




2020



WHOLE HEALTH PLAN
**QUICK
REFERENCE
GUIDE**

FOUR OPTIONS FOR FINDING A DOCTOR

IMPORTANT CONTACT INFORMATION

HELPFUL TERMS TO KNOW

HOW TO READ YOUR INSURANCE CARD

ONLINE RESOURCES WEBSITE LINK




WHOLE
FOODS[®]
MARKET

PRIMARY CARE

Are you in the Whole Health Plan and need help finding a Primary Care physician or a pediatrician for your children? Use the chart below to help you understand your options.

WHERE CAN I FIND A PRIMARY CARE OFFICE OR PEDIATRICIAN?

	YOU HAVE 4 OPTIONS	WHAT YOU DO	COST TO YOU
<p>What to do if you or your dependent needs a primary care physician or pediatrician?</p> 	Option 1	Schedule an appointment with a great provider at the WFM Medical + Wellness Center: Glendale, CA: 818-844-2300 Austin, TX: 512-542-0500	**FREE for all office visits Preventative care is FREE at the WFM Medical + Wellness Centers
	Option 2	Schedule an appointment with a great provider in the Preferred Network Tier (EHN) * Call Web TPA or search the provider directory	Preventative care is FREE **Primary care visits are 25% of cost regardless of whether you have paid your deductible
	Option 3	Schedule an appointment with a great provider in the Expanded Network Tier (Aetna) * Call Web TPA or search the provider directory	Preventative care is FREE You pay 25% for primary care services after you reach your deductible of: \$3,750 individual/ \$4,250 family
	Option 4	Schedule an appointment with a provider out of network	You pay 60% for primary care services after you reach your deductible of: \$7,500 individual/ \$8,500 family


* Web TPA: 833-682-6480 Directory: ehnllc.com/resource/wfm

** HSA members will be charged for non-preventative visits until deductible is reached. Please call the Centers to learn more about our competitive rates. Members who have selected the PWA plan will have access to all free office visits at the WFM Medical + Wellness Centers.



Are you in the Whole Health Plan and need help finding a specialist for you and your dependents? Use the chart below to help you understand your options.

WHERE CAN I FIND A SPECIALIST?

<p>What to do if you or your dependent needs a specialist?</p> 	YOU HAVE 4 OPTIONS	WHAT YOU DO	COST TO YOU
	Option 1	<p>Schedule an appointment with the WFM Medical + Wellness Center first to see if we can help with your concern or if you want help with a referral:</p> <p>Glendale, CA: 818-844-2300 Austin, TX: 512-542-0500</p>	<p>**FREE for all office visits at the WFM Medical + Wellness Centers</p>
	Option 2	<p>Schedule an appointment with a specialist in the Preferred Network Tier (EHN)</p> <p>* Call Web TPA or search the provider directory</p>	<p>You pay 25% for services after you reach your deductible of:</p> <p>PWA \$1,785 individual/ \$2,125 family</p> <p>HSA \$1,785 individual/ \$2,800 family</p>
	Option 3	<p>Schedule an appointment with a specialist in the Expanded Network Tier (Aetna)</p> <p>* Call Web TPA or search the provider directory</p>	<p>You pay 25% for services after you reach your deductible of:</p> <p>\$3,750 individual/ \$4,250 family</p>
	Option 4	<p>Schedule an appointment with a specialist out of network</p>	<p>You pay 60% for services after you pay your full deductible of:</p> <p>\$7,500 individual/ \$8,500 family</p>

* Web TPA: 833-682-6480 Directory: ehnlc.com/resource/wfm

** HSA members will be charged for non-preventative visits until deductible is reached. Please call the Centers to learn more about our competitive rates. Members who have selected the PWA plan will have access to all free office visits at the WFM Medical + Wellness Centers.



WHOLE HEALTH PLAN HELP

Talk To A Nurse For Free 24/7 With Remedy Urgent Care On The Whole Health Plan

Help understand and manage your symptoms

Explore treatment options and where to seek care

Escalate to a video visit appointment with a provider 24/7 if necessary

Contact them at 844-WFM-SICK (844-936-7425) option 2

WHOLE FOODS MARKET HAS PARTNERED WITH REMEDY URGENT CARE TO PROVIDE VIDEO VISITS TO ALL MEMBERS ON THE WHOLE HEALTH PLAN.

