


# South Dakota Bankers Benefit Plan


# 2024 Benefits Booklet



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## south dakota bankers insurance & services update....

BY MIKE FEIMER | President | South Dakota Bankers Insurance & Services Inc.

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# The South Dakota Bankers Benefit Plan (SDBBP) will see only a 3% rate increase for 2024.

## There will also be a December 2023 Premium Holiday!!!!

**"A December premium holiday combined with a 3% increase for 2024 is roughly equivalent to a -5.33% decrease in annual premium!!" Joseph Anglin, SVP/CFO Pioneer Bank & Trust & SDBBP Trustee**

**S**DBBP has experienced well below medical trend rate increases over the past eight years. Our annual increases have been 3.4%, 2%, -3%, 4%, 4%, 1.5%, 5%, 4% and 2024's 3% increase.

In the current claims period, 71% of our members incurred under \$2,500 in claims for the past 12 months; last year, it was 73%, very good numbers as we have seen in the past, once someone enters the hospital with a complicated medical condition, the price skyrockets. In the current period, 21 members with claims paid over \$100,000, accounting for 29% of the total claims. Covid losses continue to be a non-issue during 2024. Many doctors are very concerned about vaccinating anyone under the age of 30 for Covid, and now many studies have uncovered serious health conditions related to the COVID vaccines.

When looking at the pharmacy trend specific to SDBBP, the percent of the cost variance will depend on the period of time we are looking at. We rely on the Wellmark Annual Core Report, which shows that during the period of June - May 2019 to 2020, there was a 10.4% increase in the Rx trend. 2021 to 2022 was 10.4%. The Rx trend is a blend of both the cost of the drugs and the utilization. For the current period (2022 to 2023), the cost of prescriptions has increased, and utilization, or the number of prescriptions, has also increased (cost +11.6%, utilization +3.7%). In the Rx world, there is the push for Specialty Drugs - those with price tags of \$600 to \$9,000 per injection, and many of these prescriptions go directly to the consumer, bypassing the local pharmacy. An additional drive is to move as many prescriptions as possible to generic, which drives our costs down, but it does negatively affect our local pharmacy. We are seeing pharmaceutical companies pushing to go directly to the consumer via direct mail, as evidenced by the growth in revenue from 2012 to 2022 of over 185%.

The medical trend also includes cost and utilization and looks at the current year's claims experience change compared to the prior year. Overall utilization of medical services has decreased: inpatient -7%, outpatient -14%, and office visit -3%. Even with the decrease in the number of services utilized, the costs of those services have increased in each of these areas: +18% inpatient, +29% outpatient and +2.5% office. This has an overall +6% trend in medical claims specific to SDBBP. Office services are the only category that went down at -1% overall. A driving factor in the increase of costs of services includes the intensity of services needed.

The overall blended trend of prior year claims to current for medical and Rx combined is 8.6%. This falls closely in line with what Wellmark is seeing as an overall trend. When projecting expected claims for the upcoming year, the trend is considered, including SDBBP's Rx and medical trend, along with Wellmark BCBS' experienced and projected trend. There are several factors

reviewed to project anticipated changes in costs, including technology, legislation and government, medical policy, cost-shifting, and general inflation in costs that providers charge for goods and services. Wellmark is projecting Rx drugs will cost 12% more next year and medical 7%. SDBBP's Rx now makes up 25% of overall claims, with BCBS's book of business being about 30%.

Our objective was to build reserves over the last nine years to allow us the flexibility to flatten rate increases when needed. Building reserves early to combat higher rate increases for unforeseen events like COVID-19 is the strength of our large group plan. The Medical Trend Rate, which is 8.6%, is added to our 2023 experience, which equaled a recommended 4% rate increase for 2024. Because of our strong reserve holdings, the board approved a 3% increase for 2024.

### Annual Fall SDBBP Meeting

The fall meeting will occur at the Wellmark offices in Sioux Falls on Friday, October 13th. The SDBBP MET Board held its annual Board meeting on September 29, 2023, at One American Bank in Sioux Falls. The Board approved continuing the Heart and Vascular Screening and Hinge Health programs through 2024. The Board also approved the 3% rate increase for 2024. We are revamping some of our investment strategies to take advantage of tax-deferred investment.

We will continue utilizing Wellmark as our third-party administrator. There is no change to our provider network, and we will still have all the provider discounts we currently experience. BCBS is the best carrier in the country, with the largest network and deepest discounts.

### Heart Health Screening Program

The SDBBP Board has approved continuing to offer the Heart Health Screenings paid for by the Plan for 2024. 330 eligible members have been screened to date, and many underlying issues have been uncovered before they have become serious. Some of the issues were serious, and before they became catastrophic, medical intervention was implemented.

### Hinge Health - Virtual Physical Therapy Program

118 eligible members have participated in this new Hinge Program in 2023. By week 12 of participation, 57% of those members experienced a reduction in pain, and 55% experienced a reduction in surgery intent! The Board has approved continuing this program offering in 2024. We have spent \$110,000 for this program in 2023 with a projected ROI of 3.89 and projected savings of \$323,086.

### CVS Caremark and PrudentRx Collaboration

Our benefit pharmacy manager, "CVS Caremark," has collaborated with PrudentRx to help save dollars on specialty medications. This program is a solution to address the rising



costs of specialty medications through the optimization of manufacturer copay coupons offered to utilizers. SDBBP has opted to enroll in this program for 2024 as 3% percent of our enrolled members use specialty medications, which accounts for an annual spend of \$3M. PrudentRx's high-touch, seamless process identifies and assists members in navigating through the various copay assistance solutions available to them while constantly monitoring the specialty claims to increase client savings with minimal member disruption. Members receiving their specialty drugs through PrudentRx will have a \$0 member cost share. This is a program I recommended five years ago to BCBS - we are now seeing it in effect for our members. Through the use of PrudentRx, we are expected to see a 9% savings of \$290,000.

### Reporting Requirements & Notices

We will continue to be required to report coverage to the IRS. The 2023 IRS employer shared responsibility reporting requirements for each bank are done on one of two forms: 1095-B for banks under 49 employees and 1095-C for banks over 50 employees. You must provide your employees with this information by Jan. 31, 2024. For the calendar year 2023, forms are required to be filed with the IRS by Feb. 29, 2024, or March 31, 2024, if filed electronically. The SDBIS will continue to supply a data set to each bank on its covered employees to help complete these forms.

### Plan Features:

#### Five Deductible Plans

The SDBBPT, administered by Wellmark, is designed to provide flexibility to the employer and employee. The employer may allow its employees to choose from five different deductible plans: \$500, \$1,000, \$1,500, \$2,000, \$3,000, and one high-deductible/HSA health plan. Employees can choose the deductible that fits their needs and budget. Remember, one may only move one deductible level each year.

#### Early Retirement Option

Another outstanding benefit is the early retirement option, which allows employees with five-plus years of employment in their bank and reached the age of 60 or older to remain on the health and dental plans until they reach Medicare-eligible age (spouse included with a maximum of 5 years of coverage). We have had numerous employees take advantage of this benefit, and they are thankful it was available to them.

#### BluesEnroll

Our banks can manage their benefits online, which eliminates the transfer of paperwork back and forth.

Banks can enroll new employees, add dependents, and terminate employees online in real time. BluesEnroll also works with Delta Dental. If you have not taken advantage of BluesEnroll, contact Michelle Guthmiller with SDBIS at 800.221.7551 or mguthmiller@sdba.com. She will help you utilize this very powerful tool.

#### Out-of-State Coverage

Wellmark's network extends to all 50 states and includes 200 countries. We must remember that our health plan is priced for experience within the state.

#### No-Balance Billing

All the plans have a \$30 PPO office visit co-pay and no-balance billing. No-balance billing means that the in-network providers have already agreed to accept the claim payment from our partner Wellmark as payment in full for their services.

#### Excellent Benefits

Along with outstanding in-patient health benefits, all our plans include coverage for routine exams, well-child services,

chiropractic care, outpatient services, and prescription drugs.

#### Doctors on Demand

We are continuing to offer a lowered co-pay of \$10 for Doctors on Demand virtual visits. Feeling better should be easy, and this virtual visit benefit can be experienced from anywhere, anytime. We encourage our members to give this benefit a try.

#### Rx Benefits

Generic prescriptions remain at \$10.

