



# Essential StaffCARE

## Affordable Care Act Compliant Minimum Essential Coverage (MEC) Benefit Guide

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### **Availability of the Summary of Benefits and Coverage (SBC) for Minimum Essential Coverage (MEC) Plan**

Choosing a health coverage option is an important decision. To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about any health coverage option in a standard format, to help you compare across options.

1. Your SBC is available for viewing upon request and Free of Charge at any Express Employment office.
2. The SBC will be available upon request and Free of Charge by contacting ESC Customer Service at 1-866-798-0803.
3. An electronic version of your SBC will be accessible via Internet on the Express SBC information page: [essentialstaffcare.com/sbcmec](http://essentialstaffcare.com/sbcmec)
4. You can also view and /or print the SBC from the first and second screen of the electronic enrollment application.

The SBC is available on the web at: [essentialstaffcare.com/sbcmec](http://essentialstaffcare.com/sbcmec). A paper copy is also available, free of charge, by calling Essential StaffCARE Customer Service 1-866-798-0803.

Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

The **Minimum Essential Coverage (MEC) Plan** is an employer-sponsored, self-funded plan that has been deemed to be in compliance with ACA rules and regulations. More information about Preventive Services may be found on the government website at: <https://www.healthcare.gov/what-are-my-preventive-care-benefits/>. For questions or assistance, please call Essential StaffCARE Customer Service at 1-866-798-0803.

## Minimum Essential Coverage Plan Benefits (ACA Compliant Plan)

Monthly Rates

MEC PREVENTIVE SERVICES		In-Network	Non-Network
15 Preventive Services for Adults		100%	40%
22 Preventive Services for Women		100%	40%
26 Covered Preventive Services for Children		100%	40%
<b>PPO Network: First Health Network, 1-800-226-5116, <a href="http://www.firsthealth.com">www.firsthealth.com</a></b> <b>For more information about preventive services, please visit <a href="http://www.healthcare.gov">www.healthcare.gov</a>.</b>			
<b>Employee Only (monthly)</b>	<b>\$32.00</b>	<b>Employee + 1 (monthly)</b>	<b>\$48.34</b>
		<b>Employee + Family (monthly)</b>	<b>\$102.63</b>

### PLAN INFORMATION

Enrollment in the Minimum Essential Coverage (MEC) Plan will **DISQUALIFY** you from receiving a subsidy from the health insurance exchange. Please **DO NOT** enroll in the Minimum Essential Coverage (MEC) Plan if you wish to obtain or continue receiving subsidized health insurance from the health insurance exchange. This plan **DOES NOT** cover medical services. This plan provides coverage for preventive services such as immunization and routine health screening. It does not cover conditions caused by accident or illness. This plan satisfies the federal healthcare reform Individual Mandate. **By purchasing this plan, you will not be taxed for failing to purchase insurance required by the Affordable Care Act.**

### PAYMENT INFORMATION

The Minimum Essential Coverage (MEC) Plan utilizes a direct payment process. **Once you receive your first paycheck with Express Employment Professionals, you will receive information in the mail with further instructions on how to set up payment, if you have completed enrollment.** This payment option will require a credit card for payment so the premium can be automatically deducted.

### MEMBER SERVICES

Essential StaffCARE Customer Service: **1-866-798-0803**

- Once enrolled, members can call this number for questions regarding plan coverage, ID card, claim status, and policy booklets.
- Customer Service Call Center hours are M - F, 8:30 a.m. to 8 p.m. Eastern Standard Time. Bilingual representatives are available.
- Members can also visit [www.paisc.com](http://www.paisc.com) and click on "Your Plan" and enter their group number (206800-EXP).

