



YOUR ONLINE ACCOUNT

Aultra's online portal features easy-to-access resources, which provide the necessary tools to take an active role in your healthcare.

Follow these steps to create your account:



- 1 Visit aultragroup.com or scan the QR code to access the portal from your mobile device.
- 2 Select **Account Login** on the homepage.
- 3 Select **Member** from the drop-down menu. Select **Don't have an account? Register.**
- 4 Complete the member registration information, select **Next**, then accept the Terms & Conditions and select **Next**.
- 5 Please confirm that the information you entered is correct. If so, select **Next**.
- 6 Finalize your submission by clicking **Submit**.
- 7 Sign in to the portal using your username and password, then select **Log in**.



Features available on your online account:

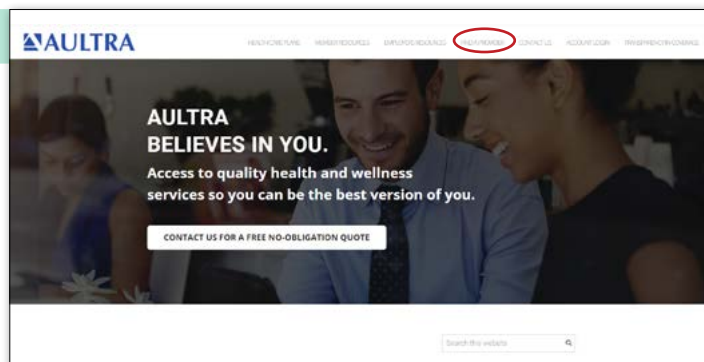
-  **My Costs** – Accumulator information for easy-to-read calculations of deductibles and out-of-pocket costs.
*Members with a network other than AultCare should refer to the medical cost estimator tool on the network website.
-  **My Policy** – Information regarding your policy and plan benefits.
-  **My Claims** – Information regarding claims, including claim status, payments and owed payments. Use this feature to also find Explanation of Benefit information for each claim.
-  **My ID Card** – View, print, download or request a replacement of your member ID card.
-  **Provider Search** – Use our online directory to find an in-network provider.
-  **Live Chat Online** – Use the online chat service to conveniently receive efficient and knowledgeable customer service administered by our trained representatives, Monday through Friday from 8:30 a.m. to 5 p.m. ET.
-  **My Resources** – Access additional resources here, including Pharmacy Benefit Manager, HealthEquity and Explanation of Benefits FAQ (if applicable).

HOW TO FIND A PROVIDER

If you are in need of a new family physician or a trained specialist, Aultra makes it easy to find a healthcare professional in the Aultra network. Follow these steps to use our online provider directory.

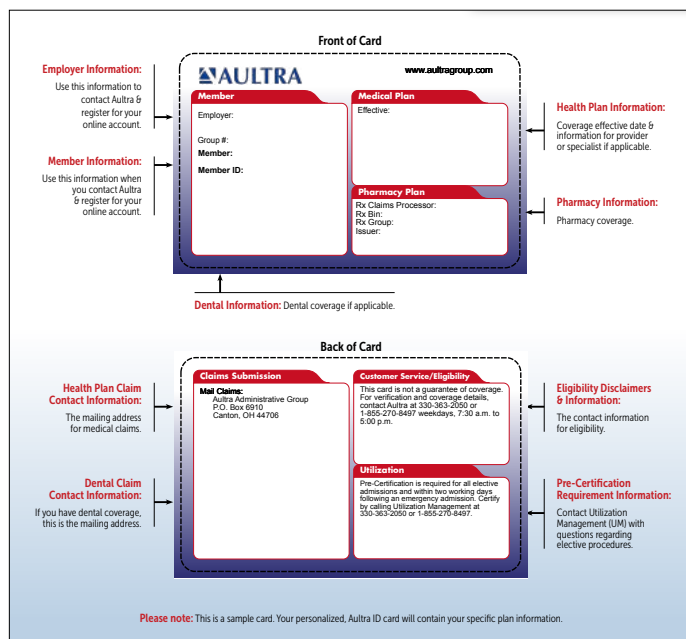
STEP 1

- » Select the **Find a Provider** button on the homepage.



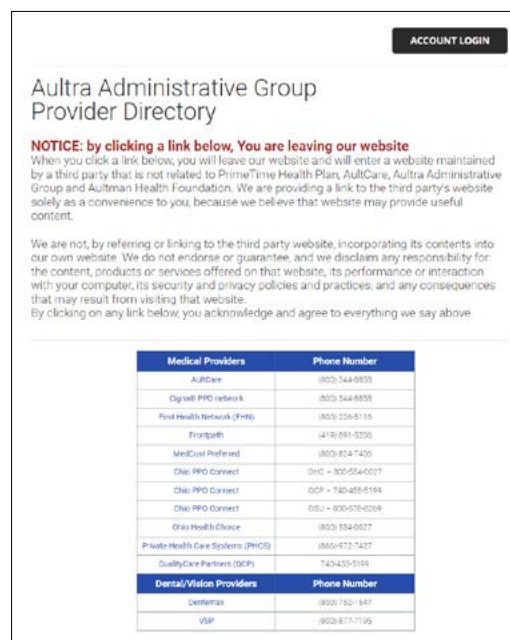
STEP 2

- » Use your member ID card to help select your network.



