

Cvent, Inc SimplePay Q&A

Q. How do I check now if my current doctor is in the Aetna network.

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- **1.** You can search for your provider during open enrollment through the following SimplePay microsite link: <u>Cvent SimplePay Health</u>.
- 2. After Open Enrollment, you'll be enrolled in the SimplePay Health plan. Once your coverage becomes active, you'll be able to download the app and register on the SimplePay portal. To get started, visit the App Store or Google Play and search for "SimplePay." Select the "My SimplePay Health" app to download. To register on the portal, go to www.simplepayhealth.com, where you'll find access to tools and programs designed to support you and your health plan.
- **3.** SimplePay Health Valets can help you with finding a doctor in the network as well. Reach out to the Health Valet team:



- Q. If I have an emergency, do I pay for ambulance, emergency room services & the hospital stay? Or does the hospital stay co-pay cover the emergency room services? A. There 2 scenarios to consider:
 - 1. If member goes to a freestanding emergency facility and is transported to a hospital by ambulance: Member will be pay emergency room copay, ambulance copay and an inpatient hospital copay.
 - 2. If member goes to an emergency room by ambulance that is part of a hospital and member is admitted to hospital: Member will pay ambulance copay (plus any balance bill charges) & an inpatient hospital copay. The emergency room copay is waived if member is admitted to the hospital.



Q. Do the copays go towards the Out-of-Pocket?

A. Yes. Medical and RX copays count towards your out-of-pocket maximum. Please see your SimplePay statement (for claims in 2025) or explanation of benefits (for claims in 2026) to see how much out-of-pocket cost has accumulated towards your benefit plan's out-of-pocket max.

Q. I know that out-of-network copays don't contribute to the out-of-pocket maximum, but in an emergency, if I went to an out-of-network ER or was brought to one, would it still not contribute to my out-of-pocket maximum?

A. Emergency room is treated as in-network for emergency situations and would apply to your in-network out of pocket maximum.

Q. What are the 4 Primary components that SimplePay Health uses to assign provider tiers:

- **A**. 4 Primary components are as follows:
 - **1**. **Quality of Care**: Quality is studied first and is the primary driver in assessing a provider's tier. A few of the determining factors for quality include:
 - Outcomes
 - Board Certifications
 - History of Malpractice
 - Hospitalization Rates
 - Timely and Effective Care
 - Readmission Rates
 - **2. Relationships:** Providers that are associated with top-quality service lines at their facility, ensuring great care with every visit.
 - **3. Experience:** Physician years of experience plays a factor in assigning the tier of the provider. Additionally, past member experiences play a role. There is value in having positive experiences with a health care provider throughout your episode of care.



4. Efficiency: Providers that offer the best results for their patients, delivering just the right amount of care to ensure health needs are met.

Q. How does SimplePay's rank providers?

A. SimplePay Health uses one of the country's largest healthcare databases consisting of 30+ billion Medicare and Commercial claims. SimplePay uses this data to accurately determine the quality of providers in your network.

Q. Is there a difference between emergency room and urgent care cost?

A. Yes, urgent care and emergency room visits are distinct. The copay for urgent care is \$50 per visit, while the emergency room copay is \$460 per visit- both amounts apply regardless of the coverage tier or network status.

Difference between urgent care & emergency room:
Urgent Care: Unless a condition is life-threatening, a trip to urgent care is

generally a better use of a patient's time and resources to treat injuries, fevers, infections and other ailments. Urgent care centers often have far shorter wait times than the ER.

Emergency Room: You should call 911 or come right to the emergency room if you are having a life-threatening emergency. Emergency rooms are equipped to take care of any medical emergency. Most of them are attached to a larger hospital that can also provide an even larger range of medical services.

Q. What tier is the best to utilize?

A. All your healthcare purchases have a fixed price like a copay for your out of pocket costs. Those copays are lower for higher quality physicians and facilities (Tier 1) because those providers take better care of you and reduce healthcare costs for you and your health plan over time. SimplePay Health wants you to have sustainable healthcare benefits where you can access the highest quality providers at the most affordable costs possible. This data platform facilitates the stratification of providers into Tiers 1, 2, and 3 with Tier 1 provider being the highest quality and most care efficient options available to SimplePay Members.



Q. If you have secondary insurance, would SimplePay still be a good option?

A. No, SimplePay recommends that you do not elect the SimplePay plan if you have secondary insurance. Some examples of secondary insurance are as follows: Medicare, Medicaid, Medigap, Gap etc.

Q. What is the cost for childbirth under the SimplePay plan?

A. Standard childbirth is covered under the inpatient hospital stay copay. Your first prenatal visit requires a copay; all subsequent pre-natal visits are covered at no additional cost.

Q. Do we need to specify to a provider that we have the Simple Pay plan when asked what insurance we have or is the answer Meritain through Aetna as with the other plans?

A. It is important to give your provider your SimplePay ID card and to let your provider know that you have AETNA, not SimplePay or Meritain. Let them know your provider is in the **Aetna Open Choice POS II Network**.

- Q. Can we choose our own specialists rather than getting a PCP referral, correct?
- **A.** You can choose to see a specialist without getting a PCP referral. There are no referrals needed in any of the Maritta medical plan options.
- Q. There is just one co-pay for a hospital stay? What about if I'm in the hospital for more than 1 week? Will the copay still be \$2,785 if treating physician is a tier 1? It does not matter how long I'm in the hospital, my copay will be the same?
- **A.** One inpatient hospital copay covers the entire hospital stay regardless of time spent in the hospital.



Q. If I have blood taken and multiple diagnostic tests done, is that 1 copay or multiple?

A. If routine lab work is performed on the same day as the office visit, only one bundled office visit applies. If lab work is done on separate days, separate copays apply. Quest and LabCorp locations are considered Tier 1 routine diagnostic labs.

Q. If I go to a tier 1 hospital and must stay 4 days but the doctors on duty are tier 3, are they included in the tier 1 hospital copay?

A. SimplePay does not tier hospital facilities, so the inpatient hospital copay is based on the treating physician. If the treating physician is a Tier 3, then the inpatient hospital copay would be tier 3.