Connections PPO

Group Health Cooperative of South Central Wisconsin

2026 Member Reference Guide

Oregon School District



BETTER TOGETHER℠

Group Health Cooperative
of South Central Wisconsin

ghcscw.com

WELCOME

to Group Health Cooperative of South Central Wisconsin (GHC-SCW)!

Thank you for choosing GHC-SCW as your health care provider.



Get Started!

To get the best care possible, we encourage you to take these quick steps!

1. **Activate your online GHCMyChart℠ account**

   Schedule appointments, refill your prescriptions, view select test results and more! Visit **ghcscw.com/ghcmychart to get started.**

2. **Transition your care.**

   If you're coming to us from a different health care organization, we want to help make your transition as seamless as possible. Visit **ghcscw.com/for-members/transition-your-care**. You'll want to complete a Transition of Care form and transfer existing:

   - Medical records so we can better understand your medical history.
   - Specialty care treatment so we can help provide continuity of your care.
   - Medications so we can help you avoid gaps in your medication regimen.

3. **Choose your Primary Care Provider (PCP).**

   To view our PCPs, visit **ghcscw.com** and select, "Find a Provider."

LGBTQIA+ Primary Care Services

GHC-SCW understands and values the importance of care in an environment that is both safe and welcoming. We are committed to providing patient-centered primary care to our LGBTQIA+ members. **Learn more at ghcscw.com/lgbtqia-members.**

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Connect With Us

As a GHC-SCW member-owner, you play an active role in your health care, so it's important that you stay up-to-date on what's happening in your Cooperative. And as a non-profit, we're focused on green initiatives that better our community which means connecting and communicating with you online. **Stay connected and help us go paperless!**

- **Sign-up today at ghcscw.com/ghcmychart** to receive our member newsletter, HouseCall, and our regular electronic member communications.
- **Follow us on Facebook, LinkedIn and X** to get the most up-to-date information as it happens!
- **Visit our website at ghcscw.com** for more information about the services and care we offer.

QUESTIONS? Call Member Services at **(608) 828-4853** or toll-free at **(800) 605-4327**.

Group Health Cooperative of South Central Wisconsin (GHC-SCW)

YOUR LOCAL, NON-PROFIT, MEMBER-OWNED, HEALTH CARE COOPERATIVE



GHC-SCW isn't your standard health care company. We exist to serve our members, and we value our Cooperative spirit. We pioneered the HMO movement as Dane County's first HMO, and today we are a nationally-recognized leader in health care with a history of many other trailblazing firsts. We provide the entire spectrum of managed health care services, including insurance, primary care and select specialty care, in five Madison-area clinics. From our commitment to a non-profit, member-owned Cooperative care model to the investments made in the benefits and the well-being of our employees, we believe in the culture of exceptional care.

Our Mission

We partner with members and the communities we serve to maximize health and well-being.

Our Vision

As a local, non-profit, member-owned Cooperative, we are the most trusted resource for lifelong health and well-being in the communities we serve.

Our Values

Our Values are a set of beliefs which we hold dear that help us identify priorities for the Cooperative and as well as a guide for how we conduct our business.

- We are a non-profit Cooperative
- We are member-centered
- We are equitable and inclusive
- We are quality-driven
- We are innovative
- We are community involved

Our Beliefs

In the ever-changing health care landscape we are committed to diversity, inclusion and equity.

- We believe health care is a human right.
- We believe in treating all people with dignity and respect.
- We believe there is strength in diversity.
- We believe equity celebrates our humanity.

Our Commitment to Excellence

GHC-SCW gives you the power to decide if your experience was worth what you paid. The **GHC Experience Guarantee℠** is a promise that every patient and member gets the best experience every time. If you have an experience that fails to meet your expectations, GHC-SCW will refund some or all of your out-of-pocket costs associated with the visit. For more information, visit **ghcscw.com/experience-guarantee**.

Learn more at **ghcscw.com**

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ghcscw.com

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK22-79-2(4.24)FL

Connections PPO Network

Welcome to GHC-SCW! You have chosen a Connections PPO plan.



At GHC-SCW, we partner with HealthEOS and Private Healthcare Systems (PHCS) to provide you with a selection of providers and hospitals throughout the United States.

HealthEOS is a health care cost management company with over 18,000 health care providers throughout Wisconsin and over 450,000 plan participants nationwide. HealthEOS is the primary network if you live in Wisconsin.

PHCS is the parent company of HealthEOS and is one of the largest preferred provider networks in the country. PHCS is the primary network if you reside outside of Wisconsin.

Choose a Provider

Visit **ghcscw.com** and select "Find a Provider" at the top of the page, then "Provider" from the menu. Then select, "Connections PPO" from the drop down menu and click "View Provider Results. Then select "Search Claritev's Multiplan Site". This will take you to the Connections PPO Provider Portal on the MultiPlan website where you can view and choose from available providers.

Specialty Care

If you need specialty care, you may visit any in-network preferred Specialty Care Provider. To verify that the specialist is an in-network preferred Specialty Care Provider, use the Connections Provider Portal to search by name or location.

Emergency Care

In the event of a life-threatening emergency, visit one of the hospital emergency rooms participating in the Preferred Provider Network. If that is not possible, proceed immediately to the nearest hospital emergency room. In both situations, contact the GHC-SCW Care Management Department at (608) 257-5294 or toll-free at (800) 605-4327, and request Care Management within 48 hours of receiving emergency services or as soon thereafter as reasonably possible.

Prior Authorization

Check your Benefits Summary and Member Certificate to see if you need prior authorization for upcoming services.

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Group Health Cooperative of South Central Wisconsin

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK18-106-5(10.24)FL

Group Health Cooperative
of South Central Wisconsin

FOR QUESTIONS ABOUT WHAT IS COVERED UNDER YOUR CONNECTIONS PPO INSURANCE BENEFIT,
call GHC-SCW Member Services at (608) 828-4853 or toll-free at (800) 605-4327.

Connections PPO Frequently Asked Questions

What is covered and included in Connections PPO?

Connections PPO includes the facilities, providers and suppliers that GHC-SCW has contracted with to provide health care services. GHC-SCW has partnered with HealthEOS and Private Healthcare Systems (PHCS) to provide you with a selection of providers and hospitals throughout the United States.

What is an in-network provider?

An in-network provider is a GHC-SCW clinic provider, a HealthEOS provider for those members who live in Wisconsin or a PHCS provider for those members who live outside of Wisconsin. Providers must be accessed appropriately depending on where you live and where you may be traveling.

Who is a preferred Specialty Care Provider?

Examples include, but are not limited to, orthopedists, cardiologists, pulmonologists, oncologists and gynecologists.

What if I need care while traveling?

If you need medical care while traveling or you are a dependent who lives away from home, use the PPO Provider Portal to find a nearby provider. If you have questions regarding the provider networks, contact PCHS at (800) 922-4362 or HealthEOS at (800) 279-9776 to verify further or nominate the provider.

Be sure to contact GHC-SCW before receiving care only if it is for a service that requires prior authorization. Please note that if the provider does not participate in our networks, your out-of-pocket costs may be greater.

Why should I choose an in-network provider?

When you use in-network providers, you may have fewer out-of-pocket costs. If you receive services from an out-of-network provider, your out-of-pocket costs will most likely be greater.

Am I required to pay at the time of service?

If your plan requires a copayment, you may be asked to pay this amount at the time of your visit. If you choose an out-of-network provider, you may be required to pay in full at the time of service.

How do I submit claims?

When you visit an in-network provider, claims will be forwarded to the Preferred Provider Network. If you choose to see an out-of-network provider, you may be required to pay at the time of service and submit the claims to the Preferred Provider Network yourself.

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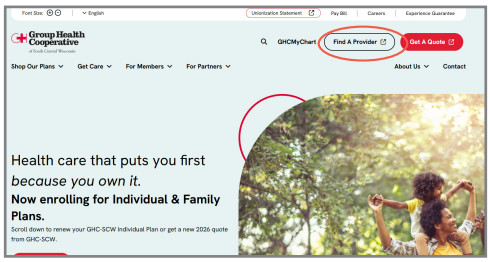
WELCOME TO GHC-SCW

Your Guide to Finding a Connections PPO Provider

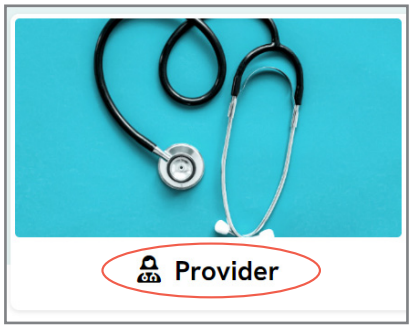


You can check to see whether your current provider is a Connections PPO provider partner using the **Connections PPO Provider Portal**. Below is a guide to help you through each step of the process.

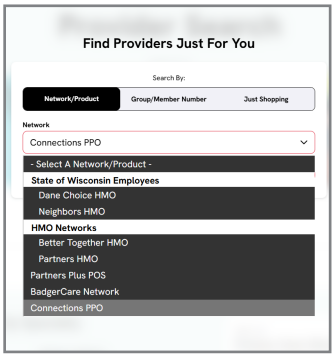
1. Visit ghcscw.com. Click the "Find A Provider" button.



2. Click on the blue "Provider" button.



3. Select Connections PPO from the drop down menu and click "View Provider Results."

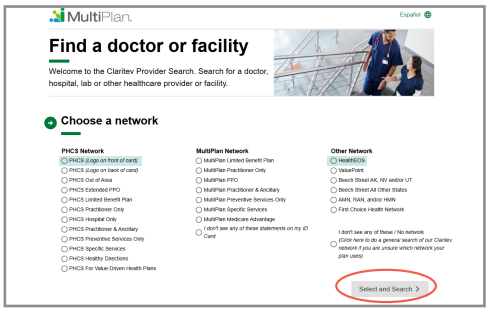


Our GHC Connections network have a larger network of In-Network Clinics and Providers handled by Claritev's MultiPlan.

To search for providers or clinics that are in your network, please do your search on Claritev's MultiPlan. If you have any questions please call us at (800) 605-4327 or contact us.

Search Claritev's Multiplan Site

5. Select your PPO Network and click, "Select and Search." Select the network name. Once you've made your selection, follow the prompts on the next few screens.



You can find your PPO Network listed on the front of your member ID card. Disregard the website's request for the logo on the back of your card.

HealthEOS

GHC-SCW members who reside in the state of Wisconsin should select the HealthEOS Network.

PHCS

GHC-SCW members who reside in the state of Wisconsin and will be traveling outside of the state should select the PHCS Network to find a list of in-network providers.

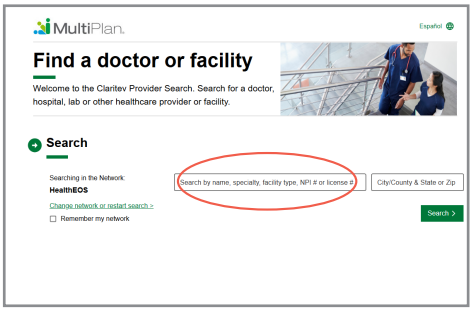
PHCS

GHC-SCW members who reside outside the state of Wisconsin should select the PHCS Network.

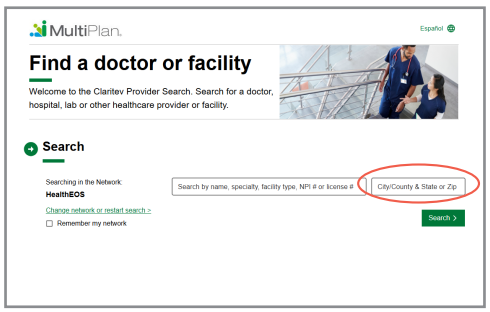
FOR QUESTIONS ABOUT WHAT IS COVERED UNDER YOUR CONNECTIONS PPO INSURANCE BENEFIT, call GHC-SCW Member Services at (608) 828-4853 or toll-free at (800) 605-4327.