#### COBRA Administration & Billing Services

SDBIS continues to administer COBRA notification, enrollment, and billing services for health and vision on behalf of the members of the SDBBP.

#### EMC National Life Insurance and Accidental Death & Dismemberment (AD&D) Benefit: (No Rate Increase)

The rates remain the same for 2024! - \$0.128 per \$1,000 for basic life and \$0.02 for AD&D. Group term life rates are now guaranteed until Jan. 1, 2023. EMC National Life Company continues to provide excellent service. Along with any health plan, each employee has a minimum of \$5,000 of life insurance coverage with a matching \$5,000 of AD&D coverage. A guaranteed issue of \$30,000 of voluntary life coverage (employee paid) and \$10,000 for spouses and children is still available for new employees. Please refer to the benefits booklet for additional details.

#### Vision Care (1.6% Increase)

This is the 18th year of offering VSP as our vision benefit and with a 1.6% rate increase, this rate will remain the same until Jan. 1, 2028. The employee can upgrade the coverage to Plan B or C with a four-tier rating to match up with our health insurance plan, such as employee only, employee plus spouse, etc.

#### Delta Dental (5% Increase)

The plan offers dental coverage through Delta Dental, which has the largest dentist network in South Dakota and spans nationwide. They offer no-balance billing, are easy to use, and provide great coverage for a great value with rate stability. For the 2024 plan year, rates will increase 5%. The monthly rates are \$53.14 for single and \$145.96 for family. Prevention Pays are added to the plan, meaning diagnostic and preventative services no longer apply to the annual maximum benefit. Check out the Lifesmile® library, where you will find articles, videos, and brochures to share with employees. [www.deltadentalsd.com/lifesmile](http://www.deltadentalsd.com/lifesmile).

#### Providing Rate Stability

Being part of the SDBBP supports the SDBA, which continues to work with and for the banking industry of South Dakota. This plan is available now for entry with a Jan. 1, 2024, effective date. If you are not part of our plan, we encourage you to compare your current benefits and rates with what we offer. These plans are exclusive to the SDBA and not available from any other source.

The SDBBP is designed to provide rate stability. Especially in today's volatile market, it is risky to stand alone regarding your health coverage. You can be confident with your selection because you will be working directly with people you know and who are focused on serving the needs of all SDBA members.

In the healthcare business, size matters. It is up to all members of the SDBA to join together and support these outstanding benefit plans and provide your employees with quality, affordable health insurance.

For questions, contact Mike Feimer at 605.660.2341 or [mfeimer@sdba.com](mailto:mfeimer@sdba.com), or Michelle Guthmiller at 800.221.7551 or [mguthmiller@sdba.com](mailto:mguthmiller@sdba.com). 🌈



## South Dakota Bankers Benefit Plan Contacts...

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Phone (800) 726-7322  
Fax (605) 224-7835

**Wellmark Blue Cross Blue Shield of SD  
CUSTOMER SERVICE (800) 774-0384**

**VSP**  
Member Services (800) 877-7195  
Monday – Friday 5am to 8pm Pacific  
[www.vsp.com](http://www.vsp.com)

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**RELIANCE STANDARD**  
Laura Davis  
Client Service Representative  
[Laura.davis@rsli.com](mailto:Laura.davis@rsli.com)

Fax: (913) 253-4811  
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**WageWorks Flex**  
EMPLOYER SITE  
[www.employer.wageworks.com](http://www.employer.wageworks.com)  
EMPLOYEE PORTAL  
[www.wageworks.com/employees](http://www.wageworks.com/employees)  
Customer Service (877)-WAGEWORKS  
Email Employer Support:  
[wellmarksupport@wageworks.com](mailto:wellmarksupport@wageworks.com)

**BENEFIT FOCUS WEBSITE ISSUES**  
Katherine Sullivan  
Phone (843) 981-3118  
Monday – Friday 7:00am to 5:00pm CST

**WELLMARK  
HEALTH/MEDICARE SUPP**

## SOUTH DAKOTA BANKERS BENEFIT PLAN RATES EFF JAN 1, 2024

	BLUE	YELLOW	WHITE	RED	GREEN	H S A / HDHP
	71746-196 71764-97	71746-197 71764-97	71746-198 71764-97	71746-199 71764-97	71746-200 71764-97	71746-195 71764-96
<b>Deductible</b>	Single - \$500 Family - \$1500	Single - \$1000 Family - \$2000	Single - \$1500 Family - \$3000	Single - \$2000 Family - \$4000	Single - \$3000 Family - \$6000	Single - \$3000 Family - \$6000
<b>Office Visit Copay</b> <b>Virtual Visit Copay</b>	\$30 \$10 for Virtual Visit with Doctors on Demand (Medical & Mental Health)					Deductible & Coinsurance Applies
<b>Emergency Room Copay</b>	\$250					Deductible & Coinsurance Applies
<b>Coinsurance</b>	In-Network - 20% / Out-of-Network - 40%					
<b>Health OPM</b>	Single - \$1500 Family - \$3000	Single - \$2000 Family - \$4000	Single - \$3000 Family - \$6000	Single - \$4000 Family - \$8000	Single - \$4500 Family - \$9000	Single - \$4500 Family - \$9000
<b>Rx OPM</b>	Single - \$1500 Family - \$3000 SEPERATE from Health					Single - \$4500 Family - \$9000 DED/OPM AGGREGATE
<b>Lifetime Max</b>	Unlimited					
<b>Chiropractic Care</b>	\$30 Copay - limited to 12 visits per benefit period					Deductible & Coinsurance Applies
<b>Routine Exams</b> <b>Preventative Care -</b> <b>No Member Cost Share</b>	One Preventive exam per calendar year, including separate gynecological exam; immunizations, One Preventive mammogram per calendar year, pap smears, diagnostic screenings for prostate cancer, Smoking Cessation Rx and Related Exams . Women's Preventive benefits according to ACA guidelines .					
<b>Well-Child Care</b>	To age 7					
<b>BLUE Rx VALUE PLUS</b> <b>Deductible waived for</b> <b>Generic</b>	\$100/\$200 Deductible \$10/\$40/\$55 Copays \$85 Specialty and Self Administered Rx					Single - \$3000 / Family - \$6000 DED /OPM Aggregate between Health & Rx <i>** Benefit period deductible is waived for HSA preventive drug list</i>
	<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>	<b>Option 4</b>	<b>Option 5</b>	<b>H S A</b>
Employee-----	\$849	\$818	\$769	\$733	\$685	\$733
Family -----	\$2,600	\$2,508	\$2,364	\$2,252	\$2,102	\$2,252
Employee Spouse -----	\$1,736	\$1,674	\$1,578	\$1,502	\$1,404	\$1,502
Employee Child(ren)-----	\$1,605	\$1,548	\$1,462	\$1,388	\$1,297	\$1,388
All Employees will have <b>VSP PLAN A Vision</b>	\$4.42	\$4.42	\$4.42	\$4.42	\$4.42	\$4.42
	<b>Employee</b>	<b>Employee+Spouse</b>	<b>Employee+Children</b>	<b>Employee+Family</b>	<b>DELTA DENTAL</b>	
<b>VSP Plan B Buy-up</b>	\$6.74	\$13.49	\$14.42	\$23.08	Single	\$53.14
<b>VSP Plan C Buy Up</b>	\$8.99	\$17.95	\$19.22	\$30.71	Family	\$145.96



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## Summary of Benefits and Coverage (SBC)

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### \* COMPLIANCE \*

**Please make available to your employees per the instructions below.**

Electronic copies of the Summary of Benefits & Coverage (SBC's) for all plans will be emailed to each member bank.

Thank you for choosing the South Dakota Bankers Benefit Plan for your health administration needs. We are pleased to provide you (via email) the Summary of Benefits and Coverage (SBC) document(s) to illustrate your health plan benefits administered by the South Dakota Bankers Benefit Plan and Wellmark.

Under the Affordable Care Act (ACA), providing SBC's to participants and beneficiaries is a shared responsibility between third party administrators and employers. As such, South Dakota Bankers Benefit Plan are providing you with these SBC's, which you must distribute or make available to your employees and COBRA beneficiaries.

One SBC should be provided to a family unless a covered member is known to reside at a different address. In that case, please provide a separate SBC.