STEP 3

- » Select the link to the network that matches your ID card.
- » Follow the “find a provider” or “find a doctor” instructions on the network’s website.
- » Contact Aultra Customer Service for further assistance.



UNDERSTANDING YOUR EXPLANATION OF BENEFITS (EOB)

WHAT IS AN EOB?

An EOB is a statement from your health insurance plan detailing the costs toward a medical procedure or service you received. An EOB is not a bill.

The purpose of an EOB is to clearly state the cost of care received, costs covered by the insurance plan and member cost share.

HOW DO I RECEIVE MY EOBs?

Members are automatically enrolled to receive their EOBs via their secured, online member account.

To access your EOBs:

- Visit aultragroup.com and log in to your account.
- Select **My Claims**.
- Use the filters to find a specific claim or scroll to the bottom of the page to view your claims. Select a claim number to review the EOB.

If you would like to receive paper EOBs via mail, please contact Aultra Customer Service.

ITEMS OF INTEREST

When reviewing your EOB, these areas are clearly denoted.

On the following page is an example of an EOB.

- Claim payment details
 - Provider name
 - Claim number
- Date of service and name of procedure/service
- Cost of procedure/service
- Any applicable discounts and provider adjustments
- Payment amount paid by Aultra based on your plan's deductible, copayment and insurance
- Amount the member is responsible to pay

AULTRA
AULTRA ADMINISTRATIVE GROUP
P.O. Box 6910
Canton, OH 44706-0910

Electronic Service Requested



Member address information

**Explanation of Benefits
Enrollee Copy**

If you have questions regarding this correspondence, please call 330-363-2050 or 855-270-8497. M - F 7:30 AM to 5:00 PM EST, or visit our website at www.aultragroup.com

This is not a bill

Group
information

Group #:
Group:
Date:
Member ID:

Claim payment detail ↓

Amount based on adjustments and
coinsurance/copay/deductible ↓

Provider Name: Claim#:		Patient Name: Patient #:		Employee:					
Dates of Service -- CPT/Mod Procedure		Billed Amount	Ineligible Amount	Inel Code	Contractual Adjustment	Adj Code	Coin-Copay/ Deductible	Payment Amount	
DATE OF SERVICE -- CPT/MOD PROCEDURE		165.00	0.00		37.88	O3	25.00	102.12	
TOTALS		165.00					25.00	102.12	
Date of service and name of procedure/service		Cost of procedure/service		Amount Aultra will pay				Total Net Payment: 102.12	
				Member responsibility amount				Patient Responsibility 25.00	
Payment To:		Check No		Amount		102.12			

Reason Code Description

O3 FEE ADJUSTMENT/PROVIDER DISCOUNT, PATIENT NOT REQUIRED TO PAY.

Additional Messages

- *If this plan is the secondary payer, the patient responsibility field may not reflect accurately. Please confirm the amount due with your provider of service.
- **For current accumulator information, please view your account on our website.
- *** The affiliation fee is a contracted amount between the provider and the leased network. The patient is not responsible for this amount.

If you, or someone you are helping, have questions about AultCare/Aultra you have the right to get help and information in your language at no cost. To speak with an interpreter, call Local: 330-363-6360 Outside Stark County: 1-800-344-8858 TTY Local: 711 Outside Stark County: 711

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca AultCare/Aultra tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al Local: 330-363-6360 Fuera del condado de Stark: 1-800-344-8858 TTY Local: 711 Fuera del condado de Stark: 711

如果您，或是您正在協助的對象，有關於AultCare/Aultra保險公司 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 本地：330-363-6360 斯塔克縣外：1-800-344-8858 TTY線本地：711 斯塔克縣外：711

AultCare/Aultra complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.



BE PREPARED

Get the right care, whether that's finding the right doctor, specialist, therapist or something else altogether. Use the Find a Provider button at AultraGroup.com or contact Aultra at 330-363-2050 (Toll-Free: 1-855-270-8497, TTY: 711).

Find care near you whenever you need it. You get in-network coverage at hospitals, ambulatory care facilities and providers. With location options in more places, Aultra gives you more.

	Who usually provides care	Average wait time and cost	When to go
Emergency Room 	Doctors trained in emergency medicine	4 hours or more \$2,300	- Life-threatening or disabling symptoms - Chest pain or severe shortness of breath - Major injury or broken bones - Sudden or unexplained loss of consciousness
Retail Health Clinic 	Physician assistants or nurse practitioners	30 minutes \$78	- Allergic reactions (minor) - Bumps, cuts, scrapes, rashes - Burning with urination - Burns (minor) - Cold, cough and sore throat - Sinus pain and fever (minor) - Eye or ear pain or irritation - Shots
Walk-in Doctor's Office 	Family practice doctors	30 minutes \$147	Same as retail health clinic plus ... - Asthma (mild) - Back pain - Nausea or diarrhea - Headache (minor)
Urgent Care Center 	Doctors who treat conditions that should be looked at right away	30 minutes \$98	Same as walk-in doctor's office plus ... - Animal bites - Sprains and strains - Stitches - X-rays
AultmanNow 	Board-certified providers	10 minutes \$80	- Cold & flu symptoms - Allergies - Sinus problems - Respiratory infection - Skin problems - And more!