Book online: wfm.myremedy.com

Call: 844-WFM-SICK (844-936-7425)

- This is a low cost and effective way to receive care for a variety of issues in a fast and convenient way. Some of the symptoms they can treat by video include: Cold and Flu, Congestion, Cough, Sore Throat, Rashes, Pink

Eye, Allergies, Stomach Issues, just to mention a few!

- Video Visit Providers can send prescriptions directly to your pharmacy after evaluation by video.
- You can get treated by a secure video visit in minutes.
- If they can't treat you, or have to refer you elsewhere for a treatment you do not have to pay.

NEED HELP WITH UNDERSTANDING THE WHOLE HEALTH PLAN?

Below is a list of network partners and how they can help you.

WebTPA



- Handles your **customer service questions** and claims for your medical insurance. Call this number if you have a question about your billing for a doctor visit, need help finding a doctor, or if you have general questions about your insurance coverage.
- You can reach them by phone: **833-682-6480**
- You can also access information on their member portal. Here you can quickly check your deductible, download and print ID cards, and submit questions to Customer Service. All you need to do is register an account at: webtpa.com

Expanded Tier

Aetna Signature Administrators®

- The second in-network provider directory. These doctors are in network through **AETNA SIGNATURE ADMINISTRATORS**. If you choose to see doctors from this directory, you could potentially have to pay more money and do need to reach a **higher deductible** if applicable. *Look at your 2020 Benefits Enrollment Guide on page 8 & 9 for deductible details.*
- You can access this directory from the EHN Member page at: ehnlc.com/resource/wfm/

You don't have to commit to a Tier (or network) of providers at any point during the year. Payments to providers and facilities in the Preferred and Expanded networks count toward the deductible and out of pocket maximum for either network, but not toward the out-of-network deductible or out-of-pocket network maximum. You can go back and forth between EHN and Aetna doctors as needed.

Preferred Tier



- This is one of two in-network provider directories you have available to you in the 2020 calendar year. This list of doctors is organized by our partner **EMPLOYERS HEALTH NETWORK (EHN)**. When you go to doctors within this network you are eligible for a **lower deductible**. *Look at your 2020 Benefits Enrollment Guide on page 12 for deductible details.*
- You can access this directory from the EHN Member page at: ehnlc.com/resource/wfm/

Southern Scripts



- Handles your **medication questions** regarding coverage, prior authorization processes and other resources such as mail order or specialty drug prescriptions. Contact a Customer Representative by calling: **800-710-9341**

BENEFIT CONTACT INFORMATION

HAVE SOME QUESTIONS ABOUT THE WHOLE HEALTH PLAN?

Below is a list of important contact numbers to be aware of and save as a reference.

RESOURCE	ADMINISTRATOR	WEBSITE / EMAIL	PHONE
Whole Health Plan Resource Line		833-682-6480	
	<i>Accessing this number will provide a menu to contact all support services below. We have provided all direct contact numbers and description of services below for your convenience.</i>		
Whole Health Plan General Customer Service	WebTPA	webtpa.com	833-682-6480
Prescription Drugs Customer Service	Southern Scripts	southernscripts.net	800-710-9341
Personal Wellness Account (PWA) Administrator	Discovery Benefits	discoverybenefits.com	866-451-3399
Health Savings Account (HSA)	Discovery Benefits	discoverybenefits.com	866-451-3399

Above is your guide for all customer service support available by the partners of the Whole Health Plan. It is always the direction to contact the resources above for customer service support. If you are not finding the answers you need, please use the grid on the next page as a guide to your next steps and support.