#### **Minimum Essential Coverage (MEC) and Minimum Value (MV)**

SBC's are required to contain language regarding whether a plan provides Minimum Essential Coverage (MEC) and if the plan meets the Minimum Value (MV) standard of 60 percent. Language has been added to the SBC's indicating your plan(s) does qualify as MEC and whether or not it meets the MV standard. Wellmark is including this information in SBC's for self-funded groups that have provided them with an approved outside actuarial certification, and/or for plans that have passed through the Health and Human Services' (HHS) Minimum Value (MV) calculator without outside actuarial analysis.

#### **Ongoing Responsibilities**

Throughout the year, you are responsible for providing SBC's at certain times including:

- As part of written application materials for:
  - Open Enrollment, where employees actively elect to maintain, enroll, terminate, or change coverage
  - Newly eligible employees, such as new hires that have satisfied their eligibility waiting period
  - Late Enrollees
- If not holding an open enrollment, 30 days prior to the new plan year if auto-renewing with no benefit changes; otherwise, within 7 business days of receipt of the signed Binder Agreement
- No later than 90 days from enrollment for special enrollees (however, an SBC must be provided within 7 days if one is requested by the special enrollee)
- No later than 60 days prior to the effective date of a material modification, such as an off-renewal benefit change
- Within 7 business days of a participant request

**South Dakota Bankers Benefit Plan Contact:**

Michelle Guthmiller ♦ (800)221-7551 ♦ [mguthmiller@sdba.com](mailto:mguthmiller@sdba.com) ♦ [health@sdba.com](mailto:health@sdba.com)

## Medicare Supplement Group Program

### Group Benefit Administrator

The South Dakota Bankers Benefit Plan in association with Wellmark BCBS, would like to announce the availability of an Employer Group Retiree Program (EGRP) providing Medicare Supplement coverage to retirees. This is a program your bank can offer at no cost to you while still providing valuable benefits to your retired bank employees and their spouses.

On January 1, 2020, the Federal Government stopped offering Medicare Plan (F) in the individual market. Plan (F) was the most popular plan for both new and existing Medicare enrollees. Now, individuals turning age 65 after 1-1-2020 are no longer able to purchase this popular plan on their own. Fortunately for members of the South Dakota Bankers Benefit Plan, the plan (F) is now available through the Employer Group Retiree Program (EGRP) from Wellmark BCBS, A trusted medical insurance provider in South Dakota for over 75 years.

The Employer Group Retiree Program (EGRP) from Wellmark BCBS will provide retirees not one, but two programs to choose from. A traditional Medicare Program (F) and a High Deductible Program (F). Retirees can enroll in either of these (F) programs without any medical underwriting questions and they will pay the same premium regardless of their age or gender. In addition to the Medicare plans being offered, retirees can also simultaneously purchase vision and hearing coverage through Avesis on a guaranteed issue basis and without any waiting periods.

### How will it work?

- The employer informs employees of this benefit option and who is eligible through normal channels.
- Eligible individuals must be age 65 or older, retired (no longer working and/or no longer eligible to be on the SDBBP group health plan) and be enrolled in Medicare Part A and B. If you wish to offer coverage to other non-bank retirees (i.e. board members), Wellmark BCBS normal group benefit eligibility guidelines will apply.
- The employer will provide the EGRP packet from BCBS to qualified members when they retire.
- All retirees will be directed to contact Wellmark BCBS at 800-691-1030 if they have any questions about this program.
- If the retiree selects one of the programs offered under the EGRP, they must submit the application that will be included in the packet and send it directly to Wellmark BCBS at the address listed on that application.
- Retirees will need to purchase their own Medicare Part D prescription drug plans. This can be done directly by phone with BCBS at 800-691-1030 or through their local agent.
- Retirees will also be able to purchase vision and hearing coverage through Avesis on a guaranteed issue basis and without any waiting periods by completing this section on the Medicare Plan application enclosed in the EGRP packet and returning it to Wellmark BCBS.
- Retirees will then be billed directly by Wellmark BCBS.







### **What do you as the Group Benefit Administrator need to do?**

1. If you wish to offer this program to your retirees, start by completing the Fact Finder in this section and return it to South Dakota Bankers Insurance & Services, 1818 Broadway Ave, Suite 6, Yankton, SD 57078.
2. Once your bank has returned the Fact Finder, SDBIS will forward this on to Wellmark BCBS to have your bank set up to begin offering the program.
3. You will then be sent a contract from Wellmark BCBS to sign and return.
4. Once the signed contract is returned, Wellmark BCBS will then mail the requested number of packets to you. Then you are ready to start offering the program.
5. Group administrators will then be responsible for informing employees of this new benefit in the same manner used to communicate any other employee benefit options (i.e. update employee handbook, put information on your internal employee benefits page, etc.).
6. If you have an agent in your bank that sells Wellmark BCBS Medicare Supplement products and you wish to participate in this program through them, they can contact their current Wellmark group representative or agency to set up an individual separate EGRP for your bank.

We hope you will participate in this valuable retiree program.

### **South Dakota Bankers Benefit Plan Contact:**

**Dean Franzen ♦ (800)221-7551 ♦ [dfranzen@sdba.com](mailto:dfranzen@sdba.com) ♦ [health@sdba.com](mailto:health@sdba.com)**



# Employee Group Retiree Program (EGRP) Fact Finder - Checklist

## GROUP INFORMATION

Group Name \_\_\_\_\_ Effective Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ County \_\_\_\_\_  
Tax ID \_\_\_\_\_  
Plan Code(s) \_\_\_\_\_ OBS Code(s) \_\_\_\_\_  
Coverage Code(s) \_\_\_\_\_ Prefix(es) \_\_\_\_\_ Premium(s) \_\_\_\_\_  
Group Number(s) \_\_\_\_\_ Account Key \_\_\_\_\_

## GENERAL INFORMATION

AOR Dean Franzen Account Team Matthews  
Group Contact Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

### Who will be billed?

- Group  
 Individual Members

### What type of Prescription Drug Plan (PDP)?

- Group  
 Individual Members

### Is there an active employer group?

- Yes If yes, please fill out the following group information:  
 No

Group Number \_\_\_\_\_ Account Key \_\_\_\_\_  
AOR \_\_\_\_\_ Account Team \_\_\_\_\_

## EMPLOYEE PACKETS

Number of Packets Needed \_\_\_\_\_

### Address for Delivery:

Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

### Who should members contact with questions?

Name Wellmark Blue Cross Blue Shield Medicare Team Title \_\_\_\_\_  
Phone Number 1-800-691-1030

Address for BRE: Medicare Business Team, Station 3W332

Street Address 1331 Grand Ave  
City Des Moines State IA ZIP 50309

Binder Sent \_\_\_\_/\_\_\_\_/\_\_\_\_

Binder Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Packets Requested \_\_\_\_/\_\_\_\_/\_\_\_\_

# **EMPLOYEE HANDOUTS**

# Wellmark's ACA preventive services list

Information update: January 2023



## How preventive services are defined

Preventive services are defined under Section 2713 of the ACA as immunizations, screenings, and other services that are listed as recommended by the United States Preventive Services Task Force (USPSTF), the Health Resources Services Administration (HRSA), or the federal Centers for Disease Control (CDC).

The services identified by the ACA to clinicians are recommendations, not mandated services. Clinicians are best able to determine which services to provide.

## Affordable Care Act (ACA) coverage for preventive services

The ACA mandates that all non-grandfathered group and non-grandfathered individual health plans must provide coverage for preventive services with no member cost share when delivered by in-network health care providers. In accordance with this ACA requirement, Wellmark covers preventive services when they are delivered by in-network providers.

Benefit coverage and cost sharing will still apply for out-of-network services as specified by member coverage manuals. Additionally, health plans may apply cost sharing to out-of-network preventive care and use reasonable medical management techniques to help control costs and promote efficient delivery of care.





# Preventive services covered under the ACA

This list is not all-inclusive, and benefits are not guaranteed. It outlines benefits with zero cost share. All information is dependent upon the terms of your coverage. Please refer to your coverage manual for information about your benefits. This document was last updated in January 2023 and will be updated periodically. Information is subject to change.