Do you have health-related questions or concerns? Please call 330-363-7621 or 1-877-336-9113. An operator will take your information and an experienced registered nurse will return your call.

Money-saving tip

Visit hospitals and doctors that are in your network. If you don't, you'll often pay much more out-of-pocket for your care.



AultmanNow offers you a fast, easy and cost-effective way to see a provider - in the comfort of your home!

Urgent Care*

Meet with a provider through a video visit or by phone, 24/7/365. Use AultmanNow urgent care for non-emergent medical issues like cold and flu, fever, rash, abdominal pain, sinusitis, pink eye, migraine, UTI and more.

Behavioral Health*

Therapists available to provide counseling for depression, anxiety, stress, relationships, insomnia and more.

Dermatology*

Upload a photo of skin concerns and dermatologists are available for consultation, diagnosis and prescriptions (when appropriate).

***Actual plan cost and member cost share will be displayed at checkout.**

Physical Therapy

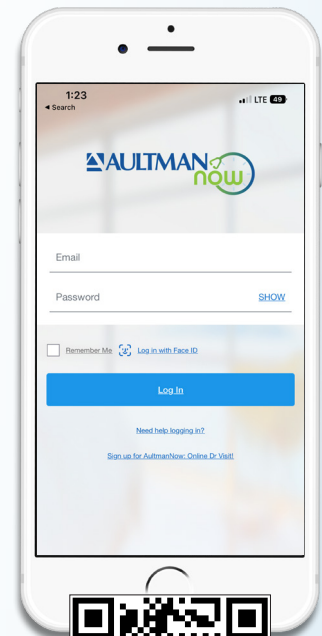
With this free, easy-to-use digital therapy solution, you can get musculoskeletal pain relief in the comfort of your own home! A physician referral is NOT required.



With Sword Thrive, you will work with a dedicated doctor of physical therapy (DPT) to develop a treatment plan just for you.



Sword Bloom offers no-cost digital pelvic health care services. You will work with a pelvic health specialist to create a personalized easy-to-use, at home solution for issues like bladder leakage, bowel disorders, pelvic pain or prolapse.



Scan the QR code to download the AultmanNow mobile app or visit aultmannow.com.

AULTCARE

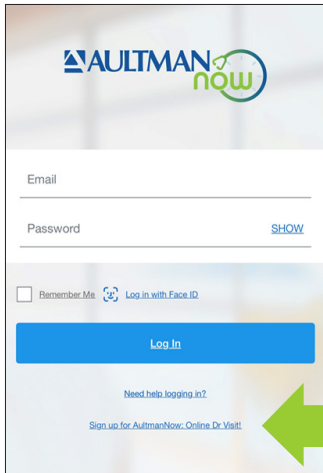
AULTRA

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How to Register for an AultmanNow Account



To get started with AultmanNow telehealth, download the mobile app. Then, follow the instructions below to register for an account.

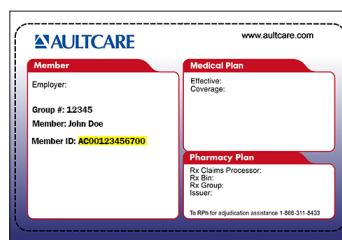


1. Once you have downloaded it, open the mobile app and select **Sign up for AultmanNow: Online Dr Visit!**

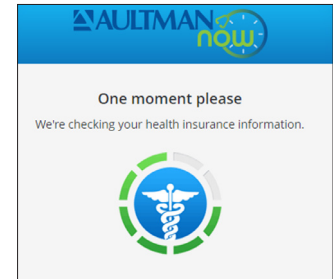
2. Input your legal first name, last name, date of birth, gender and biological sex.

3. Select your current location (state).
4. Input and confirm your email address.
5. Enter your password and agree to the terms of use.
6. To accurately show your costs, include the following information:
 - Service key (select not applicable)
 - Select the name of your insurance plan from the drop-down box
 - Enter your member ID number from your insurance card
7. Select **Continue**.

Subscriber ID is the member ID number on the member ID card. The primary subscriber is the person whose name is listed on the member ID card.

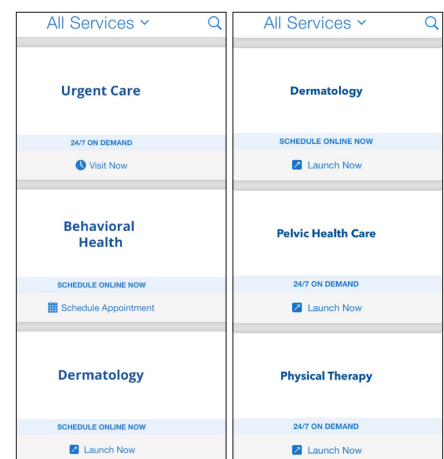


Sample member ID card



8. If you submit your health insurance information, AultmanNow will automatically confirm your health insurance information.