**MINIMUM ESSENTIAL COVERAGE BENEFITS AT A GLANCE****ACA Required Wellness and Preventive Benefits****Adults****The MEC Plan covers 100% of the allowed amount in network; 40% out of network**

Abdominal Aortic Aneurysm	One time screening for men of specified ages who have ever smoked
Alcohol Misuse	Screening and counseling
Aspirin	Use for men and women of certain ages
Blood Pressure	Screening for all adults
Cholesterol	Screening for adults of certain ages or at higher risk
Colorectal Cancer	Screening for adults over 50
Depression	Screening for adults
Type 2 Diabetes	Screening for adults with high blood pressure
Diet	Counseling for adults at higher risk for chronic disease
HIV	Screening for all adults at higher risk
Immunization	Vaccines for adults' doses, recommended ages, and recommended populations vary: Hepatitis A, Hepatitis B, Herpes Zoster, Human Papillomavirus, Influenza (Flu shot), Measles, Mumps, Rubella, Meningococcal, Pneumococcal, Tetanus, Diphtheria, Pertussis, Varicella
Obesity	Screening and counseling for all adults
Sexually Transmitted Infection (STI)	Prevention counseling for adults at higher risk
Tobacco Use	Screening for all adults and cessation
Syphilis	Screening for all adults at higher risk

**Women, Including Pregnant Women****The MEC Plan covers 100% of the allowed amount in network; 40% out of network**

Anemia	Screening on a routine basis for pregnant women
Bacteriuria	Urinary tract or other infection screening for pregnant women
BRCA	Counseling about genetic testing for women at higher risk
Breast Cancer Mammography	Screenings every 1 to 2 years for women over 40
Breast Cancer Chemoprevention	Counseling for women at higher risk
Breastfeeding	Comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women
Cervical Cancer	Screening for sexually active women
Chlamydia Infection	Screening for younger women and other women at higher risk
Contraception	Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling, not including abortifacient drugs
Domestic and Interpersonal Violence	Screening and counseling for all women
Folic Acid	Supplements for women who may become pregnant
Gestational Diabetes	Screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes
Gonorrhea	Screening for all women at higher risk
Hepatitis B	Screening for pregnant women at their first prenatal visit
Human Immunodeficiency Virus (HIV)	Screening and counseling for sexually active women
Human Papillomavirus (HPV) DNA Test	High risk HPV DNA testing every three years for women with normal cytology results who are 30 or older
Osteoporosis	Screening for women over age 60 depending on risk factors
Rh Incompatibility	Screening for all pregnant women and follow-up testing for women at a higher risk
Tobacco Use	Screening and interventions for all women, and expanded counseling for pregnant tobacco users
Sexually Transmitted Infections (STI)	Counseling for sexually active women
Syphilis	Screening for all pregnant women or other women at increased risk
Well-Woman Visits	To obtain recommended Preventive services for women under 65

## MINIMUM ESSENTIAL COVERAGE BENEFITS AT A GLANCE

### ACA Required Wellness and Preventive Benefits

#### Children

The MEC Plan covers 100% of the allowed amount in network; 40% out of network

Alcohol and Drug Use	Assessments for adolescents
Autism	Screening for children at 18 and 24 months
Behavioral	Assessments for children of all ages: 0-11 months; 1 to 4 years; 5 to 10 years; 11 to 14 years; 15 to 17 years
Blood Pressure	Screenings for children: 0-11 months; 1 to 4 years; 5 to 10 years; 11 to 14 yers; 15 to 17 years
Cervical Dysplasia	Screening for sexually active females
Congenital Hypothyroidism	Screening for newborns
Depression	Screening for adolescents
Developmental	Screening for children under age 3, and surveillance throughout childhood
Dyslipidemia	Screening for children at higher risk of lipid disorders. Ages: 1 to 4 years; 5 to 10 years; 11 to 14 years; and 15 to 17 years
Fluoride Chemoprevention	Supplements for children without fluoride in their water source
Gonorrhea	Preventive medication for the eyes of all newborns
Hearing	Screening for all newborns
Height, Weight, and Body Mass Index	Measurements for children ages: 0-11 months; 1 to 4 years; 5 to 10 years; 11 to 14 years; 15 to 17 years
Hematocrit or Hemoglobin	Screening for children
Hemoglobinopathies	Or Sickle Cell screening for newborns
HIV	Screening for adolescents at higher risk
Immunization	Vaccines for children from birth to age 18-- doses, recommended ages, and recommended populations vary: Diphtheria, Tetanus, Pertussis, Haemophilus Influenzae Type B, Hepatitis A, Hepatitis B, Human Papillomavirus, Inactivated Poliovirus, Influenza (Flu Shot), Measles, Mumps, Rubella, Meningococcal, Pneumococcal, Rotavirus, Varicella
Iron	Supplements for children ages 6 to 12 months at risk for anemia
Lead	Screening for children at risk of exposure
Medical History	For all children throughout development: Ages: 0-11 months; 1 to 4 years; 5 to 10 years; 11 to 14 years; 15 to 17 years
Obesity	Screening and counseling
Oral Health	Risk assessment for young children: Ages: 0 to 11 months; 1 to 4 years; 5 to 10 years
Phenylketonuria (PKU)	Screening for this genetic disorder in newborns
Sexually Transmitted Infection (STI)	Prevention counseling and screening for adolescents at higher risk
Tuberculin	Testing for children at higher risk of tuberculosis: Ages 0 to 11 months; 1 to 4 years; 5 to 10 years; 11 to 14 years; and 15 to 17 years
Vision	Screening for all children

