

ELITE NAMASTA PROGRAM FOR MIND-BODY PROFESSIONALS

TOTAL EXPENSE :

MEMBER ONLY: \$87.82 MEMBER AND FAMILY: \$169.54

Coverages Underwritten by Monumental Life Insurance Company

Annual Maximum Medical Benefit Maximum per person	\$100,000
Inpatient Room & Board	\$500 daily benefit 30-day annual maximum
Additional Intensive Care	\$400 daily benefit 30-day annual maximum
Mental Conditions & Substance Abuse	\$200 daily benefit 10-day annual maximum
Surgical Benefit	\$2,000 maximum per procedure
Anesthesia	20% of surgical indemnity benefit
Outpatient Office Visits	\$75 per visit 5-visit annual maximum
Supplemental Accident Benefit Maximum benefit per accident	\$600 maximum benefit
Vision Benefits Vision exam* Single lenses** Contact lenses** Bi-focal lenses** Frames** <small>*once every 12 mo./**once every 24 mo.</small>	 \$25 \$35 \$35 \$60 \$20
Medical Premium Member Only Member & Family	 \$76.32 \$154.84

Services Provided by Fiserv Health

PPO Network	PHCS, the largest proprietary provider network in the U.S. with more than 450,000 providers and 4,000 facilities
Choice of ANY Medical Provider	Yes
Medical Provider	You have the freedom to choose your preferred medical providers. You can simply go to the provider that best fits your medical needs. If you choose a PHCS provider you will save money.
Prescription Benefit	Innoviant makes it convenient and affordable to obtain prescriptions. Because this is a discount program, you'll have no claims to file. Simply show your ID card with the Innoviant logo and you will receive a discount of up to 50% off the retail price on generic and name-brand drugs. The Innoviant Network has 56,000 pharmacies across the U.S., including CVS, Osco, Walgreens and Costco.
Association, PPO Access Fees & Other Services Member only Member and Family	 \$11.50 \$14.70

Elite Health: NAMASTA's Medical Plan for Wellness and Mind-Body Professionals

Are you a mind-body professional looking for health coverage? Do you need a health plan designed for wellness practitioners? NAMASTA is pleased to offer a specified benefit plan combining healthcare, vision, and prescription coverages.



Elite Health Program Frequently Asked Questions:

1. How do I qualify for Elite Health?
2. Who is an eligible dependent? Are my children and/or spouse covered under the Elite Health plans?
3. How can I get information on continuing my medical benefits if I am no longer a member of NAMASTA?
4. How do I use Elite Health if I already have a major medical plan?
5. When does coverage become effective?
6. Whom can I contact if I have questions about my benefits?
7. Are pre-existing conditions covered?
8. What are the exclusions?
9. How do I show my medical provider proof of insurance?
10. When I visit the doctor, do I have to pay deductibles or co-pays?
11. What if my provider won't submit insurance information?
12. How do I add dependents on to my plan?
13. How long do I have to add dependents?
14. What happens if I enroll late in the month?
15. How do I pay premiums?
16. If I want to use my coverage and have not yet received my insurance card, what information do I need to provide to my health care provider?
17. If I lose my Elite Health ID card, how do I request a new one?
18. Whom do I contact if I have a change in my name or address or if there is an error on my Elite Health ID card?
19. Who is PHCS?
20. Does Elite Health grant me access to a Preferred Provider Network?
21. Can I visit my current healthcare provider using my Elite Health ID card?
22. Where do I get claim forms?
23. How do I submit a claim?
24. Can I use the web to look up claim status?
25. Is NAMASTA the insurer?
26. Who is Fiserv Health?
27. What services are provided on Fiserv Health's website?
28. Which pharmacies participate in this discount program?
29. How do I find out which pharmacies are included?
30. What should I do if my favorite pharmacy isn't on your participating list?
31. What information do I need to provide the pharmacist to have my prescription filled?
32. What are the co-pays for my prescriptions?
33. How do I submit a pharmacy claim?
34. Does the discount apply to all drugs?
35. Who should I call if I have a question about my prescription benefit program?

Click on the question to jump to the page with that answer.

more

ELITE NAMASTA PROGRAM (CONT.)

*Click on the question
to jump back to the list at the top.*

Q 1. How do I qualify for Elite Health?

A To participate in NAMASTA's Elite Health program, you must be a member of NAMASTA residing in the US and keep your membership current. For questions regarding NAMASTA memberships or to join NAMASTA, please call 1.877.626.2782 toll-free or visit www.namasta.com.

Q 2. Who is an eligible dependent? Are my children and/or spouse covered under the Elite Health plans?

A You may insure your lawful spouse or domestic partner. You may insure your unmarried natural or step child if less than 25 years old. There are no student status requirements, so children over 18 are covered under the medical plan regardless of school status until their 25th birthday, as long as your coverage is in effect. The policy does provide special exceptions for disabled children over the age of 25. See your policy for details.

