

Microsoft Health Connect Plan – Maternity Care Bundle & Doula Benefit

SUMMARY AND FAQ

Overview

Starting January 1, 2021, Microsoft members who elect the Health Connect Plan will be eligible for a new maternity care benefit, called the Maternity Bundle. This new benefit is available to employees, their enrolled spouses or domestic partners, and eligible dependent children. In addition, the Health Connect Plan now offers a \$1,000 allowance, per pregnancy, for doula services.

Maternity Care Bundle Q&A

What is the maternity bundle?	With our new maternity bundle, we're simplifying the paperwork so you can focus on baby. You will only pay a single \$500 copay for your routine maternity care, including professional prenatal and delivery care, regardless of the delivery method at a Health Connect network facility.
How much does the maternity bundle cost?	You pay only a single copay of \$500 for all routine professional prenatal and delivery care received within the Health Connect network, which includes the hospital stay.
Who is eligible for the maternity bundle?	Members who are enrolled on the Health Connect Plan and who see Health Connect network providers for their routine maternity care are eligible. This benefit covers routine maternity benefits provided for you, your enrolled spouse or domestic partner, and your eligible dependent children within the Health Connect network. Any charges for a dependent child's newborn are not covered.
Do I need to enroll in the maternity bundle program if I sign up for the Health Connect Plan?	The maternity bundle is part of the Health Connect Plan, and no special enrollment is required. You're automatically eligible for the bundle when you receive maternity care from a Health Connect network provider and deliver your baby at a Health Connect network hospital.



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<p>Do I qualify for the maternity bundle if I am already pregnant or receiving prenatal care?</p>	<p>Yes. As of January 1, 2021, if you are enrolled in the Health Connect Plan and receiving routine maternity care from a Health Connect network provider, then you automatically qualify for the maternity bundle as long as you deliver your baby at a Health Connect network facility. If your current maternity care provider is not a Health Connect network provider, then you would need to switch to a Health Connect network provider in order to qualify for the maternity bundle.</p>
<p>What if I change providers mid-pregnancy after January 1, 2021?</p>	<p>Services rendered by Health Connect network providers will be covered under the bundle. Within the Health Connect network, you are free to change providers at any time.</p> <p>If you switch to a non-Health Connect network provider, you will no longer be eligible for the maternity bundle and standard maternity care cost shares will apply.</p> <p>Go to aka.ms/benefits and search for Summary Plan Description for coverage details or contact customer service at 800-676-1411 (TTY: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time.</p>
<p>Does the bundle cover miscarriages and terminations?</p>	<p>Yes. Miscarriages and terminations of pregnancy, including elective and medically recommended terminations, are covered under the maternity bundle at a Health Connect network facility.</p>
<p>Does the bundle cover C-sections?</p>	<p>Yes. The \$500 copay will apply to services received within the Health Connect network regardless of the delivery method.</p>
<p>What isn't covered under the maternity bundle?</p>	<p>Services that are not included in the maternity bundle but are covered at a standard cost share include:</p> <ul style="list-style-type: none"> • Non-routine maternity care, such as medical complications of pregnancy, surgical complications during delivery, treatment for gestational diabetes, and genetic-testing-related services such as non-routine ultrasounds for chromosomal testing. • Care for baby post-delivery • Prescriptions <p>Go to aka.ms/benefits and search for Summary Plan Description for coverage details or contact customer service at 800-676-1411 (TTY: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time.</p>
<p>How does the maternity bundle work if I switch from the Health Savings Plan to the Health Connect Plan?</p>	<p>There will be a \$500 copay when you deliver at a Health Connect network facility. Any routine maternity care received prior to transitioning to the Health Connect Plan does not qualify for the maternity bundle because claims are paid</p>

	based on your plan benefits and eligibility on the date in which the services were rendered.
What if I am currently on the Health Connect Plan and already paid for maternity care?	Your cost shares for expenses/claims already incurred will not change. Coverage is based on your plan benefits and eligibility at the time your services were rendered. Routine maternity care received within the Health Connect network after January 1, 2021 will be covered under the maternity bundle.
How do I know which clinics and hospitals are within the Health Connect network and eligible for the bundle?	Please call the dedicated Health Connect Navigators at 800-676-1411, Monday through Friday, 7 a.m. to 7 p.m. Pacific Time, for assistance with locating a Health Connect network provider. You can also search for Health Connect network providers using the Find Provider tool on the Health Connect Plan website.
Does the maternity bundle cover newborn care costs?	No, coverage for your eligible newborn's care is not included in the bundle but is covered under the plan's standard cost shares. Go to aka.ms/benefits and search for Summary Plan Description for coverage details or contact customer service at 800-676-1411 (TTY: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time.
What if I move out of area/state?	If you move out of the area, you will no longer be eligible for the Health Connect Plan so you will have to switch plans. At that time, standard maternity cost shares will apply.
Are any medications covered under the bundle?	Prescriptions you receive at the pharmacy are not included as part of the maternity bundle but would be covered under the standard cost shares of the plan. Go to aka.ms/benefits and search for Summary Plan Description for Prescription Drug coverage details or contact customer service at 800-676-1411 (TTY: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time.
When does the copay apply?	The copay of \$500 for the maternity bundle will be billed after the delivery, when Premera receives the Health Connect network facility claim.