Your Guide to the PPO Provider Portal

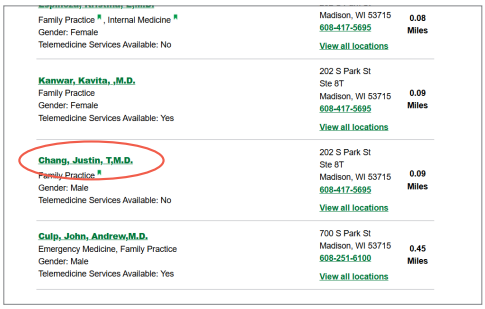
6. **Refine your search** by entering a provider specialty, provider name, facility name, type of facility, National Provider Identifier (NPI) number or license #.



7. **Set your location** by entering the city/county and state or zip code of the area you want to search. By default, the search pulls results within 20 miles of the zip code you enter.



8. **Acknowledge reading another notice.** After you click "**Search**," your search results will appear. To narrow your results, apply filters including gender, languages spoken, hospital affiliation, whether the provider is accepting new patients and wait time for appointments.



Example of the front of a HealthEOS PPO ID card

Group Health Cooperative of South Central Wisconsin | HealthEOS | ghcscw.com

Network: WIN003
Product: Connections PPO
Group #: XXXXXXX
Eff. Date: MM/DD/YYYY

BENEFIT INFORMATION

MEMBER	MBR #	CLINIC LOCATION
JOHN Q MEMBER	201010	PPO Plan Provider
JANE Q MEMBER	201011	PPO Plan Provider
JAKE Q MEMBER	201012	PPO Plan Provider
JILL Q MEMBER	201013	PPO Plan Provider
JACK Q MEMBER	201014	PPO Plan Provider

OV: XX ER: XX Rx Tiers: XX/XX/XX/XX
In-Network Deductible: Indiv XX Fam XX Out-of-Network Deductible: Indiv XX Fam XX
In-Network Maximum Out-of-Pocket: Indiv XX Fam XX
Out-of-Network Maximum Out-of-Pocket: Indiv XX Fam XX

Example of the front of a PHCS PPO ID card

Group Health Cooperative of South Central Wisconsin | PHCS | ghcscw.com

Network: WIN003
Product: Connections PPO
Group #: XXXXXXX
Eff. Date: MM/DD/YYYY

BENEFIT INFORMATION

MEMBER	MBR #	CLINIC LOCATION
JOHN Q MEMBER	201010	PPO Plan Provider
JANE Q MEMBER	201011	PPO Plan Provider
JAKE Q MEMBER	201012	PPO Plan Provider
JILL Q MEMBER	201013	PPO Plan Provider
JACK Q MEMBER	201014	PPO Plan Provider

OV: XX ER: XX Rx Tiers: XX/XX/XX/XX
In-Network Deductible: Indiv XX Fam XX Out-of-Network Deductible: Indiv XX Fam XX
In-Network Maximum Out-of-Pocket: Indiv XX Fam XX
Out-of-Network Maximum Out-of-Pocket: Indiv XX Fam XX

If your provider is not listed or if you have additional questions regarding the provider networks, contact PHCS at (800) 922-4362 or HealthEOS at (800) 279-9776 to verify further or nominate the provider.

BETTER TOGETHER℠

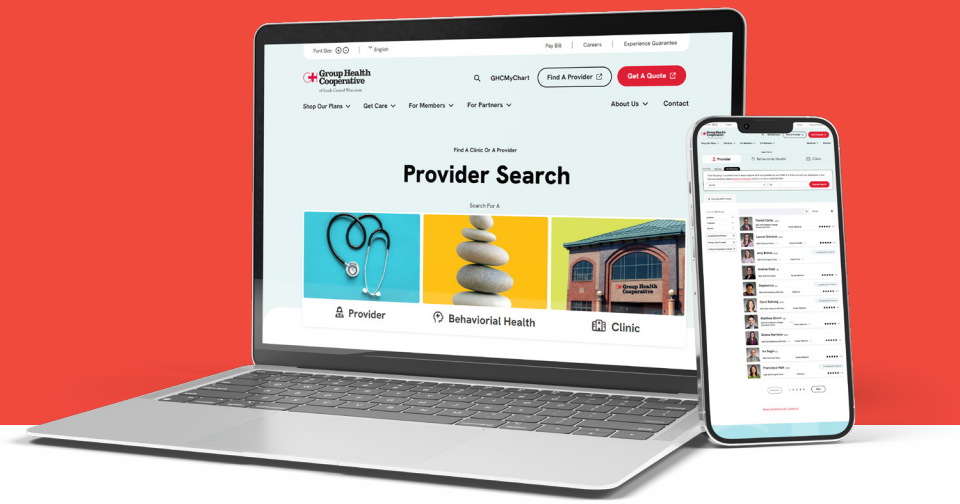
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"FIND A PROVIDER" SEARCH TOOL

DISCOVER THE PERFECT PROVIDER FOR YOUR UNIQUE HEALTH CARE NEEDS



Welcome to a seamless way to find your ideal health care provider! Our "Find a Provider" search tool, available on both our website and mobile devices, is designed to help you quickly and easily connect with the right health care professional for you and your family.

Key Features:

User-Friendly Experience: Our search tool offers streamlined and intuitive functionality, making it simple to search by provider name, specialty, location or even specific services.

Comprehensive Provider Information: Access detailed profiles including credentials, specializations, office locations, languages spoken, patient ratings, appointment availability and more.

Personalized Search Filters: Easily filter providers based on your preferences, including proximity to your home or workplace, provider gender, availability, specialty and more.

Convenient Provider Requests: Save time by submitting a GHC-SCW Primary Care Provider change request directly through the site - no phone calls or extra steps required!

Instant Access Anytime, Anywhere: Whether you're at home, at work or on the go, you can find a provider or clinic at your fingertips using our mobile-friendly tool.

Why Choose GHC-SCW?

Our commitment to your health goes beyond providing excellent care. With our new search tool, we empower you to make informed choices about your health care in a way that's convenient, accessible and tailored to your needs.

Visit **ghcscw.com** to learn more and start your provider search today!

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Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK24-113-1(8.25)FL

Group Health Cooperative
of South Central Wisconsin

GET CARE

Specialty and Ancillary Services at GHC-SCW

GHC-SCW members have access to outstanding specialty and ancillary services at our GHC-SCW-owned and operated clinics.

Eye Care

GHC-SCW optometry schedules are open at least 12 months in advance, so contact them early to get a time that fits your schedule. **Make an appointment through GHCMyChart℠ or call (608) 257-7328.**

Physical and Occupational Therapy (PT/OT)

Our PT and OT staff work directly with your PCP to make sure you're receiving comprehensive treatment for your injury or condition. **Call (608) 662-5060 to schedule a standard PT/OT appointment or an Urgent Care PT/OT appointment.**

Dermatology

Dermatologists provide full-spectrum care including diagnosis, treatment, skin biopsies and light therapy in addition to treating conditions of the hair, nails and scalp. **Call your primary care clinic or (608) 661-7200 to schedule an appointment.**

Sports Medicine

Sports medicine providers care for active people, athletes and individuals with non-operative musculoskeletal conditions, as well as ongoing care of acute and overuse injuries. Treatment includes medical and injection therapies and collaboration with PT/OT. **Call your primary care clinic or (608) 661-7200 to schedule an appointment.**

Behavioral Health

We offer a full range of behavioral health and addiction services for children, adolescents and adults. Members have access to both GHC-SCW behavioral health providers and contracted providers in our community. Members can schedule with GHC-SCW outpatient behavioral health providers directly, without a referral, by contacting our behavioral health call center at **(608) 441-3290**. They can also visit our behavioral health page on **ghcscw.com** for a comprehensive search engine of behavioral health providers within GHC-SCW clinics and within our contracted network of providers in the community. GHC-SCW contracts with several substance use providers within the community, including UW Health Behavioral Health and Recovery - **(608) 282-8270**. Please use the search engine for a complete list of substance use providers.

Some PCPs prescribe medications for substance use disorders. Please contact your primary care clinic for more information.

For Urgent and Emergency Behavioral Health Crisis

- **Behavioral Health 24/7 Crisis Line:** For immediate help with an urgent mental health crisis, 24-hour crisis intervention services are available for GHC-SCW members.
- **Monday - Friday Business Hours:** If you are experiencing a behavioral health emergency, including thoughts of suicide, **call GHC-SCW at (608) 441-3290 from 8 a.m. - 5 p.m., Monday - Friday.**
- **Nights and Weekends:** For crisis intervention services outside of business hours, call **(608) 257-9700**. You will be assisted by a nurse or an on-call crisis counselor who will help you to address your behavioral health emergency and any safety concerns.
- **PLEASE NOTE:** After-hours behavioral health crisis line **DOES NOT** prescribe medications, cancel or make appointments, send messages to your BH provider or connect you to your BH provider after-hours. For these services, please call during business hours Monday - Friday.

If your situation is immediately life-threatening, please call 911 or safely get yourself to the nearest emergency room.

Chiropractic

GHC-SCW has a team of chiropractors who can work to adjust or realign your spine and help reduce pain and discomfort. You might use chiropractic care if you have back or neck pain, get headaches or even if you have pain in your arms or legs. Talk to your primary care provider to see if chiropractic care is the right choice for you.

Clinical Health Education (CHE)

CHE staff include Diabetes Care Specialists, Dietitians, a Respiratory Educator, a Lactation Consultant, and a Genetic Counselor. CHE helps you learn about your health and how to prevent or manage chronic conditions. CHE Providers may help you create an individualized plan to improve your health, based on credible and easy-to-understand health information.

Understanding Prior Authorization

Prior Authorization is when GHC-SCW gives members prior written approval for coverage. Authorization could be for specified services, treatment, durable medical equipment (DME) or supplies. Prior authorization will determine and authorize payment of:

- The specific type and extent of care, DME or supply that is medically necessary.
- The number of visits or the period of time when you can get the care.
- The name of the provider giving you the service.

Prior Authorization IS NOT:

- A guarantee the service or supply will be covered. Coverage is determined by the member's benefit plan and is subject to Usual and Customary Reimbursement determinations.
- Unlimited, prior authorizations approvals may be limited by visits and/or time span.

Members Responsibilities:

- If you're using a non-participating provider, you are responsible for working with the provider to get all necessary prior authorizations.
- You should log into **GHCMyChart**℠ before your visit to verify that GHC-SCW has approved the request for prior authorization. If you don't have access to **GHCMyChart**℠, you can create an account. Go to **ghcscw.com/ghcmychart** or call Member Services at **(608) 828-4853** or toll-free at **(800) 605-4327**.
- If you're an HMO member using an Out-of-Network provider and you don't get prior authorization, and the requested service or supply is denied, you will be billed.
- If you're an HMO member and a participating provider does not get prior authorization and the requested service or supply is denied, you cannot be billed.

GHC-SCW **no longer requires prior authorization or referrals for new and in-network outpatient Behavioral Health Services.** This includes individual therapy, psychiatry and substance use disorder outpatient services. Other Behavioral Health Services may require prior authorization.

A list of services requiring prior authorization can be found on our website at **ghcscw.com/prior-authorization**



QUESTIONS? Call Member Services at **(608) 828-4853** or toll-free at **(800) 605-4327**.

GHC-SCW Pharmacy and Benefits



Capitol Clinic Pharmacy
675 West Washington Ave
Madison, WI 53703

(608) 257-9732

Monday – Friday: 8 a.m. – 6 p.m.
Saturday - Sunday: 9 a.m. – 5 p.m.

Hatchery Hill Clinic Pharmacy
3051 Cahill Main
Fitchburg, WI 53711

(608) 661-7242

Monday – Friday: 9 a.m. – 5:30 p.m.

Sauk Trails Clinic Pharmacy
8202 Excelsior Drive
Madison, WI 53719

(608) 257-4869

Monday – Friday: 8 a.m. – 5:30 p.m.

