



HAH Holdings, LLC dba Help at Home

2027 BENEFIT GUIDE

Preventive Coverage Plan

Summary of Benefits and Coverage

To obtain an electronic copy of the Summary of Benefits and Coverage and Benefit Guide, please visit www.panamericanbenefitsenrollment.com, enter your group ID **SE719**, and then select View Summary.

You may also request a paper copy at any time by contacting us at 1-800-999-5382.

Preventive Care Plan



Preventive care

Receive routine immunization, wellness exams, & medicines at no-cost when in-network

Stay healthy by catching potential illnesses before they start

Arm yourself with the tools you need to make smart choices for your future

One of the most valuable benefits included with your benefit package is preventive care coverage which now covers 100% of eligible preventive service costs when performed in-network. That means that you pay nothing out of pocket for access to a variety of medical screenings, exams, and immunizations which may help reduce your risk of developing health conditions in the future and avoid expensive treatment down the road.

Understanding Preventive Care

Preventive care is the first step in knowing how healthy you are. The goal is to “prevent” a serious health condition by detecting problems early on. Preventive care includes screenings, tests, medicines and counseling performed or prescribed by your doctor or other health care provider to test for conditions which may develop even when you don’t have signs or symptoms of an injury or illness. Your provider is able to deliver treatment which can prevent you from getting sick and by counseling you on beneficial lifestyle changes or offering prophylactic treatment.

Why is Preventive Care Important?

- Detection of health conditions early, when they are more easily treatable
- Identification of potential risks to your future health
- Provide adults with immunizations for illnesses such as influenza and pneumonia, as well as booster shots and required immunizations for children

Difference Between Preventive and Diagnostic Services

A preventive procedure starts with the intent of confirming your good health although you may appear asymptomatic. Diagnostic services differ in that they are requested in order to identify the cause of a reported health condition.

Services are considered Preventive Care when a person:

- Does not have symptoms indicating an abnormality
- Has had a screening done within the recommended age and gender guidelines with the results being considered normal
- Has had a diagnostic service with normal results, after which the physician recommends future preventive care screenings using the appropriate age and gender guidelines
- Has a preventive service that results in diagnostic care or treatment being done at the same time and as an integral part of the preventive service (e.g. polyp removal during a preventive colonoscopy), subject to benefit plan provisions

Services are considered Diagnostic Care when:

- Services are ordered due to current issues or symptoms(s) that require further diagnosis
- Abnormal test results on a previous preventive or diagnostic screening test requires further diagnostic testing or services
- Abnormal test results found on a previous preventive or diagnostic service requires the same test be repeated sooner than the normal age and gender guideline recommendations would require

Preventive Care Plan

Are Preventive Care Services covered only when performed in-network?

Yes, these preventive services are only covered under the preventive care plan when performed by an in-network provider. Your plan includes access to one of the largest Provider Networks. Details for locating an in-network provider can be found in the Provider Network section of this guide.

Covered Preventive Services for Adults

Screenings for:

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Blood pressure
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer (for adults over 45)
- Depression
- Type 2 diabetes (for adults with high blood pressure)
- Hepatitis B (for virus infection in persons with high risk)
- Hepatitis C (for infection in persons at high risk) (one-time screening for HCV to adults born between 1945-1965)
- HIV (for all adults at higher risk)
- Lung Cancer (for adults age 55-80 with a 30-pack per year smoking history and who currently smoke or quit within the past 15 years)
- Obesity
- Tobacco use
- Syphilis (for all adults at higher risk)

Counseling for:

- Alcohol misuse
- Aspirin use for men and women of certain ages and cardiovascular risk factors
- Diet (for adults with higher risk for chronic disease)
- Human Immunodeficiency Virus (HIV) for sexually active women
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use (including programs to help you stop using tobacco)

Immunizations:

- Doses, recommended ages, and recommended populations vary.
- Diphtheria, pertussis, tetanus (DPT)
- Hepatitis A
- Hepatitis B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza (Flu)
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chicken pox)

Additional Covered Preventive Services for Women

- Aspirin (low dose as preventive after 12 weeks gestation in women who are at high risk for preeclampsia)
- Breast Cancer preventive medications for women with increased risk (tamoxifen or raloxifene).
- Contraception (FDA approved and ACA required contraceptive methods, sterilization procedures, and patient education and counseling)
- Well-woman visits (to obtain recommended preventive services for women under 65)

Screenings for:

- Breast cancer (mammography every 1 to 2 years for women over 40)
- Cervical cancer (for sexually active women)
- Chlamydia infection (for younger women and other women at higher risk)
- Domestic and interpersonal violence
- Gestational diabetes (for those at high risk)
- Gonorrhea (for all women at higher risk)
- Human Immunodeficiency Virus (HIV) (for sexually active women)
- Human Papillomavirus (HPV) DNA Test: High risk HPV DNA testing every three years for women with normal cytology results who are 30 or older
- Syphilis (for all pregnant women or other women at increased risk)
- Osteoporosis (for women over age 60 depending on risk factors)

Preventive Care Plan

Counseling for:

- BRCA: Genetic counseling and testing for women at higher risk (family history is associated with an increased risk for deleterious mutations in BRCA1 or BRCA2 genes) and screening, genetic counseling, and testing for women who are asymptomatic and have not received a BRCA-related cancer diagnosis, but who previously had breast, ovarian, or other cancer; women whose family history is associated with an increased risk of BRCA-related cancer; women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA testing.
- Breast cancer chemoprevention (for women at higher risk)
- Contraception (education and counseling)
- Domestic and interpersonal violence
- Folic acid supplements (for women of child-bearing ages)
- Human Immunodeficiency Virus (HIV) (for sexually active women)
- Sexually Transmitted Infections (STI): Counseling for sexually active women

Additional services for pregnant women:

- Anemia screenings
- Bacteriuria urinary tract or other infection screenings
- Breast feeding interventions to support and promote breast feeding after delivery
- Expanded counseling on tobacco use
- Gestational diabetes (screening for women 24 to 28 weeks pregnant)
- Hepatitis B counseling (at the first prenatal visit)
- Rh incompatibility screening, with follow-up testing for women at higher risk

Covered Preventive Services for Children

Screenings and assessments for:

- Alcohol and drug use (for adolescents)
- Autism (for children at 18 and 24 months)
- Behavioral issues
- Blood pressure (screening for children)
- Cervical dysplasia (for sexually active females)
- Congenital hypothyroidism (for newborns)
- Depression (screening for adolescents)
- Developmental (screening for children under age 3, and surveillance throughout childhood)
- Dyslipidemia (screening for children at higher risk of lipid disorders)

- Hearing (for all newborns)
- Height, weight and body mass index measurements
- Hæmatocrit or hemoglobin
- Hæmoglobinopathies or sickle cell (for newborns)
- HIV (for adolescents at higher risk)
- Lead (for children at risk of exposure)
- Medical history
- Obesity
- Oral health risk assessment (for young children)
- Phenylketonuria (PKU) (newborns)
- Tuberculin testing (for children at higher risk of tuberculosis)
- Vision (screening as part of physical exam, not separate eye exam)

Medications and supplements:

- Gonorrhea preventive medication for the eyes of all newborns

Counseling for:

- Fluoride (prescription chemoprevention supplements for children without fluoride in their water source)
- Obesity
- Sexually transmitted infection (STI) prevention (for adolescents at higher risk)
- Tobacco use (education and counseling to prevent initiation of tobacco use in school-aged children and adolescents)

Immunizations:

From birth to age 18. Doses, recommended ages, and recommended populations vary.

- Diphtheria, pertussis, tetanus (DPT)
- Hæmophilus influenzae type b
- Hepatitis A
- Hepatitis B
- Human papillomavirus (HPV)
- Inactivated poliovirus
- Influenza (Flu)
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Rotavirus
- Varicella (chicken pox)

For more information regarding preventive care recommendations and immunizations, please visit the websites for the [Centers for Disease Control](#) and [Preventions](#) or the [United States Department of Human Services](#).

Preventive Care Plan

*Prescription Drug Coverage**

The following chart shows categories of pharmaceuticals available to you at no cost. As lists may change, please note that in order to determine which specific drugs or brands within each of the below categories are covered under your prescription benefits, you will need to contact RxEDO at 1-888-879-7336 or go online to rxedo.com for more information.

Item	Availability	Coverage
Aspirin	Adult men and women 45 years or more	Generic, OTC
Folic Acid supplements	Adult women Up to 55 years	Generic, OTC
Fluoridated drugs	6 months – 5 years	Brand, generic
Tobacco Cessation	Adult men and women	• Generic or OTC only on nicotine replacement products • Limit to Generic Zyban
Additional Covered Preventive Services for Women		
Oral Contraceptives	Adult women	Generic, single source brands
Emergency contraception		Generic, OTC, single source brands**
Injectable contraceptives		Generic, single source brands**
Transdermal patch		Generic, single source brands**
Diaphragm and cervical cap		Generic, single source brands**

*Under PPACA, certain medications and prescription drugs that prevent illness and disease are covered at no-cost as long as services are rendered by a physician who participates in the plan's network. This chart lists the preventive medications that are covered at 100% under the PanaBridge Advantage Plan. In order for these medications to be covered at 100%, a prescription is required from your physician, including over-the-counter (OTC) drugs. Drugs may be subject to quantity limitations.