## ADULTS

- Abnormal blood glucose and Type 2 diabetes mellitus screening as part of a cardiovascular risk assessment for patients, aged 35 to 70, who are overweight or obese
- Annual wellness examination
- Aspirin for the prevention of cardiovascular disease in men and women of certain ages (prescription required)
- Cardiovascular disease risk assessment for men and women ages 40 to 75 years old (total cholesterol, LDL-C and HDL-C; or lipid panel)
- Colorectal cancer screening and bowel preparation medicine
- Depression screening
- Healthy diet and physical activity counseling for cardiovascular disease prevention in adults with cardiovascular risk factors
- Hepatitis B screening: in persons at high risk for infections
- Hepatitis C screening: Asymptomatic adolescents and adults (including pregnant persons) without known liver disease
- High blood-pressure screening,\* including obtaining measurements outside the clinical setting, to include ambulatory blood pressure monitoring and home blood pressure monitoring before starting treatment
- HIV PrEP evaluation, including pre-initiation and periodic laboratory tests, for adolescents and adults who are at high risk of acquiring HIV
- HIV screening: for all adults through age 65 and older adults who are at increased risk
- Immunizations: COVID-19; Diphtheria, Tetanus, Pertussis; Haemophilus influenzae type b; Hepatitis A; Hepatitis B; Herpes Zoster (age 50 and older); Human Papillomavirus; Influenza (Flu Shot); Measles, Mumps, Rubella; Meningococcal; Pneumococcal; Varicella (as recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC) on the CDC Immunization Schedules)
- Low to moderate dose statins (generic only) for men and women ages 40 through 75 years old for the prevention of cardiovascular disease events and mortality (prescription required)
- Lung cancer screening — annual computed tomography (CT) scan for at risk adults age 50 to 80 with a 30 pack-year history and currently smoking or have quit smoking within the past 15 years
- Obesity screening for all adults. Clinicians should refer patients with BMI of 30 kg/m<sup>2</sup> or higher to intensive, multicomponent behavior interventions
- Pre-Exposure Prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition
- Screening for latent tuberculosis infection in populations at increased risk
- Sexually transmitted infections (STI) behavior counseling for adults who are at increased risk for STI
- Skin cancer counseling young adults through 24 years of age about minimizing exposure to ultraviolet radiation to reduce risk of skin cancer\*
- Syphilis infection screening for non-pregnant adult at increased risk for infection
- Tobacco use screening, counseling, and cessation interventions including FDA-approved tobacco cessation over-the-counter products and prescription medications (prescription required for all options; limited to 180-day supply per year)

- Unhealthy alcohol use screening and behavioral counseling interventions
- Unhealthy drug use screening in adults age 18 years or older

## MEN ONLY

- Abdominal Aortic Aneurysm: one-time screening with ultrasonography for men age 65 to 75 who have ever smoked

## WOMEN ONLY

- Anxiety screening in adolescent and adult women, including those who are pregnant or postpartum
- BRCA Related Cancer: Risk assessment, genetic counseling and genetic testing for women who have family members with breast, ovarian, tubal or peritoneal cancer with 1 of several screening tools designed to identify a family history that may be associated with an increased risk for potentially harmful mutations in breast cancer susceptibility genes (BRCA1 and BRCA2). Women with positive screening results should receive genetic counseling and if indicated after counseling, BRCA testing
- Breast cancer medication for risk counseling for those who are at increased risk for breast cancer
- Cervical cancer screening annually for women age 21 to 65
- Chlamydia screening in sexually active non-pregnant women and older non-pregnant women who are at increased risk for infection
- Contraception and contraceptive counseling: this applies to FDA-approved contraceptive methods for female of all ages
- Gonorrhea screening in sexually active non-pregnant women and older non-pregnant women who are at increased risk for infection
- HPV DNA test: women age 30 and older, regardless of pap test results
- Intimate partner violence screening and provide or refer women who screen positive to interventional services\*
- Medications for risk reduction of breast cancer in women age 35 and older who are at increased risk for breast cancer and at low risk for adverse medication effects (prescription required)
- Obesity prevention counseling in midlife women aged 40 to 60 years with normal or overweight body mass index (BMI) (18.5-29.9 kg/m<sup>2</sup>).
- Osteoporosis screening in women aged 65 years and older and in younger women who fracture risk is equal to or greater than that of a 65 year old female who has no additional risk factors
- Screening mammography (2D): breast cancer screening annually for women age 35 and older
- STI and HIV screening and counseling: annual counseling on HIV and STIs for sexually active women
- Well-woman visits, including annual well-woman preventive care office visits

## PREGNANT WOMEN

- Anxiety screening in adolescent and adult women including those who are pregnant or postpartum
- Asymptomatic bacteriuria screening
- Breast feeding support and counseling from trained providers during pregnancy and/or during the postpartum period and breast feeding supplies
- Chlamydia screening
- Daily folic acid supplements for women capable of becoming pregnant (prescription required)

\*Services marked with an asterisk indicate those services that may be delivered and billed within wellness exam or well-child exam from an in-network provider.

- Gestational diabetes screening in asymptomatic pregnant women
- Gonorrhea screening
- Healthy weight gain in pregnancy. Pregnant women should receive behavioral counseling to promote healthy weight and prevent excessive weight gain in pregnancy.
- Hepatitis B virus infection screening at first prenatal visit
- Hepatitis C screening: Asymptomatic adolescents and adults (including pregnant persons) without known liver disease
- HIV screening
- Iron deficiency anemia screening
- Provide or refer persons at increased risk of perinatal depression to counseling interventions
- Rh (D) blood typing and antibody testing for incompatibility screening
- Syphilis infection screening
- Tobacco use screening and provide behavioral interventions for cessation

### NEWBORNS/CHILDREN/ADOLESCENTS

- Alcohol and drug use assessment for adolescents\*
- Annual well-child examination
- Anxiety screening – See Women Only
- Autism screening for children through age 2 years
- Behavioral assessments for children
- Blood pressure screening\*
- Cervical dysplasia screening for sexually active females
- Depression: Major depressive disorder screening for adolescents age 12–18 years
- Developmental screening for children under age 3, and surveillance\* throughout childhood
- Dyslipidemia screening for those at higher risk of lipid disorders age 9 through 20 years
- Gonorrhea, prophylactic medication for newborns
- Fluoride varnish application in the primary care setting to the primary teeth of all children from birth through age 5 years
- Hearing screening for newborns and children, birth through age 20
- Height, weight and body mass index measurements\*
- Hematocrit or hemoglobin screening through age 1 year
- Hemoglobinopathies screening: sickle cell screening for newborns, birth through 28 days
- Hepatitis B screening for adolescents at high risk, age 11 through 17 years
- Hepatitis C screening: Asymptomatic adolescents and adults (including pregnant persons) without known liver disease
- HIV screening for adolescents age 15 and older, and younger adolescents who are at increased risk
- Hypothyroidism screening for newborns, birth through 28 days
- Immunizations: COVID-19; Diphtheria, Tetanus, Pertussis; Haemophilus influenzae type b; Hepatitis A; Hepatitis B; Human Papillomavirus; Inactive Poliovirus; Influenza (Flu Shot); Measles, Mumps, Rubella; Meningococcal; Pneumococcal; Rotavirus; Varicella (as recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC) on the CDC Immunization Schedules)
- Lead screening for children at risk to exposure, birth through 6 years
- Medical history for all children throughout development\*
- Newborn bilirubin screening, birth through 28 days
- Obesity screening in children and adolescents age 6 through 17 years
- Oral health risk assessment\*

- Phenylketonuria (PKU) screening for newborns, birth through 28 days
- Prescription of oral fluoride supplementation by the primary care clinician for children from birth through age 5 years whose water supply is deficient in fluoride
- Prevention and cessation of tobacco use (includes e-cigarettes) in children and adolescents (primary care interventions) including education and brief counseling.
- Skin cancer counseling children and adolescents aged 10 through age 17 about minimizing exposure to ultraviolet radiation to reduce risk for skin cancer\*
- STI behavioral counseling for all sexually active adolescents who are at increased risk for STIs.
- Syphilis screening in adolescents who are at increased risk for infection
- Tuberculin testing for children at higher risk of Tuberculosis, birth through age 17 years
- Vision screening to detect amblyopia or its risks for children age 1 through 5 years
- Visual acuity screening in children and adolescents, age 3 through 15 years