Call Sauk Trails Clinic Pharmacy for information on Free Mail Prescription Mail Delivery

Navitus Health Solutions administers the pharmacy benefit for participants covered under the GHC-SCW prescription plan. GHC-SCW clinic pharmacies are approved Navitus providers and may be used for your prescription needs.

Check your GHC-SCW Benefits Summary to see if prescription drugs are a covered benefit under your health insurance plan.

The GHC-SCW pharmacy network includes non-GHC-SCW retail locations.

For a list of other pharmacies in the GHC-SCW network, check out **"Understanding Pharmacy Benefits"** under the **"For Members"** section on **ghcscw.com**. The network includes Costco, Hy-Vee, Walmart and Walgreens locations. CVS pharmacies are not a part of the GHC-SCW network.

Why Use a GHC-SCW Pharmacy?

- **Saving you money.** Our pharmacies are non-profit, meaning competitive pricing and lower costs for our members overall.
- **Understanding your whole care**. Our pharmacy staff are a part of your care team and work closely with your Primary Care Provider. Refill authorizations are returned quickly to our pharmacies.
- **Being available to you.** Our pharmacy staff are readily accessible and take the time to answer your questions.

Using GHCMyChart℠
Refills are just one click away! Order any time, day or night and avoid extra trips to the pharmacy.

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Group Health Cooperative of South Central Wisconsin (GHC-SCW)
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Group Health Cooperative
of South Central Wisconsin

ghcscw.com

GHC-SCW Pharmacy and Benefits



Other Benefits (Continued)

Prescriptions by Mail

GHC-SCW Pharmacies offer free mail delivery of your prescriptions.

- Conveniently order and pay online via your GHCMyChart℠ account for delivery in Wisconsin.
- Prescriptions will arrive on your doorstep in 3-7 business days depending on U.S. Postal Service volume.
- Certain medications cannot be shipped. This includes refrigerated items, Schedule II medications, injectables and some liquids.

Request mailed prescriptions through your GHCMyChart℠ account!
Please call Sauk Trails Pharmacy at **(608) 831-1773** with any questions.

MedsOnCue

GHC-SCW pharmacies are going paperless with MedsOnCue! This new service uses QR code technology to offer patient-friendly, prescription-specific medication education on demand. You'll get written medication information and educational videos explaining usage, benefits and potential side effects. The program ensures you'll understand how to take your medications safely and reduce avoidable reactions. It also helps GHC-SCW take steps to go green.

Other Important Details

- **Drug Formulary**
  GHC-SCW maintains a list of drugs and certain medical devices covered under the pharmacy benefit. This is known as the Formulary and is updated regularly. Visit **ghcscw.com** for a complete list.

- **Prior Authorizations**
  Medications listed on the Formulary as "PA" (Prior Authorization) and those not listed on the Formulary require submission of additional health information for consideration of coverage.

- **Transfer an Existing Prescription**
  To transfer an existing prescription, please contact your GHC-SCW pharmacy of choice and our pharmacy staff will connect with your previous pharmacy to obtain all necessary information to transfer your prescription.

Group Health Cooperative
of South Central Wisconsin

Member-Owner Rewards

2026



MAXIMIZE your
GHC-SCW MEMBERSHIP
with this **EXCLUSIVE**
package of rewards



BETTER TOGETHER℠

Member-Owner Rewards

Welcome to the GHC-SCW Member-Owner Rewards (MOR) program, where we prioritize your well-being and empowerment. This program is crafted with convenience, flexibility and exclusive savings in mind.

Think of MOR as a way for you to customize your path to health and enhance your holistic health journey. With no extra sign-up hassles, your GHC-SCW membership card is all you need to take advantage of these services and benefits.

Beyond the tangible benefits, belonging to a cooperative offers something even more powerful: **a voice and a vote in how your health plan is managed.**

Let's start with that foundation:

- **Quick-Access Virtual Care Options through GHC Care OnDemand:**

  We know you're busy and don't want you to wait to get care. Beyond the traditional exam room, GHC-SCW gives Member-Owners fast and convenient options like:

  - GHCNurseConnect
  - GHCMyChart℠ Video Visits
  - Virtual Therapy *powered by MDLIVE®*
  - E-Visits *powered by KeyCare*
  - Virtual Urgent Care *powered by KeyCare*

- **GHCMyChart℠ and the Mobile GHCMyChart℠ App:**

  Wherever you go, your secure health information and direct access* to GHC-SCW providers are right there with you.

- **Our Exclusive Experience Guarantee:**

  You have a right to expect a great experience when you visit your GHC-SCW clinic. And if we fail to live up to that expectation, you shouldn't pay for that visit. Visit **ghcscw.com/experience-guarantee** to learn more about our money-back GHC Experience Guarantee℠!

- **ManageWell® Rewards**:**

  This online wellness platform includes an entire suite of programs, activities and challenges. Complete healthy activities to earn rewards. Activities include your yearly physical, exercises, step tracking, participating in a Community Supported Agriculture (CSA) share, receiving your annual flu vaccine, creating and completing SMART goals and other ways to protect your health and wellness. Learn more at **ghcscw.com/managewell.**

- **Discounts:**

  Massage Therapy and Acupuncture Discounts: GHC-SCW members get a discount on certain massage therapy and acupuncture services with select partners.

  Eye Care Discounts: Members also get a discount of 20% on retail eye care products such as frames, non-prescription sunglasses, reading glasses, solutions and drops. Members also receive 10% off of a 12-month supply of contacts!

- **Outstanding Member Services:**

  As a Member-Owned, non-profit, health care cooperative, our mission, vision and values are built around providing our members with the best possible experience.

*GHCMyChart message fees may apply.
**The reward program is not available to all members. ManageWell® is not available to those included in the State of Wisconsin Group Health Insurance Program, Federal (FEHB), Individual and Family Plan and BadgerCare Plus members.

Care OnDemand℠

Virtual Care Options



GHC-SCW offers many ways for our members to receive care. We believe health care should be easy to use and there when you need it.

24/7 GHC NurseConnect

GHC NurseConnect is staffed with RNs 24/7/365 to answer your questions and help you plan your next steps.

- Get general care advice for a cough, cold, fever, flu, sore throat and more.
- Address your health-related concerns with a registered nurse (RN).
- Get out-of-area care advice for temporary illnesses or injuries.

Call (608) 661-7350 or toll-free at (855) 661-7350 to speak with a nurse today!

GHCMyChart Video Visits with your GHC-SCW Care Team

With GHCMyChart℠ Video Visits, members can safely visit with health care providers and receive the same exceptional care experienced at a GHC-SCW clinic.*

- Visits are set up using GHCMyChart.
- Schedule an appointment with a GHC-SCW provider for routine and select specialty care (Dermatology, Behavioral Health, or PT/OT).
- Available for preventive and wellness visits.

Call your clinic or log in to GHCMyChart to schedule!

24/7 Virtual Urgent Care *powered by* KeyCare

Virtual Urgent Care *powered by* KeyCare is your 24/7/365 virtual access to licensed providers.

- Live face-to-face access to a provider from your home, office or on-the-go.
- Visit by secure video to help treat certain non-emergency medical conditions.
- Most members receive unlimited, free visits.*

Visit ghcscw.com/keycare for more information or log in to GHCMyChart to schedule!

24/7 E-Visits *powered by* KeyCare

E-Visits *powered by* KeyCare is your 24/7/365 virtual access to licensed providers.

- Connect with a provider electronically from your home, office or on-the-go.
- Send messages and photos for symptom review by a licensed provider to help treat certain non-emergency medical conditions.
- Most members receive unlimited, free visits.*

Visit ghcscw.com/keycare for more information or log in to GHCMyChart to schedule!

24/7 Virtual Therapy *powered by* MDLIVE®

Virtual Therapy *powered by* MDLIVE is your 24/7/365 virtual access to licensed therapists and board-certified psychiatrists.

- Access a therapist from your home, office or on the go.
- Visit either by phone or secure video to help treat any non-emergency mental health condition.
- Most members receive unlimited, free visits.*

Visit ghcscw.com/mdlive for more information or log in to GHCMyChart to schedule!

*Restrictions may apply for BadgerCare Plus and non-member patients. GHCMyChart video visit services are not available to members who are located outside of the state of Wisconsin during the visit. KeyCare E-Visit services are not available to members who are physically located in Mississippi or New Mexico during the visit. Plan conditions may apply HSA benefit plans. Visit ghcscw.com/virtual-care for more details on exclusions.

TOGETHER, BETTER IS POSSIBLE

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK21-4-3(8.25)FL

Group Health Cooperative of South Central Wisconsin

Smart. Secure. Simple. GHCMyChart℠



At GHC-SCW, we believe that collaboration requires open communication. With an online **GHCMyChart℠** account, you have access to smart, secure and simple tools that allow you and your provider to better manage your health, together.

GHCMyChart℠ Features

- Message your provider.*
- Refill medications at GHC-SCW Pharmacies.
- Access multiple MyChart accounts with all your providers and health care organizations.
- View select test results, immunization records and health summaries.
- View and pay your bill.
- View and print your Member ID Card.
- Schedule appointments online.
- Connect to your children's medical and insurance information with GHCFamilyChart℠.
- **And much more!**

GET STARTED!

1. Visit **ghcscw.com/ghcmychart** and select **"Sign Up Now."**
2. Enter your **Activation Code** – or if you don't have one, select **"Request a Code Now"** to receive an activation code via email.
3. Complete the form and follow the prompts.
4. To connect to other organizations, **log in** to your GHCMyChart℠ account, click on the **Menu** button and select **"Link My Accounts".** Search for clinics or hospitals you or your family have visited and created a GHCMyChart℠ account with.

Better health is just a click away with MyCHART℠

Access GHC Care OnDemand Virtual Care Options

Get virtual access to GHC-SCW providers, licensed therapists and board-certified doctors from home or on the go through GHCMyChart℠.

Virtual Therapy *powered by* MDLIVE®: Treat mental health conditions via phone or secure video.

Virtual Urgent Care *powered by* KeyCare: Get medical attention for non-emergency conditions via secure video.

E-Visits *powered by* KeyCare: Licensed providers can help treat non-emergency medical conditions 24/7/365 via messaging.

GHCMyChart℠ Video Visits: Connect with GHC-SCW providers for routine, specialty, preventive and wellness care via secure video.

BETTER TOGETHER℠

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK17-77-8(9.25)F

Restrictions may apply for BadgerCare Plus and non-member patients. Some services may not be available to members who are located outside of the state of Wisconsin during the visit. Plan conditions may apply HSA benefit plans. Visit ghcscw.com/virtual-care for more details on exclusions.

Group Health Cooperative of South Central Wisconsin

ghcscw.com

ManageWell®. Be Well.

Healthy Lifestyle. Healthy Rewards.



GHC-SCW WELLNESS REWARDS PROGRAM*

GHC-SCW is committed to whole person care for our members. That means **HEALTH** and **WELLNESS**. We have teamed up with ManageWell® to give members access to an exciting platform to manage wellness.

- Earn points. Earn rewards.
- Free app and fully online.
- Fun, engaging activities and challenges.
- Customizable to you and your health goals.
- Access to Mayo Clinic's health information library.
- Points refreshed every quarter.

ManageWell®

Earn Points. Earn Rewards.

- Fitness
- Nutrition
- Activity Trackers
- Stress Reduction
- Weight Management
- Healthy Living
- Challenges

Learn more at **ghcscw.com/managewell.**

Please check your member materials or call Member Services at **(608) 828-4853** or **(800) 605-4327** to verify eligibility.

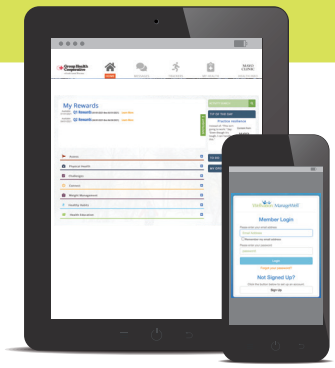
*The reward program is not available to all members. ManageWell® is not available to those included in the State of Wisconsin Group Health Insurance Program, Federal (FEHB), Individual and Family Plan and BadgerCare Plus members.