**Single source brands are brand named drugs which do not have generic alternatives.

Discount Prescription Drug Benefit

Save on Discount Prescriptions

Eligible medications will be available to all members at RxEDO's pharmacy's contracted rate, which can typically save members anywhere from **10% - 79% off** of the pharmacy's usual and customary fee. Standard drug inclusions and exclusions apply.

Diabetic Supplies: 10% to 60% Saving on Diabetic Supplies. A convenient service for members with diabetes. This program provides special member pricing on most diabetic supplies. These items include: test strips, glucose meters, lancing devices, lancets, and MORE!

The RxEDO pharmacy network includes **over 68,000** total participating retail pharmacy locations nationwide; all major chains are included as well as 20,000+ independent pharmacies.

Helpful Hints

- Show the pharmacist your identification card. It includes the BIN # and PCN #, as well as any other information they will need to process your claim through RxEDO.
- If your pharmacy has any questions concerning the process, please have them call the RxEDO Pharmacy Help Desk at (800) 522-7487, which is printed on your new identification card.



For questions or drug look-up go to www.rxedo.com or call 1-888-879-7336.

Sample Prescription Drugs	Generic	Formulary Brand
ANTIBIOTIC	Rimatadine	Augmentin
BLOOD PRESSURE	Lisinopril	Mavik
CHOLESTEROL LOWERING	Lovastatin	Lipitor

Pharmacy Network

Some of the participating pharmacies include:

Costco

CVS Pharmacy

K-Mart

Target

Walgreens

Walmart

And many more....

*Discount prescription benefits are not insurance products and are administered by RxEDO, Inc.
Pan-American Life is not affiliated with RxEDO.*

Using In-Network Providers Can Stretch Your Benefits Dollars



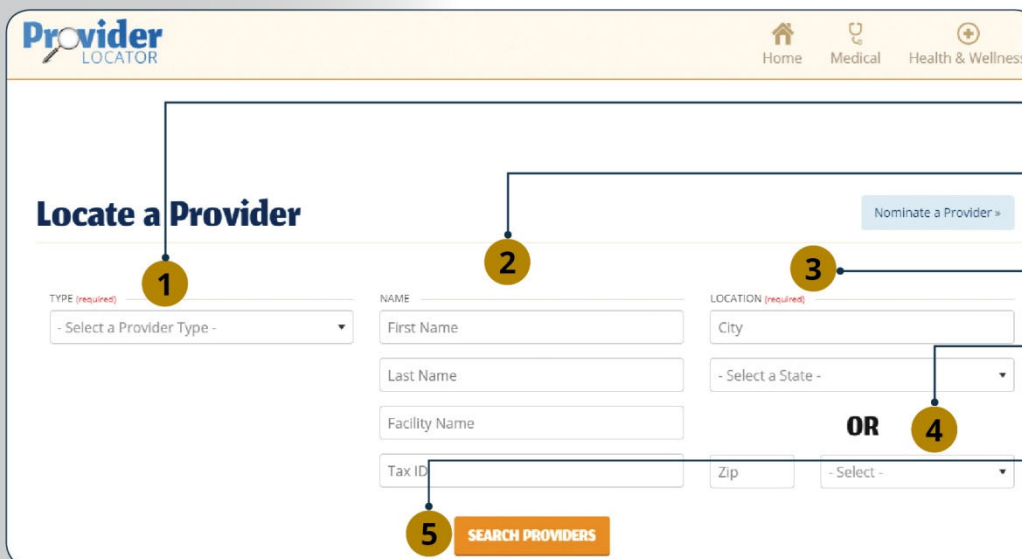
Your plan includes access to the First Health Network, which is more than a PPO Network, it is a full service Managed Care Organization offering savings opportunities on a national, directly contracted basis. It provides access to more than 5,000 Hospitals and 695,000 Physicians and health care professionals nationwide.

First Health is committed to patient safety at a high level by exercising care in the selection and evaluation of providers for our network. Thorough credentialing and recredentialing processes minimize unfavorable risks, which in turn, impacts clinical and cost outcomes.

In addition to the First Health Network, our members also have access to a secondary or Wrap Network that provides them and their covered dependents a broader access to Physicians and health care professionals in urban, suburban, and rural areas.

