comes to good health, there are no geographic boundaries. That’s why we offer out-of-area coverage.

**Get urgent care while you travel**

- If you need urgent care when traveling across the U.S., give us a call, and we’ll put you in touch with a Blue Cross® Blue Shield® provider (BlueCard® provider) in your travel area, so you can have access to care wherever you are.
- Traveling abroad? You also have access to doctors and hospitals in more than 200 countries and territories around the world through Blue Cross Blue Shield Global® Core.

**Get the follow-up care you need**

While you are out of your home area, you’re also covered for any follow-up visits your doctor recommends with a BlueCard provider. Give us a call to find a provider near you.

**Apply for guest membership when you’re away long-term**

- When you know that you or a member of your family will be out of the area for at least 90 days, we’ll help you apply for a guest membership with a participating HMO plan in your travel area, where available.
- A guest membership through the Away from Home Care® program offers a comprehensive set of HMO benefits through a participating plan while away from home.
- Guest memberships may be appropriate for situations like:
  - A long-term work assignment
  - Retirees with a dual residence
  - Students who are temporarily living away while at college

Refer to your member benefit booklet for additional information, limitations, and restrictions regarding the Away from Home Care® program.

Questions?
Call the PAISBOA Health Benefit Trust Customer Service Champion Team at 1-833-444-BLUE.

*Preauthorization of care is required.

Benefits underwritten or administered by Keystone Health Plan East; Self-Referred benefits underwritten or administered by QCC Insurance Company, subsidiaries of Independence Blue Cross — independent licensees of the Blue Cross and Blue Shield Association.
Use the website to:

- Search for drugs covered under your plan – plus view drug descriptions, food interactions, and warning label information
- Use the drug pricing tool to identify lower-cost alternatives
- View drug price details with a new price and save feature
- Access current prescription drug claims and historical prescription drug records
- Submit mail order prescription requests 24/7
- Search for a participating pharmacy near you

Use the IBX app to:

- Access benefit information
- View, share, or order a new ID card
- Find a doctor or hospital, and change your primary care physician
- Estimate your out-of-pocket costs for medical procedures
- See your most recent claims and any open referrals
- Find or price a prescription drug
- Track deductibles and out of pocket expenses
- Reach your health goals with Achieve Well-being tools
- See important notifications and health messages

Access your prescription drug benefits through your member account at ibx.com/paisboa
Keep smiling
Delta Dental PPO™

Save with PPO
Visit a dentist in the PPO¹ network to maximize your savings.² These dentists have agreed to reduced fees, and you won’t get charged more than your expected share of the bill.³ Find a PPO dentist at deltadentalins.com.

Set up an online account
Get information about your plan, check benefits and eligibility information, find a network dentist and more. Sign up for an online account at deltadentalins.com.

Check in without an ID card
You don’t need a Delta Dental ID card when you visit the dentist. Just provide your name, birth date and enrollee ID or Social Security number. If your family members are covered under your plan, they’ll need your information. Prefer to have an ID card? Simply log in to your account to view or print your card.

Coordinate dual coverage
If you’re covered under two plans, ask your dental office to include information about both plans with your claim — we’ll handle the rest.

Understand transition of care
Generally, multi-stage procedures are covered under your current plan only if treatment began after your plan’s effective date of coverage.⁴ Log in to your online account to find this date.

Get LASIK and hearing aid discounts
With access to QualSight and Amplifon Hearing Health Care⁵, you can receive significant savings on LASIK procedures and hearing aids. To take advantage of these discounts, call QualSight at 855-248-2020 and Amplifon at 888-779-1429.

Save with a PPO dentist

¹ In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan.
² You can still visit any licensed dentist, but your out-of-pocket costs may be higher if you choose a non-PPO dentist. Network dentists are paid contracted fees.
³ You are responsible for any applicable deductibles, coinsurance, amounts over annual or lifetime maximums and charges for non-covered services. Out-of-network dentists may bill the difference between their usual fee and Delta Dental’s maximum contract allowance.
⁴ Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier is responsible for any costs. Group- and state-specific exceptions may apply. If you are currently undergoing active orthodontic treatment, you may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.
⁵ Vision corrective services and Amplifon’s hearing health care services are not insured benefits. Delta Dental makes the vision corrective services program and hearing health care services program available to you to provide access to the preferred pricing for LASIK surgery and for hearing aids and other hearing health services.

Delta Dental is a registered trademark of Delta Dental Plans Association.
West Virginia: Learn about our commitment to providing access to a quality dentist network at deltadentalins.com/about/legal/index-enrollee.html.