### ADDITIONAL INFORMATION:

- Preventive services are routine health care services that prevent illness, disease or other health problems before symptoms occur.
- For those preventive services listed above that indicate “high risk” or “increased risk,” the member should consult with their attending physician to determine if applicable.
- For transgender individuals, sex-specific preventive care services are covered when considered medically appropriate by the attending physician.
- Age, gender and visit limitations may apply.
- Wellmark will apply its standard medical management policies and procedures as specifically mentioned and allowed under the ACA.
- Prior authorization policies for selected services will remain in place.
- Members of Wellmark Health Plan of Iowa and Wellmark Value Health Plan are required to receive most preventive services from their designated primary care practitioners.
- Claims for covered immunizations, whether submitted and paid under a Blue Rx plan or health plan, are covered with no member cost share.
- Benefits are contingent upon accurate claims submission by the provider, including diagnosis and procedure codes.
- Self-funded groups may have selected different benefits. Always consult your coverage manual for specific coverage details.
- Employer groups may elect to follow ACA preventive services as their preventive benefits

### FOR MORE INFORMATION SEE:

*The United States Preventive Services Task Force is a federal agency that makes its recommendations on the basis of explicit criteria. Recommendations issued by the USPSTF are intended for use in the primary care setting. The Task Force recommendation statements present health care providers with information about the evidence behind each recommendation, allowing clinicians to make informed decisions about implementation. Wellmark consults with the Task Force regularly to determine how preventive services may be covered.*

*The Health Resources and Services Administration (HRSA) is an agency of the U.S. Department of Health and Human Services, (HHS) is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable.*

*The Centers for Disease Control and Prevention is one of the major operating components of the Department of Health and Human Services, CDC's Mission is to collaborate to create the expertise, information, and tools that people and communities need to protect their health — through health promotion, prevention of disease, injury and disability, and preparedness for new health threats.*

*Bright Futures is a national health promotion and prevention initiative led by the American Academy of Pediatrics. The Bright Future Guidelines provide theory-based and evidence-based driven guidelines for all preventive care screening and well child visits.*

\*Services marked with an asterisk indicate those services that may be delivered and billed within wellness exam or well-child exam from an in-network provider.



# Getting the most from your health plan

Wellmark Blue Cross and Blue Shield members have access to free tools and resources. They're all designed to help you manage your health care costs and live a healthier life.



## myWellmark®

myWellmark is your resource for understanding and seeing how your health plan works. Not only can you access your benefits and see how your plan covered your medical and pharmacy needs, you can also find:

- Pending and processed claims
- Specific plan details
- Digital ID cards and Explanation of Benefits
- In-network care and cost estimates



## Identity protection services

With IDX™ Identity, your personal information remains secure with services including, credit record monitoring, 24/7 tracking of suspicious activity and accessing complete identity recovery if fraudulent activity is found.



## Doctor On Demand®

Connect to a health care professional virtually through Doctor On Demand to be seen in minutes from wherever you are for your physical and mental health needs.



## Wellness Center by WebMD®

Access the Wellness Center by WebMD for trusted health content and personalized recommendations on improving health and wellness.



## BeWell 24/7<sup>SM</sup>

Get connected to a real person 24 hours a day, 7 days a week at 844-84-BeWell for answers to your health questions or concerns. Whether it's a determining if a fever warrants a doctor visit, discussing surgery options and more, BeWell saves you time and worry.



## Blue365® Program

This program gives you exclusive access to discounts and resources that help you live a healthier lifestyle at [Wellmark.com/Blue365](http://Wellmark.com/Blue365).



## Health support programs

Wellmark has three different programs — case management, pregnancy support and rare condition management — that can help improve outcomes when there is a significant health need.



## Blue<sup>SM</sup>

Each issue of *Blue* features health and wellness articles, consumer tips and health plan news. It provides resources on living a fulfilling and healthy life. Find it online at [Wellmark.com/Blue](http://Wellmark.com/Blue).



For more information on these added benefits or for answers to questions, call customer service at the number at the back of your Wellmark ID card.





Wellmark Blue Cross and Blue Shield of Iowa, Wellmark Health Plan of Iowa, Inc., Wellmark Value Health Plan, Inc. and Wellmark Blue Cross and Blue Shield of South Dakota are independent licensees of the Blue Cross and Blue Shield Association. Blue Cross®, Blue Shield® and the Cross® and Shield® symbols and Blue365® are registered marks and BlueSM is a service mark of the Blue Cross and Blue Shield Association, an Association of independent Blue Cross and Blue Shield Plans.

Wellmark® and myWellmark® are registered marks and BeWell 24/7SM is a service mark of Wellmark, Inc.

IDXTM Identity is an independent company providing identity protection services. IDXTM Identity does not provide Wellmark Blue Cross and Blue Shield products or services.

Wellmark's virtual health care visit benefit is made available through an independent company, Doctor On Demand by Included Health, and the telemedicine services are provided by licensed physicians practicing within a group of independently owned professional practices. Doctor On Demand, Inc. does not itself provide any physician, mental health or other healthcare provider services. Doctor On Demand operates subject to state laws. Doctor On Demand is not intended to replace an annual, in-person visit with a primary care physician.

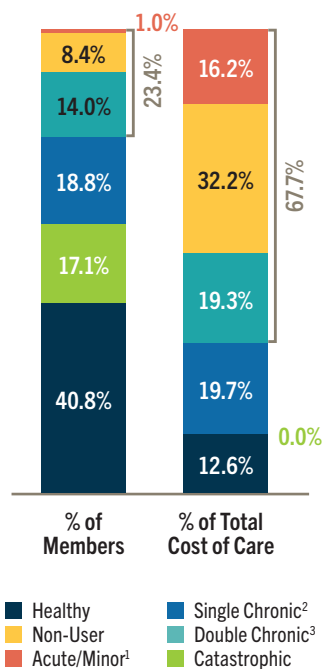
Doctor On Demand by Included Health is a separate company providing an online telehealth solution for Wellmark members. Doctor On Demand® is a registered mark of Doctor On Demand, Inc.

Web MD® is a registered trademark of WebMD Health Services Group, Inc. WebMD is a separate company that provides wellness services on behalf of Well mark Blue Cross and Blue Shield.

# Individualized care FOR YOUR HIGH-COST MEMBERS

## Case Management for groups

### Wellmark Book of Business



**23% of the population accounts for nearly 68% of the cost.**

<sup>1</sup> Acute/minor includes pregnancy and deliveries (including those with complications, and diseases of the joint, gastrointestinal system, hyperlipidemia, ENT, osteoarthritis and MHCD).

<sup>2</sup> Single chronic includes hypertension, diabetes, disc disease, rheumatoid arthritis, asthma and MHCD (depression).

<sup>3</sup> Double chronic includes diabetes hypertension and asthma plus other.

Wellmark’s Case Management program makes a meaningful difference by seizing opportunities to reduce gaps in care and coordinating services that align with the member’s benefits. This program not only impacts quality of life and health outcomes, it also reduces cost and utilization of services.

### The right care at the right cost

Controlling cost is a top priority for all employers. That’s why Wellmark has included the Case Management program as a core offering, and included it in the benefits packages for both self-funded and fully insured customers.

The Case Management program monitors the health of your employees and proactively manages the care of individuals who will benefit most from focused interventions.

The program targets resources to which the greatest difference in cost and care can be made.

The nurses work with the member, family and health care providers to:

- **Guide** members toward better health decisions and behaviors
- **Provide** tools and education to help members understand and manage their conditions
- **Connect** members to resources and relationships to help them make the most clinically appropriate and cost-effective treatment decisions

*“Medical insurance and the health care system is difficult to navigate and getting assistance is always a good thing Case Management helped me to deal with my condition, kept me on track/more accountable, and has helped me mentally in many ways. I am very glad that there is a program like Case Management!”*

– Case Management Touchpoint Survey

## Our unique level of engagement

When members experience a major health event, they could potentially visit several different providers and have complex health needs, putting them at risk for:

- Receiving fragmented care, which can result in unnecessary or duplicative services
- Not getting proper care and services, which can result in underutilization and put the member at risk for high-cost events

The Case Management program focuses on engaging members whenever possible through sophisticated identification algorithms. Members are identified through the following methods:

- Weekly identification and stratification routines using health and pharmacy claims data
- Qualifying events such as brain injuries, strokes, burns, etc.
- Prior authorization requests
- Hospital stay notifications
- Self-enrollment by the member or their family
- Provider referrals

A Case Management nurse can proactively contact both the member and the providers to ensure the member gets the care they need throughout their case.