WHOLE FOODS MARKET MEDICAL AND WELLNESS CENTERS

Austin, TX

- Visit: 851 W 6th St., Austin, TX
- Call: 512-542-0500
- Email: SW.AMW.INFO@wholefoods.com

Glendale, CA

- Visit: 800 S. Central Ave, Suite 203, Glendale, CA
- Call: 818-844-2300
- Email: SP.GMC.INFO@wholefoods.com

Additional questions about your benefits? Review a detailed Summary Plan Description (SPD) for each of your benefits in Workday or by visiting **Innerview > Resources > Benefits**. *Contact your TMS representative to learn more.*



ESCALATION PROCESS

WHOLE HEALTH PLAN MEMBER ESCALATION PROCESS

Below is a list of important contact numbers to be aware of and save as a reference.

CLAIMS, COVERAGE AND BENEFITS ISSUES

Level 1	PAYMENT QUESTION COVERAGE OR DENIAL	MEDICAL/ PRESCRIPTION ELIGIBILITY ISSUES	COVERAGE AND BENEFITS	AUTHORIZATION PROCESS	SUPPORT FINDING AN IN-NETWORK PROVIDER
	WebTPA 833-682-6480 option 1				

REIMBURSEMENT ACCOUNT ISSUES (PWA & HSA)

Level 1	PWA CARD PROCESSING ISSUES	PWA CARD BALANCE ISSUES	HSA ISSUES
	Discovery Benefits discoverybenefits.com or 866-451-3399		

PRESCRIPTION & PHARMACY ISSUES

Level 1	PRESCRIPTION COVERAGE	PRESCRIPTION AUTHORIZATION	PHARMACY ISSUES	PHARMACY LOCATIONS & PRESCRIPTION DRUG LOOK UP
	Southern Scripts Southern Scripts Website or 833-682-6480 option 4			

SCHEDULING APPOINTMENTS AT THE AUSTIN AND GLENDALE MEDICAL & WELLNESS CENTERS

Level 1	AUSTIN MEDICAL & WELLNESS CENTER	GLENDALE MEDICAL & WELLNESS CENTER
	Austin Medical & Wellness Center 512-542-0500 or 833-682-6480 option 2	Glendale Medical & Wellness Center 818-844-2300 or 833-682-6480 option 3

READING YOUR INSURANCE CARD

HAVE YOU RECEIVED YOUR NEW WHOLE HEALTH PLAN INSURANCE CARD YET?

Below you will find a sample version of your insurance card. If you have not received your card, make sure to call WebTPA so they can help you print a temporary card and mail you a new card. Also, check to make sure they have your correct address. If any address information is incorrect, you will want to update it in Workday.

You can also access information on their member portal. Here you can quickly check your deductible, download and print ID cards, and submit questions to Customer Service. All you need to do is register an account at: webtpa.com

Your insurance plan is called the **Whole Health Plan**. The administrator for your insurance plan is **WebTPA** and customer service can be reached at **833-682-6480**.

Your insurance card and plan information will be sent to your contact information on file with Whole Foods Market. Please make sure that you have updated Workday with your current address, phone number and email address to ensure delivery of materials and important information regarding your insurance plan.

WHOLE FOODS MARKET

Eligibility or Benefit Questions?
call (833) 682-6480

Administered by
WebTPA

Member

Whole Health Plan - PWA

Group #: WFM
Member: JOHN SAMPLE
Member ID: SMPL0001
Plan: PWA

MBR MBR NAME COV
JOHN SAMPLE
JANE SAMPLE
JIMMY SAMPLE

Medical Network

EHN EMPLOYERS HEALTH NETWORK
<https://members.ehnconnects.com/search>
Aetna Signature Administrators®
Aetna participating physicians and hospitals are independent providers and are neither agents nor employees of Aetna. please visit www.aetna.com/asa.

Pharmacy Plan

Rx BIN: 015433
Rx PCN: SSN
Rx Group: WFM

southernscripts
PHARMACY SERVICES
www.southernscripts.net/members.php
(833) 682-6480

Member ID suffix is not needed to process RX

Insurance Customer Service

Preferred Tier Network

Expanded Tier Network

Prescription Customer Service

Your medical insurance in 2020 is either considered a PPO plan or High Deductible Health Plan.

When visiting a doctor's office, provide your insurance card and let them know that WebTPA is your Insurance Administrator.