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HL_PPO #33954 (rev. 6/23)
Effective: 11/1/23 – 10/31/26
$25 Exam / $0 Materials Copay
Dependent Age: 26 (EOBY)

### Frequency Type:
**Last Date of Service**

<table>
<thead>
<tr>
<th>Type</th>
<th>Employee</th>
<th>Spouse</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision Exam</td>
<td>12 Months</td>
<td>12 Months</td>
<td>12 Months</td>
</tr>
<tr>
<td>Lenses</td>
<td>12 Months</td>
<td>12 Months</td>
<td>12 Months</td>
</tr>
<tr>
<td>Frames</td>
<td>24 Months</td>
<td>24 Months</td>
<td>24 Months</td>
</tr>
</tbody>
</table>

### Benefits:
**Employee Can Select Either**

<table>
<thead>
<tr>
<th>Type</th>
<th>Employee</th>
<th>Spouse</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision Exam (Glasses or Contacts)</td>
<td>Covered in Full</td>
<td>Copay not to exceed $39</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Retinal Screening with Exam (as of 10/13/22)</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Clear Standard Lenses (Pair):</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Single Vision</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Bifocal</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Blended Bifocal</td>
<td>Covered in Full</td>
<td>Partially-Covered</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Trifocal</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Progressives</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Lenticular</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Polycarbonate</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Basic Scratch Coating</td>
<td>Covered in Full</td>
<td>Partially-Covered</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Photochromic</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Solid or Gradient Tint</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Frame (Wholesale Allowance)</td>
<td>Up to $40</td>
<td>Up to $100&lt;sup&gt;A&lt;/sup&gt;</td>
<td>Up to $40</td>
</tr>
<tr>
<td>-OR- Elective Contacts (in lieu of eyeglass benefits)</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Material Allowance</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>Elective Fitting Fee and Evaluation</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>-OR- Medically Necessary Contacts</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
</tr>
<tr>
<td>Low Vision Aids (Per 24 Months. No Lifetime Max)</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
<td>Covered in Full&lt;sup&gt;B&lt;/sup&gt;</td>
</tr>
<tr>
<td>-AND- Lasik Surgery (once every 8 years)</td>
<td>N/A</td>
<td>N/A</td>
<td>$250</td>
</tr>
</tbody>
</table>

Where an “allowance” is shown above, the Member is responsible for paying any charges in excess of the allowance less any applicable copay.

Benefits and participation may vary by location, including, but not limited to, Costco® Optical, Pearle Vision, LensCrafters®, Target Optical® and Boscov’s® Optical.

A The allowance is applied to all services/materials associated with contact lenses, including, but not limited to, contact fitting, dispensing, cost of the lenses, etc. No guarantee the allowance will cover the entire cost of services and materials.

B Requires prior approval. May only be selected in lieu of all other material benefits listed herein.

* A $25 copayment is applied to the vision exam and a $0 copayment is applied to the total cost of the lenses and/or frames ordered from a VBA Member Doctor only. Copayments do not apply to the contact materials.

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Built around you and with you in mind.

Doctor On Demand® isn’t your normal doctor’s office. Our board-certified providers are here to serve you—when it works for you.

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- Sinus Infections
- Cold, Flu, & COVID-19
- Prescriptions & Refills
- Skin Conditions & Rashes
- Ear Infections
- Headaches & Migraines
- Nausea & Vomiting

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Caring for your mental health can feel overwhelming, especially the first time you recognize the need for support. That's why we're making it easier than ever to get expert care from licensed therapists and psychiatrists.

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Some examples of how our providers and therapists can help:

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- Depression
- Stress & burnout
- Isolation
- Grief & loss
- Relationship issues
- PTSD
- Postpartum depression

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Doctor On Demand video visits cost far less than a trip to the emergency room or urgent care. The cost of your visit is provided up front, so you won't have any surprises after your visit. There are no setup or monthly fees.

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Get Started

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1. Download the app
2. Sign up and create an account
3. Add your coverage

Enter PAISBOA as your employer

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Fertility & family building just got easier

with financial assistance and virtual support

PAISBOA Health Benefit Trust enrolled members get access to $10,000 on eligible expenses for eggs/sperm freezing, IVF, adoption, and surrogacy through Maven Wallet.

WITH MAVEN, YOU GET ACCESS TO:

- Financial support with Maven Wallet to help manage family-building expenses and pay for treatments.
- Video chat and message with providers and coaches across 35+ specialties.
- A personal Care Advocate who serves as a trusted guide through every step of your journey.
- Provider-led virtual classes and vetted articles—tailored to your journey.