Insurance may cover all or part of your visit. Incorrect insurance information may result in you being charged the full cost of the visit.



9. Once complete, you will be able to access the AultmanNow services.

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AULTRA CVS MINUTECLINIC®

With more than 125 different healthcare services provided by trained professionals available 7 days a week, CVS MinuteClinics® are ideal for your non-urgent healthcare needs.

All CVS MinuteClinics across the United States are included in the Aultra network. If you are traveling and experience a non-urgent healthcare need, you can conveniently access a CVS MinuteClinic and still receive coverage under your health plan.

QUALITY AND CONVENIENT CARE



The CVS MinuteClinic® practices quality and convenient care:

- » Located inside select CVS Pharmacy locations
- » Open 7 days a week (includes evenings and weekends)
- » Scheduled appointments are recommended
- » New clinics and services are added regularly
- » Visit www.cvs.com/minuteclinic for more information



STAFFED BY PROFESSIONALS IN FAMILY HEALTHCARE



At a CVS MinuteClinic, you will receive a wide range of care by professionals specialized in family healthcare.

Services include:

- » Minor illnesses and injuries
- » Screenings and monitorings
- » Skin conditions
- » Travel health
- » Vaccinations and injections
- » Wellness

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CONTACT US

330-363-2050 | 1-855-270-8497 | TTY 711
www.aultragroup.com

you
matter

PROGRAMS AND SERVICES

Through our partnerships, coordination, products, network and customer service, Aultra offers members a wide variety of programs and services. These programs and services provide a diverse spectrum of value to members towards their health and wellness.

Care Coordination



Aultra's Care Coordination program encompasses all of the clinical areas of Aultra including:

- » Utilization Management
- » Primary Care Connection
- » Case Management
- » Disease Management
- » Pharmacy
- » Wellness

As an Aultra member, you may receive the following services:

- » Assistance with chronic illnesses
- » Help with transitioning care
- » Access to healthcare professionals
- » Educational mailings
- » Tele-monitoring programs for heart failure and diabetes
- » Assistance with navigating the healthcare system

24-Hour Nurse Hotline



When it comes to your health, Aultra members can talk with an experienced, registered nurse and get advice or answers to their health-related questions day or night.

Please call 330-363-7620 or 1-866-422-9603 for additional assistance.

Online Health Library



If you are preparing for surgery, living with a chronic condition or want to take a more active role in your health, our online health library can empower you to take care of your health. The online health library can help you prepare for surgery and manage your health conditions.

The online health library delivers reliable information, created in collaboration with only board-certified physicians, making it easy to understand.

To view the online health library, visit www.aultragroup.com/health--care-coordination.

Online Resources



Throughout Aultra website, you are able to manage your account information including: reviewing your claims and Summary of Benefits, ordering ID cards and accessing a wide variety of forms. Aultra's website is also a great resource for many other health-related topics.

Health & Wellness

- » Provider directory
- » Health programs and services
- » Health information and tips

Prescription Information

- » Prescription history
- » Money saving drug alternatives
- » Detailed drug information
- » National pharmacy search

Online Resources

- » Account statements
- » Benefits
- » Claims

AultCare Blue Button

- » Organize and store medical information
- » Download text file
- » Share data with members of your care team

Quick Forms

- » Member card replacement
- » Medical information
- » Dental claim form
- » Vision claim form
- » Other coverage information

AultmanNow



Aultra partners with AultmanNow, a convenient telehealth service for medical consultation, diagnosis and prescriptions (when appropriate) and digital therapy services. Members enrolled in AultmanNow have convenient access to affordable medical care via phone, online video consultation and digital devices.

AultmanNow Offers:

- » Urgent/immediate care, available 24/7/365
- » Behavioral health services via scheduled visits
- » Dermatology services via scheduled visits
- » Online physical therapy services using at-home devices



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CONTACT US

330-363-2050 | 1-855-270-8497 | TTY 711

www.aultragroup.com

GETTING THE MOST FROM YOUR HEALTHCARE PLAN

AultCare/Aultra is dedicated to providing you and your family with convenient access to healthcare. In order to provide access to quality care, it is important to keep AultCare/Aultra updated with any major life events. In addition, AultCare/Aultra may reach out to you if more information is required regarding you and your family to accurately manage your health plan.

MAJOR LIFE EVENTS



If any of the below life events occur, it is your responsibility to notify your Benefits Coordinator at your Employer within 30 days of the event to qualify for a Special Enrollment Period. During a Special Enrollment Period, you may alter an existing health insurance policy or sign up for a new one outside of the yearly Open Enrollment Period.

» Loss of Health Coverage

- Involuntarily losing existing health coverage, including job-based, individual, and student plans
- Losing Eligibility for Medicare, Medicaid, or CHIP
- Turning 26 and losing coverage through a parent's plan

» Changes in Household

- Getting married or divorced
- Having a baby, adopting a child, or being awarded guardianship of a minor
- Death in the family



ADDITIONAL INFORMATION



If AultCare/Aultra requires additional information, you will receive a form in the mail, or will be notified with an explanation of benefits. It is important to complete the form and send the information to AultCare/Aultra as soon as possible to avoid a delay in claims payment or claims denial.

