



NDPERS Dakota Retiree Plan

Member Handbook 2024-25



NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM

SANFORD
HEALTH PLAN

Help in Other Languages

For help in any language other than English, call (800) 752-5863 (TTY: 711).

Arabic -

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (800) 752-5863 (رقم هاتف الصم والبكم: 711).

Amharic - ማስታወሻ: የሚናገሩት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶቻችን ማስታወሻ: የሚናገሩት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶቻችን በነፃ ሊያገኙዎት ተዘጋጅተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ (800) 752-5863 (መስማት ለተሳናቸው: 711)፡

Chinese - 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 (800) 752-5863 (TTY: 711)。

Cushite (Oromo) - XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa (800) 752-5863 (TTY: 711).

German - ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: (800) 752-5863 (TTY: 711).

Hmong - LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau (800) 752-5863 (TTY: 711).

Karen - ဟံသာဝတီသား- နမ့်ကတိာ် ကညိ ကျိာ်အသိ, နမ့်နုာ် ကျိာ်အတိာ်မၤစၢ်လၢ တလၢာ်ဘျုးလၢာ်စ့ၢ် နီတံးဘျုးသ့န့ၢ်လီၤ. ကိး (800) 752-5863 (TTY: 711).

Korean - 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (800) 752-5863 (TTY: 711) 번으로 전화해 주십시오.

Laotian - ໂປດຊາຍ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ (800) 752-5863 (TTY: 711).

French - ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le (800) 752-5863 (TTY: 711).

Russian - ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (800) 752-5863 (телетайп: 711).

Spanish - ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (800) 752-5863 (TTY: 711).

Tagalog - PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (800) 752-5863 (TTY: 711).

Thai - เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้ บริการช่วยเหลือทางภาษาได้ฟรี โทร (800) 752-5863 (TTY: 711).

Vietnamese - CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (800) 752-5863 (TTY: 711).

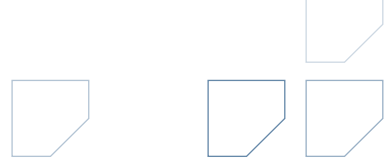


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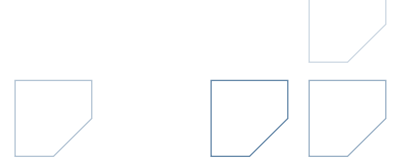
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Dear Sanford Health Plan NDPERS Member,

We are pleased to have you as a member and welcome you to our care system! This booklet will help you get to know your benefits. It is made up of tips on how you can reach us and how to use your benefits. We look forward to serving you.





Introduction

This Member Handbook is not a contract. This Handbook is designed to give you the basic facts needed as a Member. It will also serve as a guide when seeking health care services. Your Certificate of Insurance (COI) and the NDPERS Service Agreement are the formal benefit plan documents for this benefit plan as set up by NDPERS.

For details about your coverage, please see your COI, which gives all of the terms and conditions of enrollment. If you have more questions after reading this Handbook and your COI, or need any help, please call us toll-free at (800) 499-3416 | TTY 711.

NOTE: This Plan may not cover all your health care costs. Read your Certificate of Insurance with care to find out which costs are covered.

How to Contact Us

If you have more questions after reading the Handbook or your Certificate of Insurance, or need any help, we are open between the hours of 8 a.m. to 5 p.m. Central Time, Monday through Friday.

Physical Address	Mailing Address
Sanford Health Plan ATTN: NDPERS 1749 38th Street South Fargo, ND 58104	Sanford Health Plan ATTN: NDPERS PO Box 91110 Sioux Falls, SD 57109-1110
Member Services	Website
(800) 499-3416 <i>(toll-free)</i> or TTY 711	sanfordhealthplan.com/ndpers
Member Rights and Responsibilities At Sanford Health Plan, we're here to make sure you receive top-notch, personalized healthcare that's easy to access. To show you how much we care, we've put together a list of rights and responsibilities for our members (or the member's parent, legal guardian or other representative if the member is a minor or incompetent). To access your member rights and responsibilities: <ul style="list-style-type: none">• Locate Rights and Responsibilities in your Certificate of Insurance (COI)/Summary Plan Description (SPD)• Visit sanfordhealthplan.com/members/important-documents• Call our customer service team at (800) 499-3416 (TTY: 711).	