Personalized support for every path to parenthood

**Preconception**
Whether you’re considering starting a family or actively trying, get the support you need

**Egg Freezing**
Learn about your options and speak to experts to plan your tailored reproductive journey

**Fertility & Partner Fertility**
Get fertility clinical referrals, treatment guidance, and emotional support for both parties

**Adoption & Surrogacy**
Get agency referrals, guidance, and emotional support for families pursuing adoption or surrogacy

NEW BENEFIT effective 11/1/23
Help, when you need it most

With your Employee Assistance Program and Work/Life Balance services, confidential assistance is as close as your phone or computer.

**EMPLOYEE ASSISTANCE PROGRAM (EAP)**

Your EAP is designed to help you lead a happier and more productive life at home and at work. Call for confidential access to a Licensed Professional Counselor* who can help you.

A Licensed Professional Counselor can help you with:

- Stress, depression, anxiety
- Relationship issues, divorce
- Anger, grief and loss
- Job stress, work conflicts
- Family and parenting problems
- And more

**WORK/LIFE BALANCE**

You can also reach out to a specialist for help with balancing work and life issues. Just call and one of our Work/Life Specialists can answer your questions and help you find resources in your community.

Ask our Work/Life Specialists about:

- Child care
- Elder care
- Financial services, debt management, credit report issues
- Identity theft
- Legal questions
- Even reducing your medical/dental bills!
- And more

**Who is covered?**

Unum’s EAP services are available to all eligible partners and employees, their spouses or domestic partners, dependent children, parents and parents-in-law.

**Always by your side**

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver™ — helps you save on medical bills

**Help is easy to access:**

**Phone support:** 1-800-854-1446
**Online support:** unum.com/lifebalance

**In-person:** You can get up to three visits, available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support.

* The counselors must abide by federal regulations regarding duty to warn of harm to self or others. In these instances, the consultant may be mandated to report a situation to the appropriate authority. Unum’s Employee Assistance Program and Work/Life Balance services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

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VISIT
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NEED HELP? EMAIL US: CUSTOMERSERVICE@WORKINGADVANTAGE.COM
The PAISBOA Health Benefit Trust is utilizing the PlanSource platform for Open Enrollment this year. Below is a link to access the platform along with instructions for logging in.

**LOGGING IN TO PLANSOURCE**

Before you can begin Open Enrollment through PlanSource, you must first log in with your username and password.

1. Type or paste this link into your web browser’s search bar:  
   **https://benefits.plansource.com/**

2. On the login page, type your username and password.

---

**USERNAME**

Your username consists of:

- First initial of your first name
- First six characters of your last name
- Last four (4) digits of your SSN

**Example:** John Employee, whose SSN is 000-00-1234, would have a login of JEMPLOY1234.

**Note:** If your username combination is already in use, PlanSource will add “_2” to ensure everyone’s username is unique. Your HR admin will be able to confirm if this applies to your username.

---

**PASSWORD**

Your initial password is your birthdate in the format **YYYYMMDD**.

You will be prompted to create a new password which will be used throughout this plan year.

**Example:** A birthdate of February 7, 1975 would look like **19750207**.

**Note:** Every year during Open Enrollment your password will reset back to your birthdate in the **YYYYMMDD** format.
After successfully logging in, you will be taken to the Open Enrollment Dashboard (see right). From here, you will simply need to click “Get Started” to begin the enrollment process.

Please check your demographic information for accuracy and make any edits that are needed.

You will be given the option to add or delete a family member’s demographic information on your profile by clicking “Add Family Member” and then entering their information.
Once you complete your demographics, you must confirm your benefits by clicking “View or Change Plan.”

You can add family members to your plan by first clicking “View or Change Plan” and then clicking on “Add Family Member.”

If you are newly enrolling in an HMO or POS plan option, you will have to confirm your PCP ID # by clicking the “Select a Primary Care Provider” link and inserting the 9 digit PCP code.

You can also decline options by clicking the “Decline” link under “Update Cart.”
Once you are done electing your benefits, click “Review and Checkout” in the lower right.

For assistance call the PAISBOA Health Benefit Trust Helpline at 888-984-1186.