Examples:

- » **Other Coverage Information** – It is your responsibility to notify AultCare/Aultra if your spouse and/or child(ren) have other insurance coverage. AultCare/Aultra may ask you to complete an Other Coverage Information Form to verify the other coverage or if additional information is needed.
- » **Divorce/Not Married** – AultCare/Aultra may request a copy of your divorce decree or court order if you are divorced or a single parent covering children on your plan. The required court document provides information on which parents must carry the healthcare plan for dependent children. If you do not have a court document, you will be asked annually to complete an Affidavit for Financial Support.
- » **Injury** – AultCare/Aultra will need to know if an injury is related to an accident that may be connected to a Workers' Compensation claim, an automobile accident, or if another party is responsible for the injury. You will be asked to complete important information on an Accident Questionnaire and return it to AultCare/Aultra.

CONTACT US:

AultCare | 330-363-6360 | 1-800-344-8858 (TTY: 711) | www.aultcare.com
Aultra | 330-363-2050 | 1-855-270-8497 | www.aultragroup.com

 **AULTCARE**

 **AULTRA**



Preventive care is one of the most important steps you can take to manage your health. Routine preventive care can identify and address risk factors before they lead to illness. When you prevent illness, it helps reduce your healthcare costs. You should work with your doctors to help you follow these guidelines and address your specific health concerns.

CHILD PREVENTIVE CARE (BIRTH TO AGE 21)

- Preventive physical exams
- Behavioral counseling to prevent skin cancer
- Behavioral counseling to promote a healthy diet
- Blood pressure screening
- Cholesterol and lipid level screening
- Dental cavities prevention including application of fluoride varnish on all primary teeth (up to age 17)
- Depression and anxiety screening
- Developmental and psycho-social behavioral assessments
- Hearing screening for newborns
- Lead exposure screening
- Newborn gonorrhea prophylaxis
- Newborn screenings, including sickle cell anemia
- Screening and behavioral counseling related to tobacco and drug use
- Screening and counseling for obesity
- Screening and counseling for sexually transmitted infections
- Screenings for heritable diseases in newborns
- Tuberculosis screening
- Vision screening
- Hepatitis B screening if at high risk for infections

CHILD IMMUNIZATIONS

- Coronavirus disease 2019 (COVID-19)
- Diphtheria, tetanus, pertussis
- Haemophilus influenza type B
- Hepatitis A & B
- Human papilloma virus
- Influenza (flu shot)
- Measles, mumps, rubella
- Meningococcal
- Pneumococcal (pneumonia)
- Polio
- Respiratory syncytial virus (RSV)
- Rotavirus
- Varicella (chicken pox)



ADULT PREVENTIVE CARE (AGE 21 AND OLDER)

- Preventive physical exam
- Abdominal aortic aneurysm screening
- Blood pressure screening
- Cholesterol and lipid level screening
- Colorectal cancer screening including fecal occult blood test, flexible sigmoidoscopy or colonoscopy
- Depression and anxiety screening
- Diabetes screening
- Hepatitis B screening if at high risk for infections
- Hepatitis C screening if at high risk (or one-time screening for adults born 1945 to 1965)
- HIV screening
- Screening and counseling for sexually transmitted infections
- Screening for lung cancer
- Tuberculosis screening

COUNSELING AND EDUCATION INTERVENTIONS

- Behavioral counseling to prevent skin cancer
- Behavioral counseling to promote a healthy diet
- Counseling related to aspirin use for the prevention of cardiovascular disease
- Prevention of falls in older adults
- Screening and behavioral counseling related to unhealthy alcohol and drug use
- Screening and behavioral counseling related to tobacco abuse
- Screening and nutritional counseling for obesity



ADULT IMMUNIZATIONS

- Coronavirus disease 2019 (COVID-19)
- Hepatitis A & B
- Herpes zoster (shingles)
- Human papilloma virus
- Influenza (flu shot)
- Measles, mumps, rubella
- Meningococcal
- Pneumococcal (pneumonia)
- Polio
- Respiratory syncytial virus (RSV)
- Tetanus, diphtheria, pertussis

PRESCRIPTION DRUGS

- Aspirin
- Colonoscopy preparations
- Fluoride
- Folic acid
- Medication to reduce the risk of primary breast cancer in women
- Smoking cessation aids
- Ferrous sulfate drops
- Statin therapy
- Contraceptives
- PrEP