Privacy Practices

Our Privacy policies may be found at **sanfordhealthplan.com/ndpers** in the Privacy of Health Information link at the bottom of the page:

- Notice of Privacy Practices
- Confidentiality and Disclosure of Personal Health Information
- Protection of Oral, Written and Electronic Information across Sanford Health Plan

Customer Service Department

We believe that good service depends on good communication with you. We encourage you to contact Customer Service for help when you need it by calling (800) 499-3416 (toll-free) | TTY 711 or emailing **memberservices@sanfordhealth.org**. We are happy to help you with questions about:

- How claims are paid
- Where to find a doctor or facility in your area
- If you have a complaint
- Getting another ID card

**We are open and can answer your questions
from 8 a.m. to 5 p.m. Central Time, Monday through Friday.**

Special Communication Services

In compliance with the Americans with Disabilities Act (ADA), this document can be provided in alternate formats. Anyone with any disability who might need some form of accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900. The North Dakota Relay Service (TTY) toll-free number is (800) 366-6888.

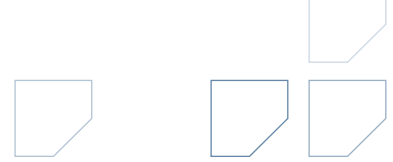
Please call Sanford Health Plan Member Services if you need help understanding written Plan information at (800) 499-3416 (toll-free). We can read forms to you over the phone and we offer free oral translation in any language through our translation services.

Services for the Deaf and Hearing Impaired

If you are deaf or hearing impaired and need to speak to the Plan, call TTY 711.

Services for Visually Impaired

Please contact Member Services toll-free at (800) 499-3416 if you are in need of a large print copy or cassette/CD of this handbook, your COI, or other written materials.



Member Benefits

As a Plan Member, your benefits package is one of the most comprehensive available today. Basic primary care and preventive benefits are available through your Primary Care Doctor. Please see your Outline of Covered Services and your Certificate of Insurance (COI) for a description of covered services, as well as those that are not covered.

Emergency and Urgent Care Situations

An Emergency Medical Condition or Emergency Care is the sudden and unexpected onset of a health condition that would lead a Prudent Layperson acting reasonably and possessing the average knowledge of health and medicine to believe that the absence of that requires immediate medical attention, if failure to provide medical attention could result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

A Prudent Layperson is a person who is without medical training and who possess an average knowledge of health and medicine and who draws on his or her practical experience when making a decision regarding the need to seek emergency medical treatment.

An Urgent Care Situation is a degree of illness or injury which is less severe than an Emergency Condition, but requires prompt medical attention within twenty-four (24) hours, such as stitches for a cut finger.

An Urgent Care Request is a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

- a) Could seriously jeopardize the life or health of the Certificate holder or the ability of the Certificate holder to regain maximum function, based on a prudent layperson's judgment; or
- b) In the opinion of a Practitioner and/or Provider with knowledge of the Certificate holder's medical condition, would subject the Certificate holder to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.





Levels of Coverage

Your Medicare supplement health care coverage was developed to help you pay for some of your health care expenses not paid in full by Medicare. This coverage only pays for those services accepted and approved by Medicare with the exception of benefits for Medically Necessary Emergency Care in a foreign country.

To understand your supplemental benefits, you must first understand your Medicare benefits. Therefore, it is very important that you read your Medicare Handbook carefully. If you do not have a Medicare Handbook, you may order one by calling your Social Security office.

Medicare benefits are divided into two categories: Medicare Part A and Medicare Part B.

- **Medicare Part A**

Medicare Part A helps pay for inpatient hospital care, care in a skilled nursing facility, home health care, and hospice services. We offer you supplemental benefits in all of these categories.

- **Medicare Part B**

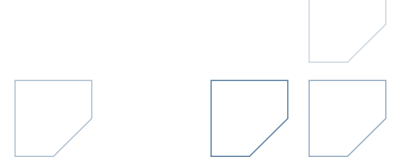
Medicare Part B helps pay for physician services, outpatient hospital services, durable medical equipment, and a number of other medical services and supplies that are not covered by Medicare Part A. We offer you supplemental benefits in all these categories as stated in your Certificate of Insurance, SECTION III: Schedule of Benefits, with the addition of benefits for Medically Necessary Emergency Care in a foreign country.