ONLINE RESOURCE LINKS

ARE YOU FAMILIAR WITH ALL THE RESOURCES YOU HAVE AVAILABLE TO YOU AS A MEMBER OF THE WHOLE HEALTH PLAN?

The following link will guide you to the resources below: ehnlc.com/resource/wfm. We recommend you save this website to your favorites on your computer as they are your one stop site for accessing provider directories, prescription information as well as coverage details.

Your guide to the resources below.

ehnlc.com/resource/wfm

Frequently Asked Questions

A list of FAQs about the 2020 Whole Health Plan, including general eligibility and benefit information and information regarding the Whole Foods Market Medical and Wellness Centers.

Whole Health Plan Medical Preauthorization List

This list describes which treatments or services require preauthorization under the Whole Health Plan. Please also see detailed information of precertification process found on page 9 of this guide. Failure to obtain preauthorization can result in a \$500 penalty.

2020 Whole Health Plan with HSA Summary of Benefits and Coverage

Important information about coverage available through your Whole Foods Market Whole Health HSA Plan for 2020.

2020 Whole Health Plan with PWA Summary of Benefits and Coverage

Important information about coverage available through your Whole Foods Market Whole Health PWA Plan for 2020.

Preferred Tier Providers - Employers Health Network (EHN)

This lower deductible network level features access to the same high-quality, vetted care providers as available with the 2020 WFM Premier Plan. No referral required!

Expanded Tier Providers - Aetna (ASA)

The higher deductible network level features a broad network of physicians and specialists .

Whole Health Plan In-Network Pharmacy Directory

Browse to find in-network pharmacies near you. Be sure to specify "WFM" as your Group Code.

Whole Health Plan Preferred Drug List/Formulary

This list describes the prescription drugs that are eligible for a lower participant cost under the Whole Health Plan.

2020 Whole Health Plan Preventive Drug List

This list describes what drugs constitute preventive drugs for purposes of the Whole Health Plan. Some preventive drugs are free (and no deductible applies) if filled at an in-network pharmacy. Some preventive drugs are free after the deductible has been satisfied if filled at an in-network pharmacy.

2020 Southern Scripts Whole Health Plan Member Reference Guide

Do you have any questions about your pharmacy benefits? Find the Reference Guide for your 2020 Whole Health Plan, here!

Whole Health Plan Prescription Mobile App (Southern Scripts)

Our mobile app provides convenient and straightforward access to important pharmacy information on your smartphone or tablet. Get download and setup information here.

PREAUTHORIZATION

WHAT DO I NEED TO KNOW ABOUT “PREAUTHORIZATION” UNDER THE WHOLE HEALTH PLAN?

What is the preauthorization process and why do we need it?

The preauthorization process is a utilization management tool that allows WebTPA (your Claims Administrator for the Plan) to review proposed services for medical necessity before the costs are incurred by the Plan and its participants. The purpose of this process is to encourage the receipt of medically necessary treatments and high-quality patient care. By managing these costs up front, we can protect the financial stability of the Plan and continue to deliver high value benefits to all participants.

If I receive a preauthorization, does that mean that the Plan has determined I am eligible for benefits?

Importantly, preauthorization does not verify eligibility for benefits nor guarantee benefit payments under the Plan. The preauthorization process merely provides advance notice of the proposed service or treatment to WebTPA in order to determine whether the service or treatment is “medically necessary” as defined under the Plan.

For which services do I need to obtain preauthorization under the Plan?