Doula Q&A

What is a doula?	A doula is a person experienced in childbirth who provides advice, information, emotional support, and physical comfort to a mother before, during, and just after childbirth.
Who is eligible for the doula allowance?	Members in the Health Connect Plan are eligible.
How do I access the \$1,000 doula allowance?	You will need to pay for doula expenses out of pocket, then complete and submit the Doula Claim Reimbursement Request form for reimbursement.
Does the doula replace nursing staff?	No, doulas do not replace nursing staff. This is an additional benefit available to members in the Health Connect Plan.
What effects does the presence of doulas have on birth outcomes?	Researchers have found that expectant mothers paired with a doula have better outcomes for mothers and babies. Mothers are less likely to have a C-section, and babies are less likely to be born prematurely or be of low birthweight. ¹
Is a doula the same as a midwife?	A doula is not the same as a midwife. A midwife is a licensed health care professional whose focus is on delivering a healthy baby. Doulas, on the other hand, aren't licensed to deliver babies. A doula's primary focus is on the needs of the mother, offering education, support, and advocacy.
Can a doula attend C-section births?	Please refer to your Health Connect network provider as rules/policies may vary between providers.

¹American Journal of Public Health, "Doula Care, Birth Outcomes, and Costs Among Medicaid Beneficiaries," March 8, 2013: <https://ajph.aphapublications.org/doi/abs/10.2105/ajph.2012.301201>; National Institute of Health, "Perceptions and experiences of labour companionship: a qualitative evidence synthesis," March 18, 2019: <https://pubmed.ncbi.nlm.nih.gov/30883666/>; The Journal of Maternal-Fetal & Neonatal Medicine, "Two decades of intervention in New York State to reduce maternal mortality: a systematic review," November, 19, 2019: <https://www.tandfonline.com/doi/full/10.1080/14767058.2019.1686472>

<p>Can I choose my own doula?</p>	<p>Yes. Before seeking doula services, you must be examined by a licensed physician, registered nurse, or midwife and have a confirmed pregnancy.</p> <p>The doula must be state-licensed if the state requires a license. If the state does not require a license, then the doula must have a current certification under a recognized doula certification organization (examples include DONA International and PALS Doulas).</p> <p>Eligible doulas do not have to be in the Health Connect network or Extended network. Exclusions include apprentice doulas.</p>
<p>What services are covered with the doula allowance?</p>	<p>Covered doula services include:</p> <ul style="list-style-type: none"> • In person, phone, and email support throughout the pregnancy and postpartum • Birth support • Lactation support <p>Doula services are not covered for the following:</p> <ul style="list-style-type: none"> • Babysitting or doing household chores • Travel time
<p>Does a doula make decisions on my behalf?</p>	<p>No. Doulas will not make decisions or interfere in your clinical care. A doula can provide informational, physical, and emotional support, while respecting your decisions.</p>
<p>Are there restrictions with doulas in the delivery room?</p>	<p>Doulas are subject to the facility's attendance restrictions. Please refer to your provider.</p>
<p>Can I use my HSA or FSA for doula expenses?</p>	<p>Certain doula expenses not already paid by your health plan (amounts above the \$1,000 allowance) are HSA/FSA eligible with a letter of medical necessity signed by your doctor and a detailed receipt.</p> <p>The following doula services are HSA/FSA eligible:</p> <ul style="list-style-type: none"> • Itemized medical care only, from a certified doula <p>The following doula services aren't HSA/FSA eligible:</p> <ul style="list-style-type: none"> • Emotional support • Parenting information • Childcare • Housekeeping
<p>Why is the doula allowance not offered on the Health Savings Plan?</p>	<p>The Health Connect Plan provides an opportunity to pilot this innovative benefit. We'll use your feedback in future benefit planning sessions to help guide decisions on all medical plans.</p>

Discrimination is Against the Law

Premera Blue Cross (Premera) complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. Premera does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. Premera provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, other formats). Premera provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact the Civil Rights Coordinator. If you believe that Premera has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation, you can file a grievance with: Civil Rights Coordinator — Complaints and Appeals, PO Box 91102, Seattle, WA 98111, Toll free: 855-332-4535, Fax: 425-918-5592, TTY: 711, Email AppealsDepartmentInquiries@Premera.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator 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 Ave SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You can also file a civil rights complaint with the Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint Portal available at <https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>, or by phone at 800-562-6900, 360-586-0241 (TDD). Complaint forms are available at <https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx>.

Language Assistance

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-722-1471 (TTY: 711).

注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 800-722-1471 (TTY: 711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-722-1471 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 800-722-1471 (TTY: 711) 번으로 전화해 주십시오.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 800-722-1471 (телетайп: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 800-722-1471 (TTY: 711).

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки.

Телефонуйте за номером 800-722-1471 (телетайп: 711).

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតលុយ គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 800-722-1471 (TTY: 711)។

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。800-722-1471 (TTY:711) まで、お電話にてご連絡ください。

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶቻችን በነጻ ሊያገለግሉት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 800-722-1471 (መስማት ለተሳናቸው: 711)።

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajjila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 800-722-1471 (TTY: 711).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-722-1471 (رقم هاتف الصم والبكم: 711).

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 800-722-1471 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 800-722-1471 (TTY: 711).

ໂປດອຸບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ຄ່າສິ່ງຄ່າ, ຄວນມີພ້ອມໃຫ້ທ່ານ. ໂທ 800-722-1471 (TTY: 711).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sévis èd pou lang ki disponib gratis pou ou. Rele 800-722-1471 (TTY: 711).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 800-722-1471 (ATS : 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 800-722-1471 (TTY: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 800-722-1471 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 800-722-1471 (TTY: 711).

توجہ: اگر بہ زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 800-722-1471 (TTY: 711) تماس بگیرید.