The Case Management nurse also intervenes with identified members to help them understand their condition and connect them to available resources for proper support. In addition, specially trained registered nurses and physicians are on staff to answer medical questions, address health concerns, discuss treatment options and coordinate care in a way that maximizes health care dollars.

## Data to maximize your investment

A variety of reports are available for groups to help employers understand program participation. Speak with your account team representative about your reporting needs.

**NOTE: The Case Management program is included in all fully insured and self-funded plans.**



### LEARN MORE

Contact your Wellmark representative to find out how the BeWell 24/7<sup>SM</sup> can make a difference at your business.

## REFERRALS



Customer service



Wellmark programs



Employer



Wellmark provider



Family

## How you can help

The Case Management program identifies high-risk members, and helps them get care they need quickly and effectively. To help educate your employees and encourage participation in this program, please:

- Maintain accurate contact information, including phone and email addresses, for your employees so Wellmark's Case Management team can contact them as needed. Ask them to update their membership records as their information changes.
- Speak with your account team representative on ways to support the education and communication of this program to your employees.

## How employers support

- Program promotion
- Valid member contact information



Wellmark Blue Cross and Blue Shield of Iowa, Wellmark Health Plan of Iowa, Inc., Wellmark Synergy Health, Inc., Wellmark Value Health Plan, Inc. and Wellmark Blue Cross and Blue Shield of South Dakota are independent licensees of the Blue Cross and Blue Shield Association.

Blue Cross®, Blue Shield® and the Cross® and Shield® symbols, Blue 365® and GeoBlue® are registered marks of the Blue Cross and Blue Shield Association, an Association of Independent Blue Cross and Blue Shield Plans. Wellmark® is a registered mark and BeWell 24/7<sup>SM</sup> is a service mark of Wellmark, Inc. © 2016 Wellmark, Inc.

**LIFE - EMC**



# South Dakota Bankers Association

Underwritten by EMC National Life

## Cost Summary

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### Group Term Life Insurance

#### Employer Paid

Basic Life	\$0.128 per \$1,000
Basic AD&D	\$0.020 per \$1,000

#### Basic Dependent Life (Optional)

Plan A	\$2.50 per family
Plan B	\$1.25 per family
Plan C	\$4.00 per family

#### Employee Paid (Optional)

Supplemental Employee Life & Supplemental Spouse Life (based on employee age)	Monthly rates per \$1,000			
	Age	Rate	Age	Rate
	0-29	\$0.08	50-54	\$0.50
	30-34	\$0.10	55-59	\$0.82
	35-39	\$0.12	60-64	\$1.00
	40-44	\$0.20	65-69	\$1.45
	45-49	\$0.28	70+	\$2.25

Supplemental Child Life	\$0.20 per \$1,000
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#### Supplemental AD&D

Individual Plan	\$0.04 per \$1,000
Family Plan	\$0.08 per \$1,000

**Each bank must complete the attached participation form to be included in the association plan.** Group Term Life rates are guaranteed until 1/1/2025. Group Term Life is underwritten and administered by EMC National Life.



# South Dakota Bankers Association

## Disclosure Form

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**Eligibility:** Only full-time employees of Participating Employers who work at least 30 hours per week are eligible for insurance. Retirees are not eligible for coverage.

**Guaranteed Issue Limits:** Basic Term Life/AD&D is guaranteed issue up to \$150,000 for all Participating Employers. Basic Dependent Life and Supplemental AD&D is also 100% guaranteed issue. Supplemental Life is guaranteed issue up to the specified limits.

**Evidence of Insurability** is required for amounts that exceed guaranteed issue and for late applicants who do not enroll within their initial eligibility period.

**Deferred Effective Date:** Employees must be actively at work as defined in the policy before coverage will become effective. Employees who are not actively at work on the date their coverage would otherwise become effective will not be insured until the day they are again actively at work.

**Participation Requirement:** Noncontributory coverage requires 100% participation of eligible employees, for group term life and group disability insurance. If Supplemental Life/AD&D benefits are included in the group term life program, this coverage does not require minimum participation.

**Definition of Earnings** will be defined within the issued certificate language provided for each Participating Employer.

**Reduction & Termination of Benefits:** The Basic Life/AD&D, Supplemental Employee Life/AD&D and Supplemental Spouse Life/AD&D benefits reduce to 65% at age 65, and further to 50% at age 70 and above. Coverage terminates at retirement or when no longer eligible.

**Conversion:** All group term life insurance (Basic & Supplemental) includes a 31 day conversion privilege to an individual whole life plan at standard insurance rates without evidence of insurability at termination of the group coverage. The Participating Employer is responsible for providing the Conversion Notice timely to each person eligible.

**Portability:** All Supplemental Life and Supplemental AD&D employee paid coverage includes a 31 day portability privilege to an individual term policy at separate rates. The Participating Employer is responsible for providing the Portability Notice timely to each person eligible.

**Master Application:** Each Participating Employer interested in pursuing coverage will be required to sign/date a master application issued by EMC National Life and remit the initial monthly premium due to bind coverage as of the confirmed effective date.

This document is intended as a summary only and not a contract. A complete description of benefits and limitations will be provided in the Certificate of Coverage issued by EMC National Life.

## **VISION - VSP**



# A Look at Your VSP Vision Coverage

With VSP and South Dakota Bankers  
Benefit Plan Trust, your health comes first.




As a member, you'll get access to savings  
and personalized vision care from a VSP  
network doctor for you and your family.


### Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

### Provider choices you want.

 With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

### Shop online and connect your benefits.

 Eyeconic® is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

### Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

### Using your benefit is easy!

Create an account on [vsp.com](https://www.vsp.com) to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.

  
vision care

More Ways  
to Save

Extra  
**\$20**  
to spend on  
Featured Brands†

bebe Calvin Klein  
COLE HAAN DRAGON.  
FLEXON LONGCHAMP  
PARIS  
 and more

See all brands and offers  
at [vsp.com/offers](https://www.vsp.com/offers).

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Up to  
**40%**  
Savings on  
lens enhancements‡

Create an account today.

Contact us: **800.877.7195** or [vsp.com](https://www.vsp.com)

# Your VSP Vision Benefits Summary

South Dakota Bankers Benefit Plan Trust and VSP provide you with an affordable vision plan.

## PROVIDER NETWORK:

VSP Choice

## EFFECTIVE DATE:

01/01/2024



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
<b>Your Coverage with a VSP Provider</b>			
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"><li>Focuses on your eyes and overall wellness</li></ul>	\$25	Every calendar year
<b>ADDITIONAL SAVINGS</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"><li>Extra \$20 to spend on Featured Frame Brands. Go to <a href="https://www.vsp.com/offers">vsp.com/offers</a> for details.</li><li>20% savings on complete pair of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam.</li></ul>		
	<b>Contacts</b> <ul style="list-style-type: none"><li>15% savings on a contact lens exam (fitting and evaluation)</li></ul>		
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"><li>Average of 15% off the regular price; discounts available at contracted facilities.</li></ul>		

## YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to [vsp.com](https://www.vsp.com) to find an in-network provider.

<sup>1</sup>Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

<sup>2</sup>Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

<sup>3</sup>Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington. Premier Edge is not available for some members in the state of Texas.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on [vsp.com](https://www.vsp.com).

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VSP, Eyeconic, and WellVision Exam are registered trademarks, and VSP LightCare and VSP Premier Edge are trademarks of Vision Service Plan. Flexon and Dragon are registered trademarks of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners. 102898 VCCM

# A Look at Your VSP Vision Coverage

With VSP and South Dakota Bankers  
Benefit Plan Trust – Choice Plan B,  
your health comes first.



Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

### Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling at over \$3,000 in savings.

### Provider choices you want.



With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

### Shop online and connect your benefits.



Eyeconic® is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

### Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

### Using your benefit is easy!

Create an account on [vsp.com](http://vsp.com) to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.



More Ways  
to Save

Extra

\$20

to spend on

Featured Frame Brands†

bebe

Calvin Klein

COLE HAAN

DRAGON

FLEXON

LONGCHAMP  
PARIS



and more

See all brands and offers  
at [vsp.com/offers](http://vsp.com/offers).

