



MAP – Imagine 100% Coverage

The MAP offers employees who have access to alternate group medical and prescription drug coverage (usually through your spouse) 100% coverage. You will be reimbursed for ALL eligible co-pays, co-insurance and deductibles incurred through your alternate medical plan up to the maximum out of pocket limits under the Affordable Care Act (\$8,550/single and \$17,100/family per year).

No premium contribution will be deducted from employee's paycheck.

Eligibility

- ▶ **Current employees as of December 31, 2020:** Must be enrolled in the Visiting Nurse Association (VNA) Medical Plan
- ▶ **New employees:** Must satisfy eligibility requirements
- ▶ **Qualifying event or newly eligible:** marriage, birth of child, part time to full time, etc.

Opportunities for Enrollment

- ▶ VNA open enrollment
- ▶ Qualifying event: marriage, spouses change in employment status, birth of child, part time to full time, etc.
- ▶ Spouses open enrollment
- ▶ New employee

IRS Rules

- ▶ You may be enrolled in an HRA or FSA. You **CAN NOT** be reimbursed from both the MAP and your HRA or FSA.
- ▶ Employees are NOT eligible for the MAP if their Alternate Coverage is:
 - High Deductible Health Plan (HDHP) **with** active contributions to a Health Savings Account (HSA),
 - Medicare, Tricare or Medicaid
 - Healthcare Exchange Policy made available thru the Affordable Care Act
 - Individual policy
 - Limited Benefit Health Plan

MAP

Member Advantage Plan

Enrollment

- ▶ Enroll in Alternate Coverage and waive coverage on VNA Medical Plan
- ▶ Complete MAP enrollment form and attestation form on your online enrollment site.
- ▶ Provide proof of premium contribution paid for Alternate Coverage

Claims

- ▶ MAP ID Card:
 - Present Alternate Coverage ID card
 - Present MAP ID card
 - Provider may bill Catilize Health directly
- ▶ Paper Claims:
 - Present Alternate Coverage ID card
 - Complete MAP claim form and sign
 - Send completed and signed claim form to Catilize Health with the following:
 - Office visit co-pay, co-insurance or deductible: Explanation of Benefits (EOB) from Alternate Coverage
 - Prescriptions: "Tab" from pharmacy that includes name of drug, date filled, patient's name and patient responsibility amount