ManageWell® Points

ACTIVITY	POINTS
ACCESS	
Health Assessment	20/one time per year
PHYSICAL HEALTH	
Exercise Tracker - 150 minutes per week	5/max 65 per quarter
Exercise Tracker - 180 minutes per week	1/max 13 per quarter
Exercise Tracker - 210 minutes per week	1/max 13 per quarter
Annual Physical/Medicare Physical/Postpartum Visit	50/one time per year
Flu Shot	20/one time per year
Dental Cleaning	25/one time per year
Learn Where to Go For the Right Care	5/once indefinitely
Advance Directive Shared With Care Provider	25/once indefinitely
Learn More About GHC-SCW Offerings	5/once per quarter
CHALLENGES	
Healthy Program	20/one time per year
Mini Challenges	5 per challenge/max 15 per quarter
Bingo	5 per completion/max 15 per quarter
CONNECTIONS	
Register for GHCMyChart℠	5/once indefinitely
Register for KeyCare	5/once indefinitely
Blood or Plasma Donation	10/once per quarter
Volunteer Your Time	10/once per quarter
Verify Current Contact Information	5/once indefinitely
Verify Demographics	5/once indefinitely
WEIGHT MANAGEMENT	
Weight Watchers (WW) or Noom	5 per month/max 15 per quarter
HEALTHY HABITS	
8,000 steps per day	1/max 91 per quarter
10,000 steps per day	1/max 91 per quarter
12,000 steps per day	1/max 91 per quarter
Create a S.M.A.R.T. goal	5/once per quarter
Complete a S.M.A.R.T. goal	10/once per quarter
Community Supported Agriculture (CSA)	100/one time per year
Sleep Tracker - 7 sleep hours/5 days a week	1/max 13 per quarter
Try a New Recipe	5/once per quarter
5K Walk or Run Event	10/once per quarter
Calm Premium App	5 per month/max 15 per quarter
HEALTH EDUCATION	
Health Education Visit	10 per visit/max 30 per quarter
News You Can Use	5 per activity/max 15 per quarter
TOBACCO FREE	
Be Tobacco Free Program	25/one time per year triggered by health assessment



Access ManageWell® by desktop, phone or tablet.



Points Earned/ Quarter	Reward Tier	Payout/ Quarter
100-199 points	Tier 1 payout	$20 mailed check*
200+ points	Tier 2 payout	$40 mailed check*

ManageWell® ManageWell® 2.0

Download the ManageWell® 2.0 app or the ManageWell from Wellvation app and start earning rewards.
Bring wellness wherever you go.

*The reward program is not available to all members. ManageWell® is not available to those included in the State of Wisconsin Group Health Insurance Program, Federal (FEHB), Individual and Family Plan and BadgerCare Plus members.

Group Health Cooperative of South Central Wisconsin

ManageWell®



Frequently Asked Questions

GETTING STARTED

Am I eligible to participate?
The GHC-SCW insurance policy holder plus one spouse, life partner or significant other also on the plan may participate in the ManageWell® wellness program.

The reward program is not available to all members. ManageWell® is not available for participants in the State of Wisconsin Group Health Insurance Program, Federal (FEHB), Individual and Family Plan and BadgerCare Plus members. The reward program is not available to dependents.

How do I get started?
Register for a ManageWell® account via the ManageWell® website at managewell.com or via the mobile app for either Android or Apple. The ManageWell® 2.0 app is available in the Apple Store. The ManageWell® from Wellvation app is available in the Google Play Store.

Your ID will be the letters "GHC" followed by your six-digit member number, for example: GHC123456.

Are other languages besides English available in the ManageWell® platform?
Yes. ManageWell has a "Language" section within Settings. In the upper right corner of the site, click on your account circle and select "Settings." Under "Profile" select your preferred language.

POINTS AND REWARDS

How do I earn points?
Points can be earned by completing wellness activities and tracking them through the ManageWell® platform.

How many points do I need to earn a reward?
Each quarter you will need to reach tier one or tier two to earn a reward.

Points Earned/Quarter	Reward	Payout
100-199 points	Tier 1 Payout	$20 mailed check
200+ points	Tier 2 Payout	$40 mailed check

Do points expire?
Yes. Points expire and refresh at the end of each quarter.

What is the payout schedule?
Members will be mailed a check soon after the 90 days following the close of each quarter. See payout schedule below:

Quarter	Dates	Reward Payout Schedule
1	January 1 – March 31	Mid-July
2	April 1 – June 30	Mid-October
3	July 1 – September 30	Mid-January
4	October 1 – December 31	Mid-April

Why is there a delay in the rewards payouts?
Some of the activities in the program are automatically sent to ManageWell® such as claims data. The activities and claims can take time to process which delays the reward payout.

Are these earnings taxable?
Yes. The reward payouts are considered taxable income during the year the payouts are received. The employer that provides GHC-SCW insurance to you may deduct taxes out of your paycheck for you and your insured spouse, life partner or significant other's rewards.

ACTIVITIES

What types of activities are included in the ManageWell® program?
There are a variety of activities included in the ManageWell® program with the hope that participants can find several activities that resonate with them. The platform offers educational activities and challenges. There are preventive activities such as an annual physical and dental cleaning. There is even a way to earn points by tracking exercise, sleep, and steps.

Do I need to submit anything manually to earn points?
Yes. There are five activities that will need documentation to be uploaded in the ManageWell® platform to earn points:

- Participating in a weight management or mindfulness program (e.g., Noom, Weight Watchers (WW) or Calm Premium App).
- Purchasing a vegetable Community Supported Agriculture (CSA) share.
- Receiving a flu shot out of the GHC-SCW network.
- Participating in a 5K walk or run event.
- Participating in a blood or plasma donation.

ManageWell®

Frequently Asked Questions *Continued*

Online submissions of these activities do not automatically earn points. A GHC-SCW employee will need to approve the submitted materials. If the materials do not meet the requirements, no points will be given. A message in the activity will let the participant know why the points for the activity were not approved.

Which activities are automatically submitted?

There are several activities that will automatically be submitted to the ManageWell® platform:

- Completion of an annual physical, Medicare Annual Wellness visit or a postpartum visit (only one visit will earn points one time per year)
- Billed in-network health education visits (asthma, diabetes and nutrition)
- In-network flu shots

Please note that these activities do not go into the platform right after they are completed. There is a delay in earning points because of claims processing.

Will my gym membership or gym visits count toward points?

Gym memberships and visits do not count toward points. You may accumulate points while at the gym by connecting or linking a qualifying fitness tracker and syncing your exercise minutes and/or steps to the ManageWell® platform.

How do I get points for the "Be Tobacco Free" program?

After completing the Health Assessment, found in the Assess activity tab, if you indicated you use tobacco, in ManageWell you will see an activity tab labeled "Tobacco Free". Within that category will be an activity called "Be Tobacco Free", which has four modules to guide you through making a successful quit attempt.

TRACKER INFORMATION

How do I connect my fitness devices to ManageWell®?

Once you have your fitness devices set up per the manufacturer's directions, connecting them to your ManageWell® account is simple.

Please note: You must link your chosen device (i.e., Garmin) to each individual activity tracker (exercise, sleep and/or steps) to earn points for each activity.

Which fitness devices sync (exercise, sleep, steps) with ManageWell®?

Please see the chart on the top of the page to see which devices sync with ManageWell®.

Fitness Device	Exercise	Sleep	Steps
Apple Health	✓	✓	✓
Fitbit	✓	✓	✓
Garmin	✓	✓	✓
Google Fit	✓	✓	✓
Oura Ring	✓	✓	✓
Polar			✓
Strava	✓		
Under Armour MapMyFitness	✓		
Withings/Nokia	✓	✓	✓

For Apple Health and Google Fit...

1. Login to the ManageWell® app.
2. Tap on the settings icon in the upper right.
3. Choose "Data Sharing" then turn on any data items you wish to track in ManageWell®.

For all other devices...

1. Login to ManageWell® via www.managewell.com or the ManageWell® app.
2. Click on the menu item labeled "Trackers." This will appear on the left menu of the website or on the bottom menu of the app.
3. Click on the tracker tile of interest, such as "Steps" or "Exercise" or "Sleep".
4. Click on the "Connect a Tracker" button.
5. Choose the brand of fitness device that you have, and then follow the directions that appear next.

How do I avoid gaps in my ManageWell® tracker data?

The ManageWell® qualified fitness device must be registered and synced through ManageWell®. Once the device(s) is connected, the device provider sends ManageWell® data numerous times every day. Every time this occurs, ManageWell® receives the last 10 days of the data.

Synchronization issues may occur and therefore participants are asked to login to ManageWell® at least once every 10 days in case a tracker needs to be reconnected and to avoid any gaps in data.

CONTACT

Who do I contact if I am experiencing technical difficulties with the ManageWell® platform?

In the upper right corner of the site, click on your account circle and select "Help & Feedback." Type your message and hit "Send Request." You may also e-mail wellness@ghcscw.com.

Who do I contact if I have questions about the ManageWell® wellness program?

Call: Member Services at (608) 828-4853 or (800) 605-4327
Email: Wellness@ghcscw.com

Eye Care & Wellness Member Discounts

Studio Z Salon | (608) 221-7888 | studiozmadison.com

Studio Z Salon & Spa is an inviting full-service salon and spa established over 30 years ago. Their team is comprised of nearly 40 talented professionals whose goals are for every guest to leave feeling and looking happier than the moment they arrived.

- Current GHC-SCW members will receive $20 off all 60 or 90 minute massage services.*



Inner Wisdom Acupuncture | innerwisdomacu.com | innerwisdomacu.janeapp.com

Inner Wisdom Acupuncture's deep-rooted passion for holistic health fuels their dedication to each patient. At their clinic, your well-being is their top priority, guiding them to craft individualized treatment plans that suit your unique needs.

- Current GHC-SCW members will receive $10 off acupuncture (initial & follow-up services).*



Dane County Family Acupuncture | (608) 222-0250 | danecountyfamilyacupuncture.com

Dane County Family Acupuncture, established in 2010, is a premier, full-service acupuncture and traditional Chinese medicine clinic. They are located in Monona, WI and serve Madison, WI and the greater Dane County area.

- Current GHC-SCW members will receive $15 off an Initial Acupuncture Visit and $10 off a Return Acupuncture Visit.

GHC-SCW Eye Care Center | (608) 257-7328 | ghcscw.com/eye-care

Our expert staff at the GHC-SCW Eye Care Center take the time to help you and your family select the perfect frames and lenses to fit any lifestyle and budget.

- GHC-SCW members get a discount of 20% on retail eye care products such as frames, non-prescription sunglasses, reading glasses, solutions and drops. Members also receive 10% off of a 12-month supply of contacts!

*GHC-SCW members will need to show their current GHC-SCW insurance card in order to receive their discount.

Outstanding Member Services

As a Member-Owned, non-profit, health care Cooperative, our mission, vision and values are built around providing our members with the best possible experience. That means making sure our members have access to the information and resources they need to navigate the complex world of health insurance and health care.

Our Member Services department is always here to help!
For questions, call **(608) 828-4853** or **toll-free at (800) 605-4327** and request Member Services.

Our Values are a set of beliefs that we hold dear that help us identify priorities for the Cooperative as well as a guide for how we conduct our business.