Wellness Principles

It is better for you to be seen in your Primary Care Doctor's office when you are healthy, so that he or she can work with you to keep you in good health instead of trying to treat you when you are already sick. That is why we encourage you to select a Primary Care Doctor to arrange your care and to offer you such services as yearly physical exams, maternity care, yearly gynecological exams, and immunizations. We have a commitment not only to treating you when you are ill, but also to helping you stay well. We will give you educational and wellness materials to teach you how to stay fit and live a healthy life: physically and mentally.

mySanfordNurse

mySanfordNurse is a 24-hour health information resource that provides answers to health-related questions that arise outside of your health care visits. You may call (888) 315-0886 to visit with a nurse, or register/login to your account at sanfordhealthplan.com/memberlogin and submit a question online.



Claim Payment Procedures

When You May Need to File a Claim

By law, physicians or other suppliers must fill out claim forms for you and send them to Medicare, even if they do not accept assignment. We will accept notice from Medicare Carriers on claims submitted on your behalf by physicians and suppliers or you may submit the Medicare Summary Notice (MSN). Notice of claims should include your name and Certificate number.

You should always make sure your providers know that you have supplemental coverage with us. When you receive health services in North Dakota, Medicare will automatically send your claim to us.

The only time you will need to file a claim is if you receive services outside of North Dakota and your Medicare Summary Notice (MSN) does not say your private insurer is receiving the information in the Notes section of the MSN.

Out-of-State Services and How to File a Claim

If you receive health services outside of North Dakota, the provider will submit your claim to the Medicare office for that state. After the office processes the claim, you will receive a Medicare Summary Notice (MSN). If the Notes section of the MSN says that the information is being sent to your private insurer, we will automatically receive the MSN.

If the MSN does not say your private insurer is receiving the information, you need to send the MSN to us so we can process your Medicare supplement benefits. Be sure your identification number and mailing address are shown accurately on the MSN form. You do not need to complete a claim form, just send the MSN, and keep a copy for your own records.

Send your MSN to:

Sanford Health Plan
NDPERS/Medicare Supplement Claims
PO Box 91110
Sioux Falls, SD 57109-1110

Coordination of Benefits

In some cases, you may be covered by another insurance plan, in addition to your coverage with us. If so, we will work with the other insurer to be sure you get full benefits without paying for services twice. If you are covered by another insurance plan, please tell Member Services so that we can find out whether another insurer may be responsible for paying for some of your care.

If your eligibility shifts to another insurer, please notify us as soon as possible so that we may coordinate your benefits appropriately.





Important Information about the Complaint Process

Sanford Health Plan has a process to resolve complaints. You can call or write us with your complaint. We will send a complaint form to you upon request. If you need assistance, we will complete the written complaint form and mail it to you for your signature. We will work to resolve your complaint as soon as possible.

If your complaint involves a dispute relating to the payment of services covered by Medicare, you may file a Medicare appeal through Medicare. The steps to follow in filing a Medicare appeal are explained in the Explanation of Medicare Benefits (EOMB) or Medicare Summary Notice (MSN) forms which can be obtained from the Medicare intermediary or carrier. You may contact your local Social Security office.

Get help and more information

- **Sanford Health Plan:** (800) 499-3416 | TTY 711
We are open Monday through Friday, 8 a.m. to 5 p.m., Central Time.
- **Medicare:** (800) MEDICARE (800) 633-4227, 24 hours, 7 days a week. TTY (877) 486-2048
- **Medicare Rights Center:** (888) 466-9050
- **Elder Care Locator:** (800) 677-1116
- **North Dakota Insurance Department:** (800) 247-0560
- **NDPERS:** (701) 328-3900

If you require accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Termination of Membership

If you are not able to continue coverage under an NDPERS benefit plan, please see your Certificate of Insurance, "Cancellation of this or Previous Benefit Plans."

If you have any questions after reading your Medicare Handbook, your Certificate of Insurance, or this handbook, please call Member Services toll-free at (800) 499-3416 | TTY 711.



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