+

Up to

40%

Savings on

lens enhancements‡

Enroll through your employer today.  
Contact us: **800.877.7195** or [vsp.com](http://vsp.com)

# Your VSP Vision Benefits Summary

South Dakota Bankers Benefit Plan Trust – Choice Plan B and VSP provide you with an affordable vision plan.

**Provider Network:**

VSP Choice

**Effective Date:**

01/01/2024



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
<b>COVERAGE WITH A VSP PROVIDER</b>			
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Check if your Costco or Walmart/Sam's Club doctor is a participating VSP doctor before making an appointment</li> <li>Routine retinal screening</li> </ul>	\$25  Up to \$39	Every calendar year
<b>ESSENTIAL MEDICAL EYE CARE</b>	<ul style="list-style-type: none"> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.</li> <li>Coordination with your medical coverage may apply. Ask your VSP network doctor for details.</li> </ul>	\$20 per exam	Available as needed
<b>PRESCRIPTION GLASSES</b>		\$30	See frame and lenses
<b>FRAME<sup>+</sup></b>	<ul style="list-style-type: none"> <li>\$170 Featured Frame Brands allowance</li> <li>\$150 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Costco/Walmart/Sam's Club frame allowance</li> </ul>	Included in Prescription Glasses	Every other calendar year
<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>LENS ENHANCEMENTS<sup>+</sup></b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 30% on other lens enhancements</li> <li>Pricing varies at Costco/Walmart/Sam's Club</li> </ul>	\$0 \$95 – \$105 \$150 – \$175  Ask Optical Associate for Pricing	Every calendar year
<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>15% savings on contact lens exam (fitting and evaluation)</li> </ul>	\$0	Every calendar year
<b>ADDITIONAL SAVINGS</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>Discover all current eyewear offers and savings at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam.</li> </ul>		
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"> <li>Average of 15% off the regular price; discounts available at contracted facilities.</li> </ul>		
	<b>Exclusive Member Extras for VSP Members</b> <ul style="list-style-type: none"> <li>Contact lens rebates, lens satisfaction guarantees, and more offers at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>Save up to 60% on digital hearing aids with TruHearing. Visit <a href="https://vsp.com/offers/special-offers/hearing-aids">vsp.com/offers/special-offers/hearing-aids</a> for details.</li> <li>Everyday savings on health, wellness, and more with VSP Simple Values.</li> </ul>		

## YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to [vsp.com](https://vsp.com) to find an in-network provider.

<sup>†</sup>Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

<sup>‡</sup>Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

<sup>+</sup>Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington.

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# A Look at Your VSP Vision Coverage

With VSP and South Dakota Bankers  
Benefit Plan Trust – Choice Plan C,  
your health comes first.



Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

### Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling at over \$3,000 in savings.

### Provider choices you want.



With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

### Shop online and connect your benefits.



Eyeconic® is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

### Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

### Using your benefit is easy!

Create an account on [vsp.com](http://vsp.com) to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.



More Ways  
to Save

Extra

\$20

to spend on

Featured Frame Brands†

bebe

Calvin Klein

COLE HAAN

DRAGON

FLEXON

LONGCHAMP  
PARIS



and more

See all brands and offers  
at [vsp.com/offers](http://vsp.com/offers).

+

Up to

40%

Savings on  
lens enhancements‡

Enroll through your employer today.  
Contact us: **800.877.7195** or [vsp.com](http://vsp.com)



# Your VSP Vision Benefits Summary

South Dakota Bankers Benefit Plan Trust – Choice Plan C and VSP provide you with an affordable vision plan.

**Provider Network:**  
VSP Choice  
**Effective Date:**  
01/01/2024



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
<b>COVERAGE WITH A VSP PROVIDER</b>			
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Check if your Costco or Walmart/Sam's Club doctor is a participating VSP doctor before making an appointment</li> <li>Routine retinal screening</li> </ul>	\$25  Up to \$39	Every calendar year
<b>ESSENTIAL MEDICAL EYE CARE</b>	<ul style="list-style-type: none"> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.</li> <li>Coordination with your medical coverage may apply. Ask your VSP network doctor for details.</li> </ul>	\$20 per exam	Available as needed
<b>PRESCRIPTION GLASSES</b>			
		\$30	See frame and lenses
<b>FRAME<sup>+</sup></b>	<ul style="list-style-type: none"> <li>\$170 Featured Frame Brands allowance</li> <li>\$150 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Costco/Walmart/Sam's Club frame allowance</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>LENS ENHANCEMENTS<sup>+</sup></b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 30% on other lens enhancements</li> <li>Pricing varies at Costco/Walmart/Sam's Club</li> </ul>	\$0 \$95 – \$105 \$150 – \$175  Ask Optical Associate for Pricing	Every calendar year
<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>15% savings on contact lens exam (fitting and evaluation)</li> </ul>	\$0	Every calendar year
<b>ADDITIONAL SAVINGS</b>	<p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>Discover all current eyewear offers and savings at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam.</li> </ul> <p><b>Laser Vision Correction</b></p> <ul style="list-style-type: none"> <li>Average of 15% off the regular price; discounts available at contracted facilities.</li> </ul> <p><b>Exclusive Member Extras for VSP Members</b></p> <ul style="list-style-type: none"> <li>Contact lens rebates, lens satisfaction guarantees, and more offers at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>Save up to 60% on digital hearing aids with TruHearing. Visit <a href="https://vsp.com/offers/special-offers/hearing-aids">vsp.com/offers/special-offers/hearing-aids</a> for details.</li> <li>Everyday savings on health, wellness, and more with VSP Simple Values.</li> </ul>		

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# See Well. Be Well.



## Welcome to VSP!

We believe in the connection between your vision and your overall health. As a VSP® member, you get personalized care from a VSP network doctor at low out-of-pocket costs.



## Using Your Benefits Is Easy



Create an account on **vsp.com** to view your in-network coverage, and find the VSP network doctor who's right for you.



With access to over \$3,000 in savings, discover VSP Exclusive Member Extras to maximize your benefits and save even more.



Print a Member Vision Card—if you'd like one. There's no ID card necessary—just tell your provider you have VSP.

You deserve personalized, affordable vision care, delivered with your overall well-being in mind. We're committed to helping you experience a lifetime of healthy vision: **See Well. Be Well.®**

Your well-being  
is at the heart of  
everything we do.

Create an account,  
find your local VSP  
network doctor, and  
see your benefit  
at **vsp.com** today!

Questions? **vsp.com** | **800.877.7195**

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on **vsp.com**.

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Classification: Public



# Enjoy Savings Beyond Your Vision Benefits!

**vsp** exclusive member extras



Take advantage of Exclusive Member Extras for you and the whole family! Get access to more than \$3,000 in savings from VSP® and other popular brands. Offers shown below are available at all VSP network doctor locations or participating partner locations.

Click on the offers below to learn how to save on everyday products and services **that go beyond vision care** and help make your life healthier and easier.

## Glasses & Sunglasses

Extra  
**\$20**  
to Spend

Get an **Extra \$20** to spend on Featured Frame Brands.<sup>1,2</sup>

Extra  
**\$40**  
to Spend

Get an **Extra \$40** to spend on select Featured Frame Brands.<sup>1,2</sup>

Up to  
**40% Off**  
Lens Enhancements

Save up to 40% off popular lens enhancements.<sup>2,3</sup>

**eyeconic**

a vsp vision company

Shop and save online for glasses, sunglasses, and contacts with your VSP benefits.

  
**enchroma**

WORLD'S BEST COLOUR BLIND GLASSES™

Get up to 20% off popular EnChroma collections.

**HOYA**

Get 6-month satisfaction guaranteed protection on Hoya lenses.



Save 20% on additional pairs of Nike glasses and sunglasses.

**sunsync**

Save up to 40% on SunSync® Light-Reactive Lenses.<sup>2,3</sup>

**techshield**

Save up to 40% on all TechShield® Anti-Reflective Coatings.<sup>2,3</sup>

**unity**

Try Unity® lenses worry-free for 6 months with The Unity Promise.

**ZEISS**

Try ZEISS Lenses risk-free for 6 months.

**vsp**  
**PREMIER**  
edge

Maximize your savings with Premier Edge™ Offers only available at Premier Edge locations.