The following services require preauthorization:

- Accidental Dental
- Ambulance - Non-Emergent Air and Ground
- Congenital Heart Disease services, if suspected or diagnosed *Required as soon as suspected or diagnosed but before performance of a pre-transplantation evaluation.
- Durable Medical Equipment in excess of \$1,000 (including ear devices, osseointegrated, cochlear or auditory brain stem implants)
- Experimental/Investigational/Unproven Procedures (keratoplasty, total disc arthroplasty, molecular pathology and gene analysis, arthrodesis, external defibrillator, biologic implant)
- Home Health Care
- Home Infusion Therapy
- Hospitalization (including admissions following Emergency Health Services) Includes residential treatment Center
- Injectable Medications
- Maternity (inpatient) Care that exceeds 48 hours for normal delivery and 96 hours for Caesarian birth (* see below for more details)
- Orthotics and Prosthetics (including for lower extremities, helmets, extremity prosthetic additions, electric prosthetic joints, facial prosthesis provided by nonphysician, voice amplifiers, cranial remolding orthosis, lower extremity orthosis, knee brace)
- Radiology - Outpatient (MRI/MRA, CT, PET Scans and Nuclear Medicine Studies)
- Reconstruction Procedures (including varicose vein treatment, breast reconstruction or reduction, blepharoplasty, rhinoplasty)
- Skilled Nursing Facility/Inpatient Rehabilitation Facility
- Sleep Management Program (including obstructive sleep apnea, diagnostic or therapeutic sleep studies)
- Speech Therapy
- Spinal Procedures (including allograft/osteopromotive material for spine surgery, osteotomy, percutaneous vertebroplasty, arthrodesis, laminectomy, vertebral corpectomy, destruction by neurolytic agent, laminotomy, facet joint nerve destruction, spinal cord decompression)



PREAUTHORIZATION (CONT'D)

- Transgender reassignment surgery (Effective 7/1/2018)
- Unclassified Drugs/Biologics (including antineoplastics)
- Vascular Surgery

*Maternity Coverage

The Plan will automatically pre-certify a maternity length of stay that is 48 hours or less for a vaginal delivery or 96 hours for a cesarean delivery. However, it is important that you have your physician call to obtain preauthorization in case there is a need to have a longer stay.

**Urgent Care or Emergency Admissions:

If you need medical care for an Emergency or other condition which could seriously jeopardize your life, obtain such care without delay, and communicate with the Plan as soon as reasonably possible. Precertification of a medical service provided in response to an Emergency situation or urgent care scenario is not required.

If you must be admitted on an Emergency basis, you should follow the physician's instructions carefully and seek preauthorization as follows:

1. For Emergency admissions after business hours on Friday, on a weekend or over a holiday weekend, a call to the preauthorization department must be made within 72 hours after the admission date, but no later than the first business day following the Emergency admission.
2. For Emergency admissions on a weekday, a call to the preauthorization department must be made within 24 hours after the admission date.

What happens if I don't obtain a preauthorization when one is required?

Failure to satisfy the preauthorization requirements (sometimes also referred to as "preauthorization" or "prior authorization") will result in a \$500 reduction in your covered expenses under the Plan. As a result, you may be required to pay the provider the \$500 that was not paid by the Plan.

How do I obtain preauthorization?

In order to obtain a preauthorization, you or your provider must contact WebTPA's preauthorization Department at 833-682-6480.

The request for preauthorization should be submitted 3-5 business days prior to the procedure unless it is an Urgent Care or Emergency Admission. (**See above for more details) If the request is not submitted sufficiently in advance of the date of your service, your procedure may be delayed.

Can I confirm that a preauthorization for a procedure has been obtained?

To confirm that Preauthorization has been obtained, please contact WebTPA at 833-682-6480 prior to your procedure.

Whose responsibility is it to obtain a preauthorization?

As the participant in the Plan, it your responsibility to verify that your provider (whether Network or Non-Network) has obtained a preauthorization prior to your procedure. Although some Network Providers may submit a request for preauthorization on your behalf, not all Network Providers are required to do so under their network contracts. Furthermore, Non-Network Providers have no contractual obligation to submit the request for certification on your behalf. Accordingly, you should confirm that preauthorization has been obtained prior to the date of your service or treatment.



This guide is a summary of the Whole Foods Market Whole Health Plan and is neither an offer nor a guarantee of employment. It does not contain every provision that governs rights to benefits. If you have questions about the nature and extent of your benefits, the formal language of the Plan Document, not the informal language of this guide, will govern. Whole Foods Market reserves the right to change, modify or terminate any Team Member benefit plan at any time. All Team Members will be given notice of these changes.