- We are a non-profit Cooperative
- We are member-centered
- We are equitable and inclusive
- We are quality-driven
- We are innovative
- We are community involved

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK22-114-5(8.24)FL

Important Contact Information

GHC-SCW Member Services

Our Member Services team can help you with questions or concerns about your medical care and insurance coverage. **Call (608) 828-4853 or toll-free at (800) 605-4327 and request Member Services.**

- **Email:** member_services@ghcscw.com
- **En Español:** (855) 243-8454
- **Interpreter Services:** (608) 661-7215

Care Management

Questions regarding prior authorizations, care coordination, continuation of care and case management services should be directed to the GHC-SCW Care Management Department. The GHC-SCW Care Management department should also be contacted within 48 hours of emergency services. **Call the GHC-SCW Care Management department at (608) 257-5294.**

Claims

Claims or unpaid bills should be directed to the GHC-SCW Claims department. Bills for services provided can be mailed to the GHC-SCW Administrative Office. Please include your member number. **Call the GHC-SCW Claims department at (608) 251-4526.**

Enrollment

Questions about the status of a submitted application or requests for an identification card should be directed to the GHC-SCW Enrollment department. **Call the GHC-SCW Enrollment department at (608) 260-3170.**

Patient Financial Coordinator

The Patient Financial Coordinator can help you estimate out-of-pocket costs for services rendered at GHC-SCW clinics based on your individual insurance plan. **Email pfc@ghcscw.com or call (608) 662-4990.**

Privacy

We promise you that GHC-SCW staff is committed to protecting the privacy and security of your health information. **For questions related to privacy, call the Ethics and Fraud Reporting Hotline at (844) 480-0055.**

Administrative Offices

1265 John Q. Hammons Drive
Madison, WI 53717-1962
Phone: (608) 251-4156

Medical Billing

Questions about medical bills or unpaid bills for services rendered at one of our GHC-SCW Clinics, questions about subrogation claims and questions about workers compensation claims should be directed to our medical billing department. Bills for services provided can be mailed to the GHC-SCW Administrative Office. Please include your member number. **Call GHC-SCW Medical Billing at (608) 251-4138.**

Premium Billing

For premium billing questions for individual or group plans, call (608) 251-4156 x4587.

QUESTIONS? Call Member Services at **(608) 828-4853** or toll-free at **(800) 605-4327**.

GHC-SCW Transition of Care

Transition of Care FAQ

1. What is Transition of Care (TOC)?

Transition of Care may apply if you are currently under the active treatment of a specialist. Examples include:

- Having an appointment, surgery, procedure, infusion or imaging already scheduled within the first 90 days of starting GHC-SCW coverage
- Being pregnant
- Using durable medical equipment
- Taking prescribed medications

Active treatment is defined as being seen by a specialist at least twice within the three months prior to starting GHC-SCW coverage. Annual visits with out-of-network specialists do not qualify, as they are not considered active treatment.
All services must be a covered benefit and meet eligibility criteria. Transition of Care services are not guaranteed.

2. Can I see my out of network Primary Care Provider (PCP) one last time?

No. The TOC program applies only to specialists when you are in active treatment. Primary care visits do not qualify for Transition of Care.

3. How do I start the TOC process?

Complete a Transition of Care form for each person needing assistance. You can:

- Submit the form online.
- Download and upload the PDF form.
- Fax the completed form to (608) 733-6316.
- Mail the completed form to:
  GHC-SCW Care Management
  1265 John Q Hammons Drive
  Madison, WI 53717

Submitting the form before your coverage starts allows the Transition Team to review it and contact you promptly.

4. How do I select or change my Primary Care Provider (PCP)?

If you didn't choose a PCP during enrollment, GHC-SCW may assign one based on where you live. You can change your PCP at any time by calling Member Services at (608) 828-4853.

To explore available providers, visit the **Find a Provider search tool**, select your network and browse options.

5. How do I know if my specialist is in-network or if I need a referral?

Contact Member Services at (608) 828-4853 or (800) 605-4327. They can confirm whether your specialist is in-network, explain covered services and discuss costs like co-pays and coinsurance.

6. I'm pregnant. Can I keep my current OBGYN provider?

If you are less than 28 weeks pregnant when your coverage starts, you will need to transition to an in-network OBGYN.

If you are 28 weeks or more pregnant when coverage starts, you may continue seeing your current OBGYN and deliver at your current hospital.

7. I see a behavioral health counselor. Can I keep seeing them?
To check if your behavioral health or substance-use provider is in-network, use the Behavioral Health provider directory. If your provider is out-of-network, transitional visits may be approved for the first 90 days of coverage.

8. Will my Durable Medical Equipment (DME) or supplies be covered?
CPAP/BiPAP: If you have completed more than half of a rental period (7 of 12 months), you may continue with your current out-of-network supplier until the rental is finished. Other DME and supplies: You should transition to an in-network provider within 90 days. TOC may provide temporary coverage for the first 90 days.

9. I'm due for my next specialty injectable medication. What do I do?
Contact the specialist who orders your medication. They must submit a Prior Authorization (PA) request to GHC-SCW. A list of medications requiring prior authorization can be found here:
https://ghcscw.com/plan-providers/prior-authorization/.

10. I have a surgery scheduled past the 90-day TOC timeframe. What happens?
If the surgery is with an out-of-network provider beyond 90 days of your coverage start, you must schedule it with an in-network provider. If the surgery is with an in-network provider but scheduled after 90 days, your specialist should submit a PA request.

11. I've had surgery and need my post-op visit. What if it's past the 90-day TOC window?
Your first post-op visit is included in a 90-day global fee and will not have extra charges. If more than 90 days have passed and your surgeon is out-of-network, you will need to schedule follow-up care with an in-network provider.

12. How do I know what needs Prior Authorization (PA)?
Check the list on our website by **visiting ghcscw.com/prior-authorization**.

13. How does my provider submit a Prior Authorization?
Providers can submit a PA via the GHC-SCW website. They should go to For Partners and then select Prior Authorization.

14. How long does a Prior Authorization take to process?
Once GHC-SCW receives the PA request from your provider, we have up to 15 calendar days to review it. Most requests are processed within one week.

15. How do I transfer my medical records to my new provider?
If both your previous and new providers use EPIC (UW Health, SSM Health, UnityPoint Health-Meriter, Divine Savior, Upland Hills, Fort Healthcare, Mercy Healthcare, Southwest Health, etc.), your new provider can import your records electronically.

If your previous provider doesn't use EPIC, contact that provider's office to request that your records be sent to GHC-SCW.

16. What other steps should I take when transitioning my care?
Get enough medication refills before switching to GHC-SCW to avoid gaps in treatment.

Schedule a new member appointment two weeks after your insurance application is approved. Call Member Services for your member number, then schedule an appointment with your new primary care clinic after your start date.

Register for a GHCMyChart℠ account so you can manage appointments, view lab results, and communicate with your care team.

For additional details and the most up-to-date information, please visit our website: **Transition Your Care**.

TOGETHER, BETTER IS POSSIBLE

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK24-108-1(9.25)

Group Health Cooperative
of South Central Wisconsin

TRANSITION OF CARE

Welcome to Group Health Cooperative of South Central Wisconsin (GHC-SCW). Regardless of the clinic you choose, we are here to assist you with your health care needs during this transition period. To facilitate this, please complete the form below for each person in your family covered by this policy. If you have any questions, please contact the Care Management Department at (608) 257-5294.

Submit the completed form in one of three ways:

1. Save form as a pdf and upload completed form to **ghcscw.com/transition-your-care**
2. Please fax completed forms to **(608) 733-6316**.
3. Forms can also be sent in the mail to: **GHC-SCW Care Management, 1265 John Q Hammons Drive, Madison, WI 53717**.

*For children 18 years and older, a release will be needed to discuss health information with parents.

New Member Name:	**Date of Birth:**
Parent Name (if applicable):	**Date of Birth:**
Phone Number:	**Best Time to Be Reached:**

Signature:_____ Date:_____

Provide details about upcoming visits scheduled within the first 90 days after starting coverage with GHC-SCW. Transition of care visits are not guaranteed. Appointments with PCPs and initial visits with a specialty provider are not eligible for Transition of Care.

Appointment	Date	Specialty	Diagnosis	Specialist Name and Clinic

Do you use any durable medical equipment (ex. CPAP, CGM, infusion pumps, prosthetics, etc.)? Yes No

Do you receive any specialty injectable medications or infusions? Yes No

List the name, dose and prescribing provider of **ALL** prescriptions you currently use. Our pharmacy staff will review your list and contact you if there are any potential coverage issues.

Medication	Dose	Prescribing Provider

TOGETHER, BETTER IS POSSIBLE

Group Health Cooperative
of South Central Wisconsin
ghcscw.com

Connections PPO Benefit Summaries

Group Health Cooperative of South Central Wisconsin

Connections PPO $25 Copayment $500 Deductible $4,600/$2,000 MOOP 100/90

Plan Number: 2603813
Benefits Accumulate on a Plan Year.

Policy Coinsurance
In-Network: 0%
Out-of-Network: 10%

	MEMBER	FAMILY
In-Network Deductible	$500	$1,000
Out-of-Network Deductible	$1,000	$2,000
Medical In-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200
Pharmacy In-Network Maximum Out-of-Pocket (MOOP)	$2,000	$4,000
Out-of-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200

Clinic Services	Prior Auth	You Pay In-Network	You Pay Out-of-Network	Benefit Notes
Primary Care Office Visits	No	$25	10% after Deductible	Example: Office visits with Your Primary Care Provider (PCP)
Chiropractic Office Visits	No	$25	10% after Deductible	
Preventive Health Examinations	No	No Charge	10% after Deductible	Coverage is limited to preventive services as defined by the Affordable Care Act.
Specialist Care Office Visits	No	$25	10% after Deductible	Example: Specialist Hearing Exams
Preventive Immunizations	No	No Charge	10% after Deductible	Coverage is limited to preventive services as defined by the Affordable Care Act.
Prenatal and Postnatal Maternity Care	No	No Charge	10% after Deductible	In-Network cost-sharing value is limited to preventive services. Cost-sharing described elsewhere in this Benefit Summary may apply depending on the maternity-related test or service.
Diagnostic X-Ray and Laboratory Tests	Yes	No Charge after Deductible	10% after Deductible	X-rays and routine lab tests ordered by Your Provider do not require Prior Authorization.
Advanced Radiology	Yes	$150	10% after Deductible	Examples: CT, PET Scans, MRIs
Emergency and Urgent Care	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Urgent Care Visits	No	$25	$25	
Emergency Ambulance Service (air/ground)	No	No Charge after Deductible	No Charge after Deductible	Coverage is limited to emergency care
Emergency Room Visits	No	$100	$100	Coverage is limited to emergency care; Copayment waived if admitted as a hospital inpatient
Prescription Drugs	**Tier**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Outpatient Prescription Drugs on GHC-SCW Formulary Prior Authorizations, quantity limits, step therapy, age restrictions and other limits may apply	Tier 1	$10	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply available for multiple Copays - subject to a maximum cost limit; Some brand names and many generics; Drugs in Tier 1 are the greatest value
	Tier 2	$30	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply available for multiple Copays - subject to a maximum cost limit; Many brand names and some generics
	Tier 3	$60	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply not available; There are often similar or equivalent drugs in either Tier 1 or Tier 2
	Tier 4 (Specialty)	$60	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply not available; May require the use of a specialty-designated pharmacy
The Prescription Drugs Benefit is administered by GHC-SCW Clinic pharmacies and Navitus. Prescription Drugs are NOT COVERED outside of the GHC-SCW network of providers. For a list of formulary drugs, tier ($) placement, prior authorization requirements and other limitations that may apply, see https://www.ghcscw.com.				
Supplies and Equipment	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Diabetic Disposable Supplies	No	20% up to maximum	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Member pays Coinsurance up to $500 maximum

Group Health Cooperative of South Central Wisconsin

Connections PPO $25 Copayment $500 Deductible $4,600/$2,000 MOOP 100/90

Plan Number: 2603813
Benefits Accumulate on a Plan Year.