#### Monthly Premium

Policy Number **82068000-M-EXP**

Employee Only Monthly Rate	\$32.00
Employee + 1 Monthly Rate	\$48.34
Employee + Family Monthly Rate	\$102.63

# MINIMUM ESSENTIAL COVERAGE (MEC) PLAN FREQUENTLY ASKED QUESTIONS

## **If I enroll in the MEC Plan, can I receive a subsidy on the Exchange?**

**No**, if you enroll into the MEC Plan you will not qualify for a subsidy at the health insurance exchange as this plan will meet the definition of Minimum Essential Coverage. Please DO NOT enroll into the MEC Plan if you wish to obtain or wish to continue receiving Federally subsidized coverage from the health insurance exchange.

## **Does this plan satisfy the Individual Mandate?**

**Yes**, by enrolling into the MEC Plan you will be meeting your Individual Mandate obligations.

## **How do I enroll?**

To enroll, please log on to [www.EssentialStaffCARE.com/ExpressMEC](http://www.EssentialStaffCARE.com/ExpressMEC).

## **When can I enroll in the plan?**

You are able to enroll in the MEC Plan within 30 days of your hire date or during your employer's annual 30 day open enrollment period. If you do not enroll during one of these time periods, you will have to wait until the next annual open enrollment, unless you have a qualifying life event. You have 30 days from the date of the qualifying life event to enroll. In addition, you may request a special enrollment (for yourself, your spouse, and/or eligible dependents) within 60 days (1) of termination of coverage under Medicaid or a State Children's Health Insurance Program (SCHIP), or (2) upon becoming eligible for SCHIP premium assistance under this medical benefit.

## **What is a qualifying life event?**

A qualifying life event is defined as a change in your status due to one of the following:

- Marriage or divorce
- Birth or adoption of a child(ren)
- Termination
- Death of an immediate family member
- Medicare entitlement
- Employer bankruptcy
- Loss of dependent status
- Loss of prior coverage

If you experience a qualifying life event, you must submit documentation of the event along with a change form requesting the change within 30 days of the event.

## **When does coverage begin?**

Coverage begins the 1st of the month following receipt of your first monthly payment. **Once you receive your first paycheck with Express Employment Professionals, you will receive information in the mail with further instructions on how to set up payment, if you have completed enrollment.**

## **When does coverage end?**

Your coverage will end if premiums are not paid, or after 13 consecutive weeks without a paycheck. COBRA information will be sent at that time.

## **Does this plan cover medical services?**

This plan is in compliance with ACA rules and regulations. It covers wellness and preventive services only.

## **Are dependents covered?**

Yes. Eligible dependents include your spouse and your children up to age 26.

## **Is there a pre-existing clause for the MEC Plan?**

There are no restrictions for pre-existing conditions in this plan. Even if you were previously diagnosed with a condition, you can receive coverage for related services as soon as your coverage goes into effect.

## **When should I expect an ID card?**

An ID card and confirmation of coverage letter will be mailed to your home address. If you do not receive these documents within 10 business days of your effective date, or if you have a change of address, please contact the Essential StaffCARE Customer Service at 866-798-0803. Present your ID card to the provider at the time of service. These ID cards are used for identification purposes and providers use them to verify eligibility status.

## **How can I make changes or enroll if I initially declined?**

To make changes or enroll if you initially declined, contact customer service. Changes are effective the 1st of the month following the date of the change request. You can cancel or reduce coverage at any time. Please remember that you may only enroll or add additional insured members during an open enrollment period or within 30 days of a qualifying life event.