WOMEN'S SERVICES

- Breast and ovarian cancer susceptibility screening, counseling and testing (including BRCA* testing)
- Comprehensive breast cancer screening
- Breastfeeding counseling and rental of breast pumps and supplies up to the purchase price
- Bone density test to screen for osteoporosis
- Cervical cancer screening (Pap test)
- Chlamydia screening
- Discussion of chemoprevention with women at high risk for breast cancer
- FDA-approved contraception methods and counseling for women, including sterilization
- HPV DNA testing
- Lactation classes
- Pregnancy screenings (including hepatitis, asymptomatic bacteriuria, Rh incompatibility, syphilis, gonorrhea, chlamydia, iron deficiency anemia, alcohol misuse, tobacco use, HIV, gestational diabetes)
- Prenatal care and behavioral health counseling for healthy weight and weight gain
- Screening and counseling for interpersonal and domestic violence
- Well women visits
- Perinatal depression counseling and intervention

The screenings and immunizations listed in this summary include services required by healthcare reform (the Patient Protection and Affordable Care Act). For plan years beginning on or after September 23, 2010, non-grandfathered health plans must cover these routine immunizations and other services that are recommended by the United States Preventive Services Task Force A or B, and by other organizations such as Bright Futures, endorsed by the American Academy of Pediatrics. Please note: Some services and products may be subject to age, gender or other restrictions and are subject to change. Refer to uspreventiveservicestaskforce.org or Healthcare.org for details. In addition, some prescription drugs or services may be subject to medical management techniques, such as prior authorization, quantity limits, etc.

If these services are performed by a network provider, members cannot be charged a coinsurance or deductible. Out-of-network charges may apply if the services are performed by a non-network provider.

*All genetic testing, including BRCA testing, requires prior authorization.



DIABETIC FREE METER PROGRAM

As part of the Diabetic Program, certain diabetic testing supplies are available at no cost to members.

Members will be eligible for a CONTOUR®NEXT ONE blood glucose meter and all related blood glucose testing supplies for \$0 with a prescription.

This program does not apply to all Aultra plans.

Please contact Aultra at 330-363-2050 (TTY 711) to learn if this program is available for you.

PRODUCTS COVERED FOR \$0 COPAYMENT

\$0

- CONTOUR®NEXT ONE Test Strips
- CONTOUR®NEXT ONE Control Solution
- MICROLET®NEXT Lancing Device
- MICROLET® Lancets
- All Generic Lancets



**To order your free meter,
call 1-800-401-8440 and use code CTR-OPX**

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AULTRA

PHARMACY FAQ

Who is my pharmacy benefit manager through my Aultra health plan?

Your pharmacy benefit manager is Optum Rx.

Where can I get my prescriptions filled?

You may fill your prescriptions at any network retail pharmacy. [Click here](#) or scan the QR code to find a network pharmacy or prescription drug.



Where can I have specialty medications filled?

You may have specialty medications filled by mail order with either organization below.

Gentry Health Services Specialty Pharmacy

33381 Walker Road, Suite A
Avon Lake, OH 44012

Phone: 1-844-4-GENTRY (443-6879)

Fax: 1-844-FAX-2GHS (329-2447)

Website: www.gentryhealthservices.com

OR

Optum Specialty Pharmacy

P.O. Box 2975
Mission, KS 66201-1375

Phone: 1-855-427-4682

Website: specialty.optumrx.com

What is a formulary and why is it necessary?

The formulary is designed to provide value, covering the most cost-effective and clinically appropriate medications in each therapeutic class. The formulary includes adequate options in each therapeutic category, including most generic and preferred brand medications. Medications not listed in the formulary are not covered. If the patient meets certain criteria, their physician requests an exception, and the exception is approved by Aultra, the non-formulary medication is covered at the non-preferred benefit level.

How do I access an online copy of the formulary?

[Click here](#) or scan the QR code, then click on the appropriate link under Formularies.



How can I search for my specific medication once I have accessed the formulary?

Hold the 'CTRL' button and letter 'F' at the same time to use the 'search' option to find your medication. Additionally, there is an alphabetical list at the end of the formulary.



PHARMACY FAQ



What is step therapy?

Step therapy is required for certain classes of medications. For this, you must first try a step 1 medication, and if it is ineffective, before a step 2 medication is covered. When filling your prescription, the system will check the medication for step therapy requirements. If your pharmacy history shows you have tried a step 1 medication in the recent past, the step 2 medication may be filled. If not, the pharmacist will contact your doctor to explain next steps.

Step therapy link

[Click here](#) or scan the QR code, then click the appropriate link.



What does the abbreviation(s) next to some medications mean?

QL – Quantity Limitation

PA – Prior Authorization

ST – Step Therapy

E – Excluded/Medication Not Covered

What is a prior authorization?

Prior authorization (prior approval) is required for certain medications, as determined by a team of physicians and pharmacists. Your physician, or authorized prescriber, must provide the clinical rationale for prescribing the medication. Aultra will review the information provided, along with the patient's history, and either approve or deny the request. If approved, you may proceed with filling your medication. If denied, you will receive notice that the medication is not covered and be informed of your rights to appeal. Prior authorization is necessary to ensure that the most cost-effective and clinically appropriate medications are covered by the plan.

Prior authorization link

[Click here](#) or scan the QR code.



What is a quantity limitation?

Quantity limits are meant to lower the risk of overuse. Quantity limit rules are based on:

- Food and Drug Administration (FDA) approved uses.
- Manufacturer's instruction.
- Accepted or published clinical recommendations.
- State or federal regulations.