Q 3. How can I get information on continuing my medical benefits if I am no longer a member of NAMASTA?

A You do have COBRA rights. COBRA is a federal law that allows you to continue the coverage for 18, 29, or 36 months after you no longer qualify for coverage as a member. These COBRA rights also extend to your dependents should they lose coverage due to divorce, your death, becoming over age (children over 25 years), etc. [Click here to learn more about your COBRA rights.](#)

Q 4. How do I use Elite Health if I already have a major medical plan?

A The Elite Health plan pays regardless of other coverage you or your spouse may have.

Q 5. When does coverage become effective?

A Making your coverage effective is a three-step process. 1) you need to go on-line and enroll; 2) NAMASTA needs to approve your enrollment

application; 3) your monthly premium needs to be paid in full.

Coverage becomes effective the first of the month after you have been approved. Each week we issue ID cards to those whose enrollments have been approved. Once you receive your ID Card you may seek services.

Q 6. Whom can I contact if I have questions about my benefits?

A This health program is provided by Elite for the benefit of NAMASTA members. For questions concerning eligibility and employee status changes, feel free to contact Fiserv Health at 877-356-5092.

Q 7. Are pre-existing conditions covered?

A Yes, there are important limitations please read the Description of Benefits section of the policy to learn the details.

Q 8. What are the exclusions?

A There are both general exclusions (suicide, felony, parachuting etc), and excluded expenses associated with pre-existing conditions and hospital visits. Please read the policy in detail before enrolling.

Q 9. How do I show my medical provider proof of insurance?

A Fiserv Health will send ID cards to you within 2 weeks after your application has been approved that you will show to the provider at the point of service.

Q 10. When I visit the doctor, do I have to pay deductibles or co-pays?

A The plan allows five (5) doctor visits per year, at a cost of \$75 per visit. You will need to pay 100% of the cost greater than \$75 for any one visit, or pay 100% of the cost for the 6th and any additional visit during the same Calendar Year.

Q 11. What if my provider won't submit insurance information?

*Click on the question
to jump back to the list at the top.*

[more](#)

*Click on the question
to jump back to the list at the top.*

A You may need to request a copy of the itemized bill from the provider, listing dates of service, procedure and diagnosis codes. Then mail the itemized bill to Fiserv Health for payment of benefits based on the amount covered by your Benefits plan. Mail claim forms and itemized bills to: Fiserv Health, P.O. Box 520, Pueblo, CO, 81002-0520.

Q 12. How do I add dependents on to my plan?

A You will need to access the enrollment website. When you sign on, you will be given the option and prompts for adding or dropping a dependent. If you add a dependent, you will be required to provide the dependent's SSN. Make sure you have this information before you go online.

Q 13. How long do I have to add dependents?

A You may add a dependent at any time. Coverage becomes effective the day you add them subject to you paying the additional premium if required.

Q 14. What happens if I enroll late in the month?

A Because our billing cut off is the 20th of each month those who enroll after the 20th will miss the billing cycle. Here is an example: Mary enrolls on August 22; her application for coverage is approved by NAMASTA on August 25. Her coverage will be effective Sept. 1, and she will receive ID cards for herself and covered dependents. She will be billed immediately for one month's premium. If an employee starts before the first of any month, they will be sent the initial billing, for one month, immediately. Thereafter, about the 25th of each month, the employee will receive a premium statement from Fiserv, which must be paid in full by the 10th to assure uninterrupted service.

Q 15. How do I pay premiums?

A On or about the 20th of each month, Fiserv Health will mail a premium statement to your home. If your premium is not paid in full by the 10th day of the next month, the provider will be informed of your status. Prompt payment of your premium is a wise

decision to assure uninterrupted service.

Q 16. If I want to use my coverage and have not yet received my insurance card, what information do I need to provide to my health care provider?

A You will need to give your provider the group number, 53484, along with your social security number and the Fiserv Health customer service phone number, 1-877-356-5092.

Q 17. If I lose my Elite Health ID card, how do I request a new one?

A You may request a replacement ID card by calling Fiserv Health at 1-877-356-5092, or by sending an e-mail with your request to customerservice@fiservhealth.com.

Q 18. Whom do I contact if I have a change in my name or address or if there is an error on my Elite Health ID card?

A You have two choices to change your name or address. You may contact Fiserv Health at 877.626.2782 or go online to access the NAMASTA website. Click on the enrollment link and you will see an option for changing your address. Changing your address or name does not affect your coverage.

Q 19. Who is PHCS?

A The PHCS network is the largest proprietary preferred provider organization (PPO) network in the country. The PHCS network, the first and only national health care cost management company to earn quality endorsements from the National Committee for Quality Assurance.

Q 20. Does Elite Health grant me access to a Preferred Provider Network?