Policy Coinsurance
In-Network: 0%
Out-of-Network: 10%

	MEMBER	FAMILY
In-Network Deductible	$500	$1,000
Out-of-Network Deductible	$1,000	$2,000
Medical In-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200
Pharmacy In-Network Maximum Out-of-Pocket (MOOP)	$2,000	$4,000
Out-of-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200

Supplies and Equipment	Prior Auth	You Pay In-Network	You Pay Out-of-Network	Benefit Notes
Durable Medical Equipment	Yes	No Charge	10% after Deductible	
Hearing Aids for Members age 18 and over	Yes	No Charge	10% after Deductible	Limited to one hearing aid per ear per 36 months; GHC-SCW designates specific models or other cost limitations may apply
Hearing Aids for children age 17 and under	Yes	No Charge	10% after Deductible	Limited to one hearing aid per ear per 36 months
Cochlear Implants and Bone Anchored Hearing Aids	Yes	No Charge after Deductible	10% after Deductible	
Hospital Services	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Inpatient Hospital Services: Physician Services, Surgery, Facility Fees	Yes	No Charge after Deductible	10% after Deductible	
Outpatient Hospital Surgical/Non-Surgical Services, Facility Fees	Yes	No Charge after Deductible	10% after Deductible	Certain oral surgeries do not require Prior Authorization
Skilled Nursing Facility Services	Yes	No Charge after Deductible	10% after Deductible	Limited to 30 days per inpatient stay per Member
Bariatric Surgery	Yes	No Charge after Deductible	10% after Deductible	
Vision Services	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Vision Examinations	No	No Charge	10% after Deductible	Routine Eye Examinations must be provided by an Optometrist (OD); Limited to one eye exam per Member per year
Mental Health & Substance Use Disorder	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Mental Health/Substance Use Disorder Outpatient Services	No	$25	10% after Deductible	
Mental Health/Substance Use Disorder Inpatient Services	Yes	No Charge after Deductible	10% after Deductible	
Mental Health/Substance Use Disorder Transitional Services	Yes	No Charge after Deductible	10% after Deductible	
Dental Services	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Accidental Dental	No	No Charge after Deductible	10% after Deductible	Initial repair of accidental injury to sound, natural teeth
Oral Surgeries	Yes	No Charge after Deductible	10% after Deductible	Certain oral surgeries do not require Prior Authorization
Additional Services	**Prior Auth**	**You Pay In-Network**	**You Pay Out-of-Network**	**Benefit Notes**
Hospice	Yes	No Charge after Deductible	10% after Deductible	Example: End of Life Services
Home Health Services	Yes	No Charge after Deductible	10% after Deductible	Limited to 60 visits per Member per year
Health Counseling Education	No	No Charge	10% after Deductible	

Group Health Cooperative of South Central Wisconsin

Connections PPO $25 Copayment $500 Deductible $4,600/$2,000 MOOP 100/90

Plan Number: 2603813
Benefits Accumulate on a Plan Year.

Policy Coinsurance
In-Network: 0%
Out-of-Network: 10%

	MEMBER	FAMILY
In-Network Deductible	$500	$1,000
Out-of-Network Deductible	$1,000	$2,000
Medical In-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200
Pharmacy In-Network Maximum Out-of-Pocket (MOOP)	$2,000	$4,000
Out-of-Network Maximum Out-of-Pocket (MOOP)	$4,600	$9,200

Additional Services	Prior Auth	You Pay In-Network	You Pay Out-of-Network	Benefit Notes
Conception Services	No	50% up to maximum	50% up to maximum	Lifetime Benefit maximum payment of $2,000 by GHC-SCW, which is accrued by GHC-SCW paying 50% Coinsurance of the first $4,000 of Conception Services
Speech Therapy	Yes	No Charge after Deductible	10% after Deductible	Includes Rehabilitation and Habilitation Therapy; Limited to 20 visits per therapy per Member per year
Outpatient Habilitation Therapy	Yes	No Charge after Deductible	10% after Deductible	Includes Physical and Occupational Therapy; Limited to 40 combined visits per Member per year; See Certificate for additional information
Cardiac Rehabilitation Therapy	Yes	No Charge after Deductible	10% after Deductible	Limited to 36 visits per Member per year
Outpatient Rehabilitation Therapy	Yes	No Charge after Deductible	10% after Deductible	Includes Physical and Occupational Therapy; Limited to 40 combined visits per Member per year; See Certificate for additional information

Benefit Summary Notes

Prior Authorizations

- Prior Authorization is required for services specified in this Benefit Summary. Prior Authorization does not guarantee that services will be fully covered. Coverage is determined by the terms and conditions of the Certificate. Please refer to your Member Certificate for Benefits that require Prior Authorization. In addition, services and items requiring Prior Authorization are listed on GHC-SCW's website at https://www.ghcscw.com.
- It is the Member's responsibility to ensure a Prior Authorization has been obtained when required. Failure to obtain Prior Authorization when required may result in the Member receiving a reduction in or no Benefit. To obtain Prior Authorization, call (608) 257-5294.

Provider Information

- For Providers see the *"Find a Provider"* link at https://www.ghcscw.com or contact Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504.
- *In-Network Providers:* For a list of In-Network Providers, see the *"Find a Provider"* link at https://www.ghcscw.com or contact Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504.
- *Out-of-Network Providers:* Out-of-Network Providers are any Providers not included in the *"Find a Provider"* link at https://www.ghcscw.com. Out-of-Network coinsurance applies after the deductible has been met. For further assistance, contact Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504. When applicable, Prior Authorization is still required for Out-of-Network services.

GHC-SCW Notices to Members

- Qualified Maximum Dependent Age: Dependents are covered until the end of the month at age 26.
- This is only a summary. You are responsible for knowing the full Benefits and provisions of your policy. Please read all documents carefully including your *Member Certificate, Formulary, Benefit Summary and Summary of Benefits and Coverage (SBC).* To find these documents, visit https://www.ghcscw.com or contact Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504.

Questions or Concerns?

- For any questions or concerns regarding your benefits, please visit https://www.ghcscw.com, or contact Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504.

Group Health Cooperative of South Central Wisconsin

Connections PPO $25 Copayment $500 Deductible $4,600/$2,000 MOOP 100/90

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately.

This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, please call 1-800-605-4327. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment , deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.healthcare.gov/sbc-glossary/ or call 1-800-605-4327 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible?	For In-Network Providers **$500/Individual** or **$1,000/Family**; For Out-of-Network Providers **$1,000/Individual** or **$2,000/Family**	If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible.
Are there services covered before you meet your deductible?	Yes. Preventive Care, Certain Office Visits, and Pharmacy Drugs are covered before the deductible is met.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible. See a list of covered preventive services at https://www.healthcare.gov/coverage/preventive-care-benefits/.
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan?	Medical: For In-Network Providers **$4,600/Individual** or **$9,200/Family**; For Out-of-Network Providers **$4,600/Individual** or **$9,200/Family** Pharmacy: **$2,000/Individual** or **$4,000/Family**	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members on this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit?	Premiums, balance-billing charges, Conception Services, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a network provider?	Yes. See www.ghcscw.com or call 1-800-605-4327 for a list of network providers.	This plan uses a provider network. You will pay less if you use a provider in the plan's network. You will pay the most if you use an out-of-network provider, and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance-billing). Be aware your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist?	No.	You can see the specialist you choose without a referral.

*For more information about limitations and exceptions, see the plan or policy document at http://planfinder.ghcscw.com

All **copayment** and **coinsurance** costs shown in this chart are after your **deductible** has been met, if a **deductible** applies.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
If you visit a health care provider's office or clinic	Primary care visit to treat an injury or illness	$25	10% after Deductible	Example: Office visits with Your Primary Care Provider (PCP)
	Specialist visit	$25	10% after Deductible	Example: Specialist Hearing Exams
	Preventive care/screening/immunization	No Charge	10% after Deductible	Coverage is limited to preventive services as defined by the Affordable Care Act.
If you have a test	Diagnostic test (x-ray, blood work)	No Charge after Deductible	10% after Deductible	Prior authorization is required.X-rays and routine lab tests ordered by Your Provider do not require Prior Authorization.
	Imaging (CT/PET scans, MRIs)	$150	10% after Deductible	Prior authorization is required.Examples: CT, PET Scans, MRIs
If you need drugs to treat your illness or condition More information about prescription drug coverage is available at http://planfinder.ghcscw.com/	Generic drugs **(Tier 1)**	$10	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply available for multiple Copays - subject to a maximum cost limit; Some brand names and many generics; Drugs in Tier 1 are the greatest value
	Preferred brand drugs **(Tier 2)**	$30	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply available for multiple Copays - subject to a maximum cost limit; Many brand names and some generics
	Non-preferred brand drugs **(Tier 3)**	$60	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply not available; There are often similar or equivalent drugs in either Tier 1 or Tier 2
	Specialty drugs **(Tier 4)**	$60	Not Covered	Applies to Pharmacy Maximum Out-of-Pocket; Covers up to a 30-day supply; 31-90 day supply not available; May require the use of a specialty-designated pharmacy

*For more information about limitations and exceptions, see the plan or policy document at http://planfinder.ghcscw.com

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	No Charge after Deductible	10% after Deductible	Prior authorization is required.
	Physician/surgeon fees	No Charge after Deductible	10% after Deductible	Prior authorization is required.Certain oral surgeries do not require Prior Authorization
If you need immediate medical attention	Emergency room care	$100	$100	Limited to emergency care; Copay waived if admitted as hospital inpatient
	Emergency medical transportation	No Charge after Deductible	No Charge after Deductible	Coverage is limited to emergency care
	Urgent care	$25	$25	
If you have a hospital stay	Facility fee (e.g., hospital room)	No Charge after Deductible	10% after Deductible	Prior authorization is required.
	Physician/surgeon fees	No Charge after Deductible	10% after Deductible	Prior authorization is required.
If you need mental health, behavioral health, or substance abuse services	Outpatient services	$25	10% after Deductible	
	Inpatient services	No Charge after Deductible	10% after Deductible	Prior authorization is required.
If you are pregnant	Office visits	No Charge	10% after Deductible	In-Network cost-sharing value is limited to preventive services. Cost-sharing described elsewhere in this SBC may apply depending on the maternity-related test or service.
	Childbirth/delivery professional services	No Charge after Deductible	10% after Deductible	Prior authorization is required.
	Childbirth/delivery facility services	No Charge after Deductible	10% after Deductible	Prior authorization is required.
If you need help recovering or have other special health needs	Home health care	No Charge after Deductible	10% after Deductible	Prior authorization is required.Limited to 60 visits per Member per year
	Rehabilitation services	No Charge after Deductible	10% after Deductible	Prior authorization is required.Limited to 40 combined visits per Member per year for Occupational and Physical; Limited to 20 visits per Member per year for Speech; Limited to 36 visits per Member per year for Cardiac
	Habilitation services	No Charge after Deductible	10% after Deductible	Prior authorization is required.Limited to 40 combined visits per Member per year for Occupational and Physical; Limited to 20 visits per Member per year for Speech

*For more information about limitations and exceptions, see the plan or policy document at http://planfinder.ghcscw.com

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
	Skilled nursing care	No Charge after Deductible	10% after Deductible	Prior authorization is required.Limited to 30 days per inpatient stay per Member
	Durable medical equipment	No Charge	10% after Deductible	Prior authorization is required.See Certificate for additional Limitations and Exclusions
	Hospice services	No Charge after Deductible	10% after Deductible	Prior authorization is required.Example: End of Life Services
If your child needs dental or eye care	Children's eye exam	No Charge	10% after Deductible	Routine Eye Examinations must be provided by an Optometrist (OD); Limited to one eye exam per Member per year
	Children's glasses	Not Covered	Not Covered	Not Covered
	Children's dental check-up	Not Covered	Not Covered	Not Covered

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

- Abortion (except in cases of rape, incest, or when the life of the mother is endangered)
- Acupuncture
- Cosmetic surgery
- Custodial Care
- Dental Care (Adult)
- Drug Screening
- Long-term care
- Non-emergency care when traveling outside the U.S.
- Personal Comfort Items
- Private-Duty Nursing
- Routine Foot Care
- Weight Loss programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Bariatric surgery
- Chiropractic Care
- Hearing Aids
- Infertility Treatment (specific procedures only)
- Routine Eye Care (Adult)

Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: Office of the Commissioner of Insurance, Complaints Department, PO Box 7873, Madison, WI 53707-7873, the U.S. Department of Labor, Employee Benefits Security Administration at 1-866-444-EBSA (3272) or www.dol.gov/ebsa/healthreform, or the U.S. Department of Health and Human Services at 1-877-267-2323 x61565 or www.cciio.cms.gov. Other coverage options may be available to you too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit www.HealthCare.gov or call 1-800-318-2596.

