



School District of Elmbrook
 Provider Partner Incentive Program
 Orthopaedic Hospital of Wisconsin Utilizing Specified Premium Designated Providers
(Smart Choice MRI Suspended as of November 30, 2020)

Benefit Incentive Program Guidelines & Disclaimer

Elmbrook Schools is offering an incentive program for health plan members who need orthopaedic/musculoskeletal care and utilize specified health plan partners. The incentive will qualify as taxable income, subject to withholding and will be included on a W-2 income tax form as paid through payroll. Health plan members seeking incentive reimbursement are required by IRS law to process this taxable payment when completing both state and federal income taxes in the year they received the taxable incentive. Health plan-covered family members ages 18 through 26, based on ACA rules, may seek reimbursement, payable through payroll to the health plan holder.

Reimbursement for partner providers, effective with dates of service 1/1/2019 and beyond is as follows:

Provider	Description	Incentive Amount
Orthopaedic Hospital of Wisconsin (OHOW)* 475 W River Woods Pkwy Glendale, WI	All-inclusive procedures performed at OHOW ordered/performed by an OHOW-affiliated premium designated (two-blue heart) provider* (Procedure Costs for incentives include PPO network discounted hospital charges. It does not include physician charges.) Health Plan Covered Procedure Costs: \$1,000-\$4,999	\$250 per all-inclusive procedure
OHOW*	Health Plan Covered Procedure Costs: \$5,000-\$9,999	\$500 per all-inclusive procedure
OHOW*	Health Plan Covered Procedure Costs: \$10,000+	\$1,000 per all-inclusive procedure

*A listing of covered premium designated providers by orthopaedic specialty is available on the "Total Employee Rewards" website--noting providers listed are as current as of the listing date. Confirmation of premium-designation for provider(s) on this listing is necessary through umr.com prior to scheduling appointments.

Incentive reimbursement requests will be available through Skyward Employee Access--see Skyward instructions job aid. (A paper form will be available through request from the HR Benefits Department for retirees and COBRA insureds.) The quarterly reimbursement review process by the HR Benefits Department will include confirmation of qualified services through UMR, Health Plan Administrator. Upon confirmation, an email indicating approval or denial (with reason) will be generated in Skyward and sent to the health plan holder. Payment, upon completion of approval process, will be paid on a quarterly basis.

Quarterly Claim Reimbursement

Submitted By Date*	Payroll/Check Reimbursement Date
February 28/29th	Second Payroll in March
May 31st	Second Payroll in June
August 31 st	Second Payroll in September
November 30th	Second Payroll in December

*Approvals may take 30 days or more based on provider claim submission date and UMR processing date. Claims will be reviewed quarterly as claims are available with email confirmation of status sent to health plan holder. Payment will occur at the next available reimbursement date following request approval.

The member understands that participation in this program is at their discretion by submitting a request for reimbursement, and allows for Elmbrook Human Resources Benefit staff to review patient medical records with UMR, which will be limited to confirmation of provider, date of service and cost of procedure. The member further understands that it is their choice to select an incentivized preferred partner as they do have rights to seek care through non-partner providers, both in- and out-of-network, based on the plan coverages listed in my Summary Health Plan Description document, which could cause the member to have higher out-of-pocket costs that are not qualified for incentive reimbursement.

The member understands that reimbursement received is subject to federal & state income and FICA/Medicare taxation and that the School District of Elmbrook will provide a W-2 form including this as income for tax filing purposes. These guidelines include notification of the quarterly claim reimbursement dates based on the date of approval. The member understand that this incentive program is in place as listed until further communication is posted indicating program revisions or elimination.

By submitting a request for benefit incentive, the member confirms they have read and understand the above program guidelines and disclaimer. A copy of the Summary Health Plan Description (SPD) is available at elmbrookschoools.org/rewards. Contact Lori Golomski, Sr. HR Specialist at golomskl@elmbrookschoools.org or health plan navigator, Alithias at 855-843-8783 with questions.
12/1/2020