A Yes, with Elite Health you can have access to the PHCS network. PHCS is a national PPO network that will generate discounts from providers that are a part of the PHCS network. PHCS is the largest proprietary provider network in the country with over

*Click on the question
to jump back to the list at the top.*

more

ELITE NAMASTA PROGRAM (CONT.)

*Click on any question
to jump back to the list at the top.*

450,000 providers and 4,000 facilities. You may look up participating providers at www.phcs.com.

Q 21. Can I visit my current healthcare provider using my Elite Health ID card?

A Yes, you may visit any provider of your choice. However, you may receive substantial discounts by using a provider in the PHCS network. You may look up participating providers at PHCS's website, www.phcs.com.

Q 22. Where do I get claim forms?

A You may request claim forms by calling Fiserv Health at 1-877-356-5092, or by going to www.fiservhealthbenefits.com and printing one.

Q 23. How do I submit a claim?

A At the time of service, present your Elite Health ID card and ask the provider to file the claim directly with Fiserv Health (address is on the ID card). Fiserv Health will process the claim and send payment directly to the provider. An Explanation of Benefits (EOB) will be sent to you.

Q 24. Can I use the web to look up claim status?

A Yes, you can look up the status of your claims on the internet by accessing Fiserv Health's secure website at www.fiservhealthbenefits.com. Sign in as an employee to look up your claim status and those of your children under the age of 18. Your spouse and any child over the age of 18 must each register independently (due to privacy laws) unless they grant you access to their information.

Q 25. Is NAMASTA the insurer?

A No, NAMASTA is not an insurer and does not sell insurance or provide advice on insurance matters. Elite Health is underwritten by Monumental Life Insurance Company, an extremely strong national insurance carrier with extensive association experience, rated A+/Superior by A.M. Best.

The Elite Health program is administered by Fiserv

Health. For any questions about the Elite Health Plan, please contact Fiserv Health, 800-235-7160, 316-268-9699, 300 W. Douglas Ave., Suite 800, Wichita, KS 67201-2697.

Q 26. Who is Fiserv Health?

A Fiserv Health is a subsidiary of Fiserv, Inc., a worldwide provider of banking industry technology and services. Fiserv Health provides a variety of integrated health plan management, claims processing and administration services for self-funded medical, dental, vision and disability plans to self-funded commercial and government employers with the flexibility of a benefits administrator and the stability of a carrier. Visit www.fiservhealthbenefits.com.

Q 27. What services are provided on Fiserv Health's website?

A You are able to review the entire certificate of insurance with all of the coverages, exclusions and schedule of benefits; review your claims history (for up to two years); and review the details of your plan, including the schedule of benefits, covered expenses and any exclusions; and download and print claim forms, request new ID cards.

Q 28. Which pharmacies participate in this discount program?

A The prescription benefit covers 56,000 pharmacies around the U.S., including including Brooks, CVS, Osco, Walgreens, Costco, Dominick's, HEB, Kroger, Publix, Winn Dixie and Wal-Mart. The benefit also includes reduced-rate mail order services.

Q 29. How do I find out which pharmacies are included?

A Visit www.innoviant.com. Under the Quick Links heading on the right, click on the Find a Pharmacy link. On the next screen, enter your ZIP code in the Pharmacy Finder. You will receive a list of participating pharmacies in your area.

*Click on the question
to jump back to the list at the top.*

*Click on the question
to jump back to the list at the top.*

Q 30. What should I do if my favorite pharmacy isn't on your participating list?

A If your pharmacy is not listed in Pharmacy Finder and you would like to continue using it, you can ask your pharmacist to contact Innoviant at 877-559-2955.

Q 31. What information do I need to provide the pharmacist to have my prescription filled?

A You will receive a Fiserv Health insurance card with the Innoviant logo and Rx numbers. Show this card to your pharmacist the next time you need a prescription filled. Your pharmacist will have the necessary information to price your purchase correctly with the information provided.

Q 32. What are the co-pays for my prescriptions?

A The Elite Health Plan does not offer traditional prescription coverage, so there will be no co-pays. However, discounts up to 50 percent off suggested retail price will be applied at the register of participating retail pharmacies.

Q 33. How do I submit a pharmacy claim?

A When you fill a prescription, there will be no need for either you or your pharmacy to submit a claim. The pharmacy will just apply the discount and you pay the special discount price by cash or credit.

Q 34. Does the discount apply to all drugs?

A Yes. Your discount works on both generic and name brand drugs. You will receive a discount at the time of purchase regardless of your choice. However, generics are just as effective as name brand and much less expensive. Please ask your physician and your pharmacist to prescribe and dispense generic drugs whenever possible.

Q 35. Who should I call if I have a question about my prescription benefit program?

A Innoviant has a dedicated customer service center available to assist you in understanding your pharmacy benefits. You may reach them toll-free at (877) 559-2955, 24 hours a day, seven days a week. You may also contact the staff via e-mail at rxquestions@innoviant.com.



*Click on the question
to jump back to the list at the top.*