Quantity limitation link

[Click here](#) or scan the QR code, then click the Quantity Limits link.



What does the number next to the medication mean?

This is the tier where the medication falls in your pharmacy benefit plan, equal to which tiered copayment or coinsurance will apply.

Why is my cost more than my benefits copayment?

A generic medication will be dispensed when available unless your physician specifically requests a brand name drug. However, if you request that a brand name drug be dispensed, you will be responsible for the difference between the maximum allowable cost of the generic and the brand name drug. This penalty is not covered by your plan, and these expenses will not count toward your deductible or out-of-pocket limit.

How can I find medications that are considered preventive and covered at no cost?

Please [click here](#) or scan the QR code, then click on the appropriate link under Preventive Services.



How can my pharmacy or physician reach Aultra to assist them with my prescription?

Call 330-363-2050 or toll free at 1-855-270-8497.



OPTUMRx® ONLINE RESOURCES

The OptumRx website and mobile app provide tools and information to help you take care of yourself and your pharmacy benefits. It's easy to track an order, search for a lower-cost medication, sign up for home delivery, and more.

MANAGE YOUR PRESCRIPTION NEEDS ON YOUR MEMBER ACCOUNT



To access your OptumRx account:

1. Visit the Aultra website (www.aultragroup.com).
2. Log in to your Aultra online member account.
3. Once you are logged into your member account, click the **My Resources** tab.
4. Select **OptumRx** to be directed to your OptumRx account.

MANAGE YOUR PRESCRIPTION NEEDS ON THE AULTCARE APP



To access your account using your mobile device:

1. If you have not done so, download the AultCare app from the Apple App Store® or Google Play™.
2. Sign into the AultCare app using the same username and password as your online Aultra member account.
3. At the bottom of your screen, select **More**.
4. Click **My Resources** and a drop down menu will appear.
5. Select **OptumRx** to be directed to your OptumRx account.



CONTACT US

330-363-2050 | 1-855-270-8497

www.aultragroup.com



Save time and manage your health using these optumrx.com tools:



Place an order – Skip the pharmacy line and order medications you take regularly — you'll get a 90-day supply delivered to your home and may pay less



Price a drug – Compare costs from different pharmacies or find lower-cost alternatives for possible savings



Order status – Track your home delivery medication status



Pharmacy locator – Find the closest network pharmacy



Notifications and reminders – Set up text message pharmacy notifications and/or reminders to take your medication or refill a prescription



Benefit lookup – View real-time benefit information and your plan's prescription drug list



My prescriptions – Manage home delivery medication renewals, delivery status and more



Savings Advisor – See opportunities to save on your prescriptions

And with the app, you can do all of the above, plus refill a prescription by scanning your medication's barcode or sending a photo of the pill bottle.

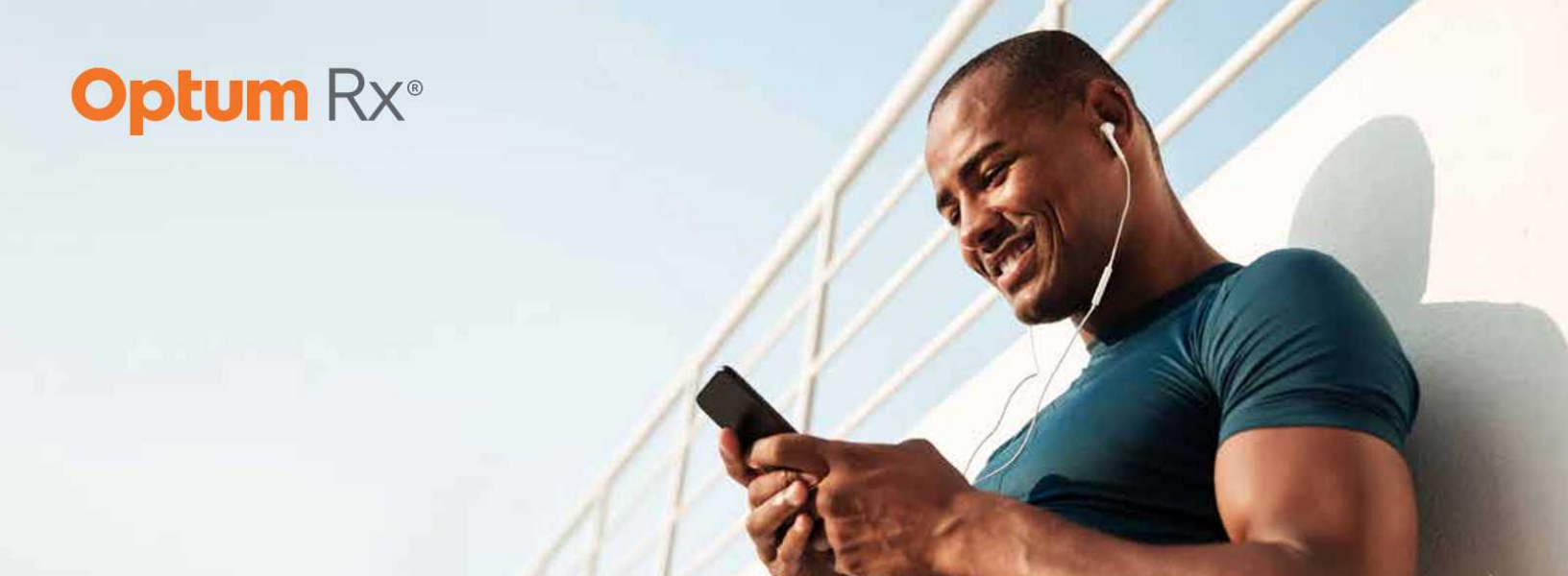
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If you, or someone you are helping, have questions about AultCare/Aultra you have the right to get help and information in your language at no cost. To speak with an interpreter, call Local: 330-363-6360 Outside Stark County: 1-800-344-8858 TTY Local: 711 Outside Stark County: 711.