**BAUSCH+LOMB**

See better. Live better.

Save up to \$310 on an annual supply of contact lenses.

**BAUSCH+LOMB**

**Biotrue**

ONEday lenses

Get a free 30-day supply of Biotrue® ONEday contact lenses and an exclusive up to \$210 rebate.

**Glasses Rebate**

Get up to a \$100 rebate on the perfect pair of glasses.<sup>4</sup>

**HOYA**

Get 12-month satisfaction guaranteed protection on Hoya lenses.

**Premier Edge Promise**

Get a worry-free eyewear guarantee with triple protection.<sup>5</sup>

**unity**

Try Unity® lenses worry-free with The Unity Promise for 12 months.

**ZEISS**

Try ZEISS Lenses risk-free for 12 months.

# Improve Your Health and Increase Your Savings

**vsp**™ exclusive  
member extras

As a member, you can save on everyday products and services that fit your needs beyond vision care—like discounts on fitness, nutrition, prescription drugs and access to diabetes resources.

## Contacts

**BAUSCH+LOMB**  
See better. Live better.

Save up to \$300 on an annual supply of contact lenses.

## Health & Wellness

Diabetes  
Management Support

Save on testing supplies and find resources to help prevent or manage Diabetes.

 **optomap**®

Get not-to-exceed \$39 special pricing on optomap images.<sup>2</sup>

## LASIK®

**LasikPlus+**

Save up to \$1,100 off LASIK.

The **LASIK Vision INSTITUTE**

Save up to \$1,100 off LASIK.

**NVISION**  
EYE CENTERS

Save up to \$1,200 off all custom LASIK and PRK.

**TLC**  
Laser Eye Centers®

Save up to \$1,100 off LASIK.

## Hearing Health

**TruHearing**®

Save up to 60% on prescription & over-the-counter hearing aids, get deals on batteries, and access a free online hearing screening.<sup>7</sup>

**vsp** simple  
values

Access a variety of savings on fitness, prescription drugs, entertainment, travel, cash rewards, and more.<sup>8</sup>

## Home & Financial Well-Being

 **CareCredit**

Get instant, in-office promotional financing offers for eye care and eyewear.

 **everplans**™

Organize, securely store, and assign access to important documents like wills, passwords, and more. All for just \$27 a year.

**smartcredit**®

Get smart about your credit, money, and privacy with SmartCredit, helping you meet your financial goals for just \$8.95 a month.

## See how your savings can add up at [vsp.com/offers](https://vsp.com/offers).

Offers subject to change without notice. Some members may not be eligible for all offers. Members who participate in a Medicaid/state-funded plan are not eligible for the above offer. Visit [vsp.com/offers](https://vsp.com/offers) for terms and conditions on specific offers.

1. Brands and promotions are subject to change. 2. Available to VSP members with applicable plan benefits. Check your benefits to see if this offer applies. 3. Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. 4. Perfect Pair up to \$100 rebate expires 11/30/2023, rebate offer terms and conditions apply and are subject to change. Rebate offer valid from 7/1/2023 through 11/30/2023, and must be redeemed by 12/31/2023. The Sponsor/Officer of this rebate is Plexus Optix, Inc. 5. Restrictions may apply; visit [vsp.com/offers/premier-edge-offers/glasses-and-sunglasses/Premier-Edge-Promise](https://vsp.com/offers/premier-edge-offers/glasses-and-sunglasses/Premier-Edge-Promise) for terms and conditions. 6. Not all locations are on the VSP Laser VisionCare Network. Please call VSP Member Services at 800.877.7195 to confirm the location you're interested in visiting is in-network. 7. VSP is providing information to its members but does not offer or provide any discount hearing program. VSP makes no endorsement, representations, or warranties regarding any products or services offered by TruHearing, a third-party vendor. TruHearing is not insurance and not subject to state insurance regulations. For additional information please visit [vsp.com/offers/special-offers/hearing-aids/truhearing](https://vsp.com/offers/special-offers/hearing-aids/truhearing). For questions, contact TruHearing directly. Not available directly from VSP in the states of Washington and California. 8. Some members may not be eligible for this program; visit [vsp.com/simplevalues](https://vsp.com/simplevalues) for terms and conditions.

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Classification: Public

# Save Up to 60% on Brand-Name Hearing Aids



Like vision loss, hearing loss can have a huge impact on your quality of life. However, the cost of a pair of quality hearing aids usually costs more than \$5,000,\* and few people have hearing aid insurance coverage.

TruHearing makes hearing aids affordable by providing exclusive savings to all VSP® Vision Care members. You can save up to 60% on a pair of hearing aids with TruHearing. What's more, your dependents and even extended family members are eligible too.

#### **In addition to great pricing, TruHearing provides you with:**

- One year of follow-up visits for fittings, adjustments, and cleanings
- 60-day trial
- Three-year manufacturer warranty for repairs and one-time loss and damage replacement
- 80 free batteries per hearing aid for non-rechargeable models

#### **Plus, with TruHearing you'll get:**

- Access to a national network of more than 7,000 hearing healthcare providers
- Discounted pricing on a wide selection of the latest brand name hearing aids
- High-quality, low-cost batteries delivered to your door

Best of all, if you already have a hearing aid allowance from your health plan or employer, you can combine it with TruHearing prices to reduce your out-of-pocket expense even more!

Over-the-counter hearing aids are also available to VSP members through phone or online orders.\*\*

**vsp** exclusive  
member extras

**TruHearing**®

[truhearing.com/vsp](https://truhearing.com/vsp)

Here's how it works:

#### **Contact TruHearing.**

Call **877.396.7194**. You and your family members must mention VSP.

#### **Schedule exam.**

TruHearing will answer your questions and schedule a hearing exam with a local provider.

#### **Attend appointment.**

The provider will perform a hearing exam, make a recommendation, order the hearing aids through TruHearing, and fit them for you.

**Learn more about this VSP Exclusive Member Extra at  
[truhearing.com/vsp](https://truhearing.com/vsp) or call 877.396.7194 with questions.**

\*Based on a 2018 third-party survey of nationwide provider and manufacturer retail pricing.  
\*\*Over-the-counter hearing aids are different from prescription hearing aids.

VSP is providing information to its members, but does not offer or provide any discount hearing program. VSP makes no endorsement, representations or warranties regarding any products or services offered by TruHearing, a third-party vendor. TruHearing is not insurance and not subject to state insurance regulations. For additional information, please visit [vsp.com/offers/special-offers/hearing-aids/truhearing](https://vsp.com/offers/special-offers/hearing-aids/truhearing). For questions, contact TruHearing directly. Not available directly from VSP in the states of Washington and California.

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**DELTA DENTAL**



Delta Dental  
of South Dakota

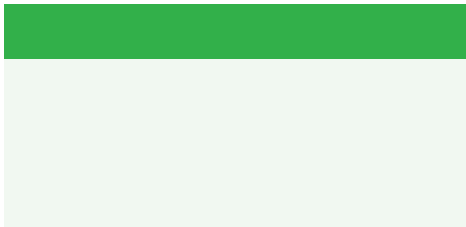
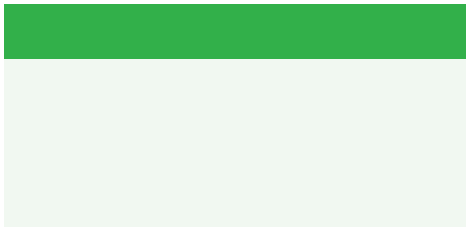
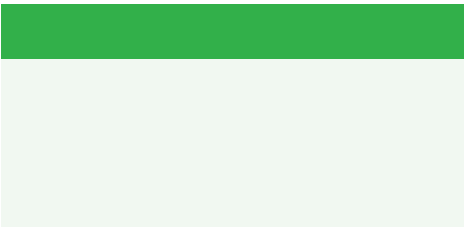


Find a Dentist

# Summary of Benefits

Refer to the Dental Benefits Handbook for more details.

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See other side for information on plan features.



## Delta Dental of South Dakota

P.O. Box 1157  
720 N Euclid Ave  
Pierre, SD 57501

Telephone: (605) 224-7345  
Toll Free: (877) 841-1478  
Fax: (605) 224-0909

deltadentalsd.com  
customer.service@deltadentalsd.com