Your Grievance and Appeals Rights: There are agencies that can help if you have a complaint against your plan for a denial of a claim. This complaint is called a grievance or appeal. For more information about your rights, look at the explanation of benefits you will receive for that medical claim. Your plan documents also provide complete information to submit a claim, appeal, or a grievance for any reason to your plan. For more information about your rights, this notice, or assistance, contact: GHC-SCW Member Services at 1-800-605-4327 or 608-828-4853. You may also contact Wisconsin's Office of the Commissioner of Insurance at 1-800- 236-8517 or 608-266-0103. In addition, you may also contact the Department of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272) or www.dol.gov/ebsa/healthreform.

Does this plan provide Minimum Essential Coverage? Yes

Minimum Essential Coverage generally includes plans, health insurance available through the Marketplace or other individual market policies, Medicare, Medicaid, CHIP, TRICARE, and certain other coverage. If you are eligible for certain types of Minimum Essential Coverage, you may not be eligible for the premium tax credit.

Does this plan meet the Minimum Value Standards? Yes

If your plan doesn't meet the Minimum Value Standards, you may be eligible for a premium tax credit to help you pay for a plan through the Marketplace.

To see examples of how this plan might cover costs for a sample medical situation, see the next section.

*For more information about limitations and exceptions, see the plan or policy document at http://planfinder.ghcscw.com

About these Coverage Examples:

This is not a cost estimator. Treatments shown are just examples of how this plan might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your providers charge, and many other factors. Focus on the cost sharing amounts (deductibles, copayments and coinsurance) and excluded services under the plan. Use this information to compare the portion of costs you might pay under different health plans. Please note these coverage examples are based on self-only coverage.

Peg is having a baby
(9 months of in-network pre-natal care and a hospital delivery)

- The plan's overall deductible -- $500
- Specialist [cost sharing] -- $25
- Hospital (facility) [cost sharing] -- No Charge after Deductible
- Other [cost sharing] -- 0%

This EXAMPLE event includes services like:

Specialist office visits (prenatal care)
Childbirth/Delivery Professional Services
Childbirth/Delivery Facility Services
Diagnostic tests (ultrasounds and blood work)
Specialist visit (anesthesia)

Total Example Cost -- $12,700.00

In this example, Peg would pay:

Cost sharing	
Deductibles	$500.00
Copayments	$30.00
Coinsurance	$0.00

What isn't covered
Limits or exclusions -- $50.00

The total Peg would pay is -- $580.00

Managing Joe's type 2 Diabetes
(a year of routine in-network care of a well-controlled condition)

- The plan's overall deductible -- $500
- Specialist [cost sharing] -- $25
- Hospital (facility) [cost sharing] -- No Charge after Deductible
- Other [cost sharing] -- 0%

This EXAMPLE event includes services like:

Primary care physician office visits (including disease education)
Diagnostic tests (blood work)
Prescription drugs
Durable medical equipment (glucose meter)

Total Example Cost -- $5,600.00

In this example, Joe would pay:

Cost sharing	
Deductibles	$110.00
Copayments	$430.00
Coinsurance	$280.00

What isn't covered
Limits or exclusions -- $20.00

The total Joe would pay is -- $840.00

Mia's Simple Fracture
(in-network emergency room visit and follow up care)

- The plan's overall deductible -- $500
- Specialist [cost sharing] -- $25
- Hospital (facility) [cost sharing] -- No Charge after Deductible
- Other [cost sharing] -- 0%

This EXAMPLE event includes services like:

Emergency room care (including medical supplies)
Diagnostic test (x-ray)
Durable medical equipment (crutches)
Rehabilitation services (physical therapy)

Total Example Cost -- $2,800.00

In this example, Mia would pay

Cost sharing	
Deductibles	$500.00
Copayments	$130.00
Coinsurance	$0.00

What isn't covered
Limits or exclusions -- $10.00

The total Mia would pay is -- $640.00

*For more information about limitations and exceptions, see the plan or policy document at http://planfinder.ghcscw.com

Group Health Cooperative
of South Central Wisconsin

NOTICE OF PRIVACY PRACTICES

Effective Date: February 2026

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
Provider and Health Plan

Privacy Officer
1265 John Q. Hammons Drive
Madison, WI 53717
(800) 605-4327 or (608) 662-4899
www.ghcscw.com

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

When it comes to your health information, you have certain rights. Group Health Cooperative of South Central Wisconsin (GHC-SCW) understands that medical and insurance information about you is personal, and that protecting this information is important. This section explains your rights and some of our responsibilities to help you.

YOUR RIGHTS:

- **Right to Access, Inspect and Copy your Medical Record:** Get a copy of your medical, billing and insurance records. We will provide a copy or a summary of your health information, usually within 30 days of your request.
- **Right to Amend Health Information:** Ask us to correct your medical, billing and insurance records if you think there is a mistake. We may say "no" to your request, but we'll tell you why in writing within 60 days.
- **Right to Request Confidential Communication:** Request a preferred method of contact. We will say "yes" to all reasonable requests.
- **Right to Receive a Paper Copy of the Notice of Privacy Practices:** Get a copy of this privacy notice.
- **Right to Choose Someone to Act for You:** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- **Right to Request Restrictions on Use and Disclosure of Your Health Information:** You can ask us not to use or share certain health information for treatment, payment or our operations.
  - We are not required to agree to your request, and we may say "no" if it would affect your care.
  - If you pay for a service or health care item out of pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
- **Right to Receive an Accounting of Disclosures:** Get a list of certain health information shared for reasons other than treatment, billing or health care operations with other persons or organizations.
- **Right to Receive Notice if Your Health Information has been Breached:** We are required by law to maintain the privacy and security of your protected health information.
  - We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- **Right to File a Complaint:** File a complaint if you feel your privacy rights have been violated.
  - If you have concerns about any of our privacy practices or if you believe your privacy rights have been violated, you may file a complaint with the GHC-SCW Privacy Officer or by contacting the GHC-SCW Compliance Hotline at (844) 480-0055, reports@lighthouseservices.com, or online at lighthouse-services.com/ghcscw.
  - You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by visiting hhs.gov/hipaa/filing-a-complaint/index.html, calling (877) 696-6775, emailing OCRComplaint@hhs.gov, or sending a letter to:

    U.S. Department of Health and Human Services
    200 Independence Avenue, S.W.
    Room 509F HHH Bldg.
    Washington, D.C. 20201
  - No retaliatory action will be taken or will be allowed against anyone who reports a potential issue in good faith.

YOUR CHOICES:

If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have the right and choice to tell us to:

- Share information with your family, close friends or others involved in your care
- Share information in a disaster relief situation
- If you are not able to tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

USES AND DISCLOSURES:

Treatment: We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury may ask another doctor about your overall health.

Payment: We can use your health information for payment purposes.

Example: We share information about you to your health insurance plan so it will pay for your services.

Operations (Run Our Organization): We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Administer Your Plan (Health Plan Members Only): We may disclose your health information to your health plan sponsor for plan administration.

Example: As a health plan, GHC-SCW maintains contracts to provide your employer with certain statistics to explain the premiums we charge.

HOW ELSE CAN WE USE AND SHARE YOUR HEALTH INFORMATION?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We must meet many legal conditions before we can share your information for these purposes. For more information, visit https://www.hhs.gov/hipaa/index.html

- **Public Health and Safety Issues**
  We can share health information about you for certain situations such as to:
  - Prevent disease
  - Report adverse reactions to medications
  - Help with product recalls
  - Report suspected abuse, neglect or domestic violence
  - Prevent or reduce a serious threat to anyone's health and safety
  - For substance use disorder records, your health information will be deidentified

- **Do Research:** We can use or share your health information for health research.

- **Comply with the Law:** We may disclose your health information to a health oversight agency for activities authorized by law. For example, to the Department of Health and Human Services or to comply with state and federal laws require to ensure compliance with federal privacy law.

- **Organ and Tissue Donation Requests:** We may share health information with organ procurement organizations as necessary to facilitate donation and transplantation.

- **Work with a Medical Examiner or Funeral Director:** We can share health information with a coroner, medical examiner or funeral director when an individual dies.

- **Address Workers' Compensation, Law Enforcement and Other Government Requests:**
  - We may use your health information as authorized by law for workers' compensation benefits for work-related injury or illness.
  - For law enforcement purposes or with a law enforcement official. We must comply with federal and state laws in making disclosures for law enforcement purposes.
  - With health oversight agencies for activities authorized by law. For example, this may include audits, investigations, inspections and licensures.
  - For national security and intelligence activities such as military and presidential protection services.

- **Respond to Lawsuits and Legal Actions:** We can share health information about you in response to a court or administrative order, or in response to a subpoena. We may restrict access to health information about you as required by Wisconsin laws if those state laws are more protective of your health information than federal guidelines.

- **Use of Substance Use Disorder (SUD) Records in Criminal, Civil or Administrative Context:** We will not disclose your substance use disorder (SUD) records or the content of those records in any civil, criminal, administrative or legislative proceedings against you unless you have given your specific written consent, or we have a court order and there has been notice and an opportunity for you and us to be heard as required by law. Any court order must be accompanied by a subpoena or other similar legal mandate before SUD records may be used or disclosed.

- **Marketing Purposes:** We may use your health information to give you information about treatments or other health-related benefits and services we provide and that may be of interest to you (i.e., wellness reminders). If you wish to opt out, contact GHC-SCW Member Services at (608) 828-4853. GHC-SCW will never market or sell your health information.

- **Plan Sponsor (Health Plan Only)**
  - We may disclose your information to a Plan Sponsor to permit the performance of plan functions on behalf of GHC-SCW;
  - We may disclose "Summary Health Information" to the Plan Sponsor for obtaining bids or the purpose of amending or terminating the Plan;
  - "Summary Health Information" includes claims history, claims expenses and types of claims by individuals without including any personally identifying information;
  - If your Consideration of disclosure of any other information without authorization is screened to prevent the Plan Sponsor from making employment decisions about you or otherwise revealing information which they have no authority to receive.

HEALTH INFORMATION EXCHANGE (HIE):

GHC-SCW participates in health information exchanges (HIEs), which allow providers to coordinate care and provide faster access to health information for treatment, payment and health care operations. HIEs assist providers and public health officials in making more informed decisions, avoiding duplicate care (such as tests) and reducing the likelihood of medical errors. By participating in an HIE, GHC-SCW may share your health information with other providers and participants as permitted by law.

If you do not want your health information shared in the HIE, you can make this request in writing by completing the Request for Record Restriction Form, available on our website at ghcscw.com or by contacting the Privacy Officer at (608) 662-4899. Such a request may be denied if it would impede your care.

Other state and federal laws If Wisconsin or federal laws are more protective of your health information than federal regulations, we will comply with the more protective requirements if applicable. For example, certain sensitive types of records have heightened protections under state and federal laws such as mental health records, substance use disorder records, and HIV test results. In addition, GHC-SCW facilities and/or departments that operate substance use disorder treatment programs follow the confidentiality protections of 42 C.F.R. Part 2. Those programs follow the privacy practices described in Appendix A of this Notice.

OUR RESPONSIBILITIES

We are required by law to maintain the privacy and security of your health information.

- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We will follow the duties and privacy practices described in this notice and give you a copy of it.
- We will obtain written authorization for any additional uses and disclosures of your health information. You may revoke your authorization at any time.

For more information see:
www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Contact Information:

GHC-SCW Privacy Officer
1265 John Q. Hammons Drive
Madison, WI 53717
(608) 662-4899 or (800) 605-4327
privacy@ghcscw.com

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office and on our website.

Acknowledgement of Notice of Privacy Practices

The HIPAA Privacy Rule requires that GHC-SCW make a good faith effort to obtain written acknowledgement of receipt of this Notice of Privacy Practices to those who receive care and treatment at GHC-SCW.