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca AultCare/Aultra tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al Local: 330-363-6360 Fuera del condado de Stark: 1-800-344-8858 TTY Local: 711 Fuera del condado de Stark: 711.

如果您，或是您正在協助的對象，有關於AultCare/Aultra保險公司方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 本地：330-363-6360 斯塔克縣外：1-800-344-8858 TTY線本地：711 斯塔克縣外：711。

AultCare/Aultra complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.



Optum Rx Price Edge delivers discounted pricing on medications

This discount price solution helps you save on generic medications whether they are covered by your pharmacy benefit plan or not.

How Optum Rx Price Edge works:



You're already set up. Keep using your current network pharmacy.



Fill your prescriptions as usual and automatically get lower copays on some covered medications.



For medications not covered, even over-the-counter products, receive a discounted price with a prescription from your doctor.



Scan here to download the Optum Rx app or log in at **OptumRx.com** to check medication prices.

You have the right to assistance and information in your language at no cost. To speak with an interpreter, call 330-363-6360 (TTY: 711). ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 330-363-6360 (TTY: 711). 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電330-363-6360（TTY：711）。AultCare/Aultra complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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 **AULTCARE**

 **AULTRA**



Notice of HIPAA Special Enrollment Rights

We would like to take this opportunity to advise you of an important provision in your health care plan. To participate, you must complete an enrollment form. Dependent upon which specific plan you wish to enroll in, you may have to pay part of the premium through payroll deduction.

Additionally, HIPAA requires that we notify you of the "Special Enrollment Provision".

Special Enrollment Provision

Loss of Other Coverage. If you decline enrollment for yourself or other eligible dependent(s) (including your spouse) while other health insurance or group health plan coverage is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within **30** days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

New Dependent by Marriage, Birth, Adoption, or Placement for Adoption. In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your new dependent(s) in this plan. However, you must request enrollment within **30** days after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or to obtain more information about the plan's special enrollment provisions, contact your Aultra Service Center at 330-363-2050 or toll free at 855-270-8497.

Procedures for Requesting Certificate of Creditable Coverage/Certificate of Health Plan Coverage

HIPAA requires that plan sponsors and/or insurers provide a Certificate of Creditable Coverage/Certificate of Health Plan Coverage (HIPAA Certificate) to each individual who requests one, so long as it is requested while the individual is covered under the Aultra Health Plan or within 24 months of the individual's coverage under the Aultra Health Plan ending. The request also can be made by someone else's behalf for an individual. For example, an individual who previously was covered under the Aultra Health Plan may authorize a new plan in which the individual enrolls to request a certificate of the individual's Creditable Coverage/Health Plan Coverage from the Aultra Health Plan. An individual is entitled to receive a Certificate upon request even if the Aultra Health Plan has previously issued a Certificate to that individual.

Requests for Certificates should be directed to AultCare Corporation, Attn: Member Services, P.O. Box 6910, Canton, Ohio 44706-0910 or by calling your Aultra Service Center at 330-363-2050 or toll-free at 855-270-8497.

Telephone requests are accepted only if the Certificate is to be mailed to the address the plan has on file for the individual to who the request relates. Other requests must be made in writing.

- P.O. Box 6910 | Canton, OH 44706
- PHONE: 330-363-2050 | TOLL FREE: 1-855-270-8497
- TTY LINE: 711
- WEBSITE: www.aultragroup.com



All requests must include:

- The name of the individual for whom the Certificate is requested;
- Aultra Group Number and Identification Number
- The last date that the individual was covered under the plan;
- The name of the participant that enrolled the individual in the plan; and
- A telephone number to reach the individual for whom the Certificate is requested.

Required written request must also include:

- The name of the person making the request and evidence of the person's authority to request and receive the Certificate on behalf of the individual
- The address to which the Certificate should be mailed.
- The requester's signature

After receiving a request that meets these requirements, the plan will act in a reasonable and prompt fashion to provide the Certificate.

(Note: A preexisting condition exclusion does not apply to enrollees of Aultra plans that have renewed effective January 1, 2014 and after.)

The Certificate of Creditable Coverage/Health Plan Coverage can be used as proof of loss of coverage.

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