To locate in-network Physicians or Hospitals call **1-888-561-5759**
or visit www.providerlocator.com/palichf to search online

Provider Locator



The screenshot shows the 'Provider Locator' web interface. At the top, there are navigation links for 'Home', 'Medical', and 'Health & Wellness'. The main heading is 'Locate a Provider'. Below this, there are five numbered steps indicated by yellow circles with arrows pointing to specific form fields:

- Step 1:** Points to the 'TYPE (required)' dropdown menu with the text '- Select a Provider Type -'.
- Step 2:** Points to the 'NAME' section, which includes 'First Name', 'Last Name', and 'Facility Name' input fields.
- Step 3:** Points to the 'LOCATION (required)' section, which includes 'City' and '- Select a State -' dropdown menus.
- Step 4:** Points to the 'OR' section, which includes 'Tax ID', 'Zip', and '- Select -' dropdown menus.
- Step 5:** Points to the 'SEARCH PROVIDERS' button.

There is also a 'Nominate a Provider »' link in the top right corner of the form area.

Follow These Steps

1. Select the specialty and/or type of provider you want to locate.
2. (Optional) Complete these fields if searching for a specific provider.
3. Select location by city, state, or zip code.
4. (Optional) You can also select the distance from your location.
5. Click here to start your search.

PPO Provider services are provided by Competitive Health, Inc. Pan-American Life and Competitive Health are not affiliated.

Member Advocacy

What is a member advocate?

A member advocate is an in-house representative that works exclusively on behalf of our members to reduce medical costs and stressful billing situations. They are able to help members find community programs, hospitals, pharmaceutical companies, and provider offices who have affordable treatment costs. Also, they serve as a single point-of-contact to help resolve on-going or challenging billing issues. They're even available to speak with members individually, as well as their physicians and medical facilities, so everyone has a full understanding of how the benefits work and can make the most informed choices with regard to planning medical treatment.

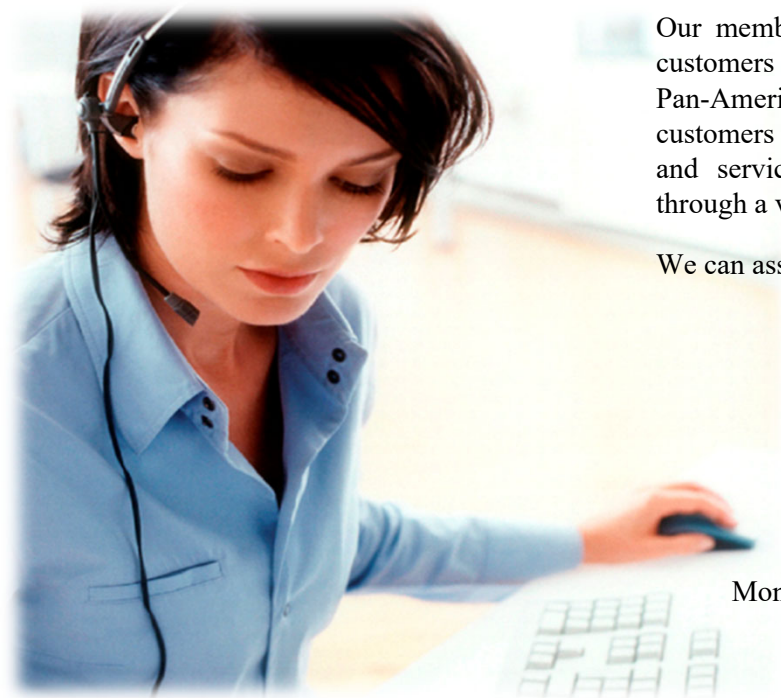
Advocates can assist with:

- Medical bills & Prescription costs
- Lab work & X-rays
- CAT Scans / MRIs
- Scheduling surgical procedures
- Durable medical equipment
- Diabetic supplies
- Complicated claims and billing issues

They help lower costs by:

- Negotiating balances
- Finding providers that offer sliding-scale treatment pricing
- Arranging payment plans for previously incurred bills
- Requesting discounted lump-sum payments to settle balances
- Locating community programs for specialized services or frequently recurring expenses due to chronic conditions
- Contacting discount pharmacies

Member Services



Our member service representatives are responsible for ensuring that customers receive the best assistance with their questions and concerns. Pan-American Life's customer service representatives interact with customers to provide information in response to inquiries about products and services. They communicate with administrators and members through a variety of means; by telephone, by e-mail, fax or mail.

We can assist members, companies and providers with:

- | | |
|----------------------------|---------------------------|
| • Member Advocacy | • Prescription Benefits |
| • ID Cards | • PPO Network Information |
| • Policy Information | • Account Management |
| • Member Eligibility | • Claims |
| • Verification of Benefits | • And more! |

Monday through Friday, 7:30 AM – 5:00 PM, Central Time.



1- 800-999-5382

Full bilingual (English-Spanish) services