Finally, click “Checkout” in the lower right to confirm your benefits, and your election will process. You will see confirmation of your elections.
<table>
<thead>
<tr>
<th></th>
<th>CUSTOMER SUPPORT LINE</th>
<th>MEMBER PORTAL / EMAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAISBOA HEALTH Benefit Trust Member Support</td>
<td>888-984-1186</td>
<td>hbt support@ connerstrong.com</td>
</tr>
<tr>
<td>INDEPENDENCE BLUE Cross Medical And RX</td>
<td>833-444-BLUE (2583)</td>
<td><a href="http://www">www</a>. ibx.com/paisboa (microsite) <a href="http://www">www</a>. ibx.com (portal)</td>
</tr>
<tr>
<td>DOCTOR ON DEMAND</td>
<td>800-997-6196</td>
<td><a href="http://www">www</a>. doctor on demand.com</td>
</tr>
<tr>
<td>DELTA DENTAL</td>
<td>800-932-0783</td>
<td><a href="http://www">www</a>. deltadental ins.com</td>
</tr>
<tr>
<td>VBA</td>
<td>800-432-4966</td>
<td><a href="http://www">www</a>. vbaplans.com</td>
</tr>
<tr>
<td>MAVEN</td>
<td></td>
<td>support @ maven clinic.com</td>
</tr>
<tr>
<td>UNUM</td>
<td>800-275-8686</td>
<td><a href="http://www">www</a>. unum.com</td>
</tr>
<tr>
<td>PLAN SOURCE</td>
<td></td>
<td>benefits. plansource.com</td>
</tr>
</tbody>
</table>
HIPAA INFORMATION NOTICE OF PRIVACY PRACTICES

In compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), your employer recognizes your right to privacy in matters related to the disclosure of health-related information. The Notice of Privacy Practices (provided to you upon your enrollment in the Health plan) details the steps your employer has taken to assure your privacy is protected. The Notice also explains your rights under HIPAA. A copy of this Notice is available to you at any time, free of charge, by request through your Human Resources Department.

SPECIAL ENROLLMENT RIGHTS

If you have previously declined enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may in the future be eligible to enroll yourself or your dependents in this plan, provided that you request enrollment within 30 days after your other coverage ends. In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement of adoption, you may be able to enroll yourself and your dependents, provided that you request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

MEDICAID & THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan. If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.asksbola.gov or call 1-866-444-EBSA (3272).


MICHELLE’S LAW

Michelle’s Law permits seriously ill or injured college students to continue coverage under a group health plan when they must leave school on a full-time basis due to their injury or illness and would otherwise lose coverage. The continuation of coverage applies to a dependent child’s leave of absence from (or other change in enrollment) a postsecondary educational institution (college or university) because of a serious illness or injury, while covered under a health plan. This would otherwise cause the child to lose dependent status under the terms of the plan. Coverage will be continued if written certification from a treating physician is received:

• One year from the start of the medically necessary leave of absence, or
• The date on which the coverage would otherwise terminate under the terms of the health plan; whichever is earlier.

WOMEN’S HEALTH AND CANCER RIGHTS ACT

The Women’s Health and Cancer Rights Act requires that all medical plans cover breast reconstruction following a mastectomy. Under this law, if an individual who has had a mastectomy elects to have breast reconstruction, the medical plan must provide the following coverage as determined in consultation with the attending physician and the patient:

• Reconstruction of the breast on which the mastectomy has been performed;
• Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
• Prostheses and physical complications at all stages of the mastectomy, including lymphedemas

Benefits received for the above coverage will be subject to any deductibles and coinsurance amounts required under the medical plan for similar services. The Act prohibits any group health plan from denying a participant or a eligible beneficiary to enroll or renew coverage under the plan in order to avoid the requirements of the Act.

GENETIC INFORMATION NON-DISCRIMINATION ACT (GINA)

GINA broadly prohibits covered employers from discriminating against an employee, individual, or member because of the employee’s “genetic information,” which is broadly defined in GINA to mean (1) genetic tests of the individual, (2) genetic tests of family members of the individual, and (3) the manifestation of a disease or disorder in family members of such individual. GINA also prohibits employers from requesting, requiring, or purchasing an employee’s genetic information. This prohibition does not extend to information that is requested or required to comply with the certification requirements of family and medical leave laws, or to information inadvertently obtained through lawful inquiries under, for example, the Americans with Disabilities Act, provided the employer does not use the information in any discriminatory manner. In the event a covered employer lawfully (or inadvertently) acquires genetic information, the information must be kept in a separate file and treated as a confidential medical record, and may be disclosed to third parties only in very limited circumstances.

NEWBORN’S ACT

Group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother’s or newborn’s attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours, as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 (or 96) hours.