Health Plan Members: For individuals who are members of the health plan only (i.e., insured members who do not receive care and treatment at a GHC-SCW location), written acknowledgement is not required at GHC-SCW.

APPENDIX A

In addition to the privacy protections afforded to all medical records under HIPAA, the confidentiality of substance use disorder records are protected by another federal law referred to as Part 2. Certain GHC-SCW departments operate Part 2 covered programs, and this Appendix is intended to provide patients of those programs with a summary of the laws and regulations governing substance use disorder treatment records, which can be found at 42 U.S.C. §290dd-2 and 42 C.F.R. Part 2 ("Part 2").

DISCLOSURES OF INFORMATION SUBJECT TO FEDERAL SUBSTANCE USE DISORDER RULES WITHOUT WRITTEN CONSENT

The following is a summary of the limited circumstances under which we may acknowledge your presence or disclose information about you to individuals outside GHC-SCW without your permission.

Medical Emergencies. We may disclose your information to medical personnel to the extent necessary to meet a bona fide medical emergency during which you are unable to provide prior informed consent of the disclosure. We may also disclose your identifying information to medical personnel of the Food and Drug Administration ("FDA") who assert a reason to believe that your health may be threatened by an error in the manufacture, labeling, or sale of a product under FDA jurisdiction, and that the information will be used for the exclusive purpose of notifying patients or their physicians of potential dangers.

Research. Under certain circumstances, we may disclose your information for scientific research, subject to certain safeguards.

Audit and Evaluations. We may disclose information to others for specific audits or evaluations, including those who provide financial assistance to GHC-SCW or those who conduct audits and evaluations necessary under federally funded health care programs and federal agencies with oversight of those programs.

Reporting Certain Criminal Conduct. The following information is not protected by Part 2:

- Information related to your commission of a crime on the premises of a GHC-SCW facility;
- Information related to your commission of a crime against GHC-SCW; and
- Reports of suspected child abuse and neglect made under state law to the appropriate state or local authorities.

Duty to Warn. If GHC-SCW learns that a patient has made a specific threat of serious physical harm to another specific person or the public, and disclosure is otherwise required under the statute and/or common law, GHC-SCW will consider appropriate actions that would permit disclosure.

Individuals Involved in Your Care. Depending on your age and mental capacity and the location of your services, we may be permitted to make certain disclosures of your information to your guardian, for payment purposes, and your guardian may be permitted to consent to disclosures of your information.

Deceased Patients. We may disclose your information relating to cause of death under laws requiring the collection of death or other vital statistics or permitting inquiry into the cause of death. For other disclosures where authorization is required, we may disclose your information if authorization was given by an executor, administrator, or other personal representative appointed under applicable state law. If there is no such appointed representative, the authorization may be given by the patient's spouse or, if none, by any responsible member of the patient's family.

Judicial and Administrative Proceedings. We may disclose your protected health information in response to a court order that meets federal regulations, specifically 42 CFR Part 2, which protects the confidentiality of substance use disorder patient records.

- **Use in Legal Proceedings:** Your records or testimony about protected health information cannot be used in any civil, administrative, criminal, or legislative proceedings against you unless you give specific written consent or there is a court order.
- **Court Order Requirements:** Your medical records can only be disclosed with a court order after you or the record holder have been given notice and an opportunity to be heard.
- **Subpoena Requirement:** A court order must be accompanied by a subpoena or similar legal mandate before your medical records can be disclosed.

Qualified Service Organizations. We will disclose your information to our qualified service organizations to the extent necessary for these entities to provide services to GHC-SCW.

DISCLOSURES OF INFORMATION SUBJECT TO FEDERAL SUBSTANCE USE DISORDER RULES WITH WRITTEN CONSENT

A single consent may be used for future treatment, payment, and health care operations uses and disclosures, as permitted by law. These records cannot be used or disclosed in legal actions against you without your written permission or a special court order.

With single consent, here are some examples of how we may use and share substance use disorder information:

For Treatment:

- To coordinate your care with other health care providers involved in your treatment. For example, your SUD provider may share information about current medications so your PCP can avoid drug interactions.
- To help you coordinate care after discharge from residential treatment and may use Part 2 information to help schedule follow-up appointments and connect you to outpatient services.

For Payment:

- To bill your health plan, receive payment for services or answer questions from your health plan about coverage.
- To check for eligibility for insurance coverage and prepare claims for your insurance company where appropriate.

For Operations:

- To improve the quality of care, review and improve our services or train staff.
- To meet legal and accreditation requirements.

This information is shared **only as allowed by federal law and only the minimum necessary**. We do **not** use this information for decisions that could harm you, such as employment or legal action.

Revocation of Consent: You may revoke your written consent at any time, except to the extent that we have already acted upon the consent. If you are currently receiving care and wish to revoke your authorization, contact your provider.

VIOLATIONS OF LAWS AND REGULATIONS. A violation of the federal law and regulations governing the confidentiality of substance use disorder records is a crime. Suspected violations may be reported to the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment at 5600 Fishers Lane Rockville, MD 20857 or (240) 276-1660 or to the US Attorney for the district in which the violation occurred. Western District of Wisconsin 222 West Washington Ave, Suite 700 Madison, WI 53703 (608) 264-5158

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

In accordance with the HIPAA Privacy Rule, GHC-SCW is required to make a good faith effort to obtain a written acknowledgement of receipt of the Notice of Privacy Practices and, if not obtained, document our good faith effort to obtain such acknowledgement and the reason why the acknowledgement was not obtained.

You may refuse to sign this form and doing so will have no impact on the quality of care, treatment, or services you receive at GHC-SCW.

I have received a copy of the GHC-SCW Acknowledgement of Receipt of Notice of Privacy Practices

Patient's Last Name	Patient's First Name	GHC #	Date of Birth

Signature of Patient or Legal Guardian	Date	Relationship to Patient

Return this form to GHC-SCW in one of the following ways:

- Return it to the GHC-SCW who provided it to you (i.e. receptionist);
- Mail to:
  GHC-SCW Health Information Department
  1265 John Q Hammons Dr.
  Madison, WI 53717
- Fax to 608-441-3499;
- PDF as e-mail attachment to GHCROI@ghcscw.com;
- Bring to your next clinic visit;
- Drop off at the GHC-SCW location of your choice at any time.

If you have questions or concerns regarding the Notice of Privacy Practices, please contact the Privacy Officer at (608) 662-4899.

GHC-SCW Nondiscrimination Notice

Group Health Cooperative of South Central Wisconsin

Group Health Cooperative of South Central Wisconsin (GHC-SCW) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes. GHC-SCW does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

GHC-SCW:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language assistance services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact GHC-SCW Member Services at (608) 828-4853 or (800) 605-4327, ext. 4504 (TTY: 1-608-828-4815), or by email at member_services@ghcscw.com.

If you believe that GHC-SCW has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with GHC-SCW's Chief Compliance Officer, 1265 John Q. Hammons Drive, Madison, WI 53717, Telephone: (608) 251-4156, TTY: (608) 828-4815, Fax: (608) 257-3842, or Email: compliance@ghcscw.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, GHC-SCW's Chief Compliance Officer is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW.
Room 509f, HHH Building
Washington, DC 20201
1-800-368-1019, 1-800-537-7697 (TDD).

Complaint forms are available at **http://www.hhs.gov/ocr/office/file/index.html.**

This notice is available at GHC-SCW's website: **https://ghcscw.com/SiteCollectionDocuments/Nondiscrimination_Notice_and_Language_Assistance_Services.pdf.**

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK24-100-1(6.25)O
CSC25-19-01 1(06/25)F
Version 4: 6/2025

NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

English:
ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) or speak to your provider.

Español (Spanish):
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) o hable con su proveedor.

中文 (Simplified Chinese):
注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提 供适当的辅助工具和服务，以无障碍格式提供信息。致电 608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) 或咨询您的服务提供商。

繁體中文 (Traditional Chinese):
注意：如果您說[中文]，我們可以為您提供免費語言協助服務。也可以免費 提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) 或與您的提供者討論。

Hmoob (Hmong):
LUS CEEB TOOM: Yog tias koj hais lus Hmoob, muaj cov kev pab cuam txhais lus pub dawb rau koj. Muaj cov cav zoo thiab cov kev pab cuam txhais ntaub ntawv ua lwm hom lus nrog rau cov kev pab dawb tsis kom them nqi rau. Hu 1-608-828-4853 los sis 1-800-605-4327 los sis tus leb txuas ntxiv (ext), 4504 (TTY: 1-608-828-4815) los sis hais qhia tau rau koj tus kws kho mob.

Русский **(Russian):**
ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) или обратитесь к своему поставщику услуг.

Tiếng Việt (Vietnamese):
LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) hoặc trao đổi với người cung cấp dịch vụ của bạn.

ลาว (Laotian):
ເຊີ ນຊາບ: ຖ້ າທ່ ານເວ ້ າພ າສ າ ລ າວ, ຈ ະມ ີ ບ ໍ ລ ິ ການ ຊ ່ ວ ຍ ດ ້ ານ ພ າສ າ ແ ບ ບ ບ ໍ ່ ເ ສ ຍ ຄ ່ າ ໃ ຫ ້ ທ ່ ານ.
ມ ີ ເ ຄ ื ่ อ ง ช ่ ว ย ແ ລ ะ ການ ບ ໍ ລ ິ ການ ແ ບ ບ ບ ໍ ່ ເ ສ ຍ ຄ ่ າ ท ี ่ ເ ໝ าะ ส ม ເ พ ื ่ อ ให ้ ข ้ ม ู ล ใ ນ ร ู ป แ บ บ ท ี ่ ส ามารถ เ ข ้ า ถ ึ ง ได ้ .
ໂ ທ ຫ າ ເ ບ 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) ห ล ื อ ต ิ ด ต ่ อ ผ ู ้ ให ้ บ ร ิ ก าร ข อ ง ท ่ าน.

Deutsch (German):
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) an oder sprechen Sie mit Ihrem Provider.

NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

Deitsch (Pennsylvania Dutch):
LET OP: als je Nederlands spreekt, zijn er gratis taalhulpdiensten voor je beschikbaar. Passende hulpmiddelen en diensten om informatie in toegankelijke formaten te verstrekken, zijn ook gratis beschikbaar. Bell 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) of spreek met je provider.

العربية (Arabic):
تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانا. اتصل على الرقم (TTY: 1-608-828-4815) -1-800-605-4327, ext 4504; 1-608-828-4853- أو تحدث إلى مقدم الخدمة

Polski (Polish):
UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) lub porozmawiaj ze swoim dostawcą.

Français (French):
ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) ou parlez à votre fournisseur.

हिंदी (Hindi):
ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं।1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) पर कॉल करें या अपने प्रदाता से बात करें।

한국어 (Korean):
주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Shqip (Albanian):
VINI RE: Nëse flisni [shqip], shërbime falas të ndihmës së gjuhës janë në dispozicion për ju. Ndihma të përshtatshme dhe shërbime shtesë për të siguruar informacion në formate të përdorshme janë gjithashtu në dispozicion falas.Telefononi 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) ose bisedoni me ofruesin tuaj të shërbimit.

Tagalog (Tagalog – Filipino):
PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) o makipag-usap sa iyong provider.

Soomaali (Somali):
FIIRO GAAR AH: Haddaad ku hadasho Soomaali, adeegyo kaalmada luuqadda ah oo bilaash ah ayaad heli kartaa. Qalab caawinaad iyo adeegyo oo habboon si loogu bixiyo macluumaadka qaabab la adeegsan karo ayaa sidoo kale bilaa lacag heli karaa. Wac 1-608-828-4853 or 1-800-605-4327, ext. 4504 (TTY: 1-608-828-4815) ama la hadal bixiyahaaga.

Group Health Cooperative
of South Central Wisconsin

1265 John Q Hammons Dr.
Madison, WI 53717-1962

ghcscw.com

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