**What is the Centers of Excellence program?**

The Centers of Excellence program is a medical program that offers eligible medical plan members access to Centers of Excellence hospitals for selected program procedures. Hospitals selected as Centers of Excellence provide quality care with high patient satisfaction while saving money for the member and the plan.

All Centers of Excellence Hospitals have:

- An established and accredited program
- Evidence-based protocols
- High quality of care
- Experience with medical travel

Support and administration of this program is provided by Health Design Plus. This unique program provides those in need an opportunity to get quality care, so that they can focus on getting well.

**Participation and Administration**

1. **Who is eligible for the program?**
   
   Employees and their covered dependents that are enrolled in an eligible medical plan and meet clinical guidelines for specific covered procedures.

2. **What services does this program offer?**
   
   Hospitals included in the program offer a comprehensive medical evaluation, surgery when appropriate, and recommendations for alternatives to surgery when indicated.

3. **How do I participate in the program?**
   
   Health Design Plus representatives will help you determine if you qualify for the program, verify eligibility, provide information and if applicable, refer your medical records to the medical center for review.

4. **Who confirms that I am eligible for the program?**
   
   Your benefit eligibility is confirmed by Health Design Plus. Your clinical eligibility is determined by the hospital and physician(s).
5. **How do I qualify for these services?**
   The following criteria must be met to qualify for the Centers of Excellence program:
   - You have primary medical coverage through an eligible medical plan
   - You meet clinical requirements of the hospital physician(s). Additional diagnostic or medical services may be required to determine if you meet clinical criteria
   - Your local physician agrees to assume care for you upon return home
   - You have an adult caregiver physically able to assist you during your care and travel

6. **What do I need to provide to Health Design Plus in order to obtain services?**
   You need to provide basic information, including the employee’s ID number, items from your medical plan ID card, local physician name and contact data, and caregiver name and contact data.

7. **What forms do I need to complete? Who provides the forms?**
   Upon verification of eligibility, Health Design Plus will send you acknowledgement and authorization forms which need to be completed and returned to Health Design Plus.

8. **Is a program ID card provided? Who provides the program ID card and when will I receive it?**
   Yes. Health Design Plus will provide a Centers of Excellence program member ID card for you to use with this specific program. You will receive the ID card after qualifying for the program. This card is valid only for Centers of Excellence program services. For post-discharge prescriptions, you should use your medical ID card.

9. **Do I need to arrange for follow-up health care once I return home after surgery?**
   Yes. In order to be eligible for this program, you must arrange for follow-up health care with your local physician. We must confirm the availability of follow-up care before you travel to the hospital.
Coverage (all determinations shall be subject to your employer’s medical plan design)

1. **What services and expenses are covered under the Centers of Excellence program?**
   The following services and benefits are covered:
   - All eligible expenses associated with your evaluation and/or procedure at the hospital
   - Travel expenses for you and your caregiver, including transportation or travel allowance, lodging, and a daily allowance
   - Medically necessary services related to this program provided after discharge from the hospital before returning home (excluding outpatient prescriptions)

2. **What services and expenses are NOT covered under this program?**
   The following services and benefits are not covered:
   - Any elective services at the hospital that are not related to the covered program services
   - Convenience items not related to your medical care, such as a telephone

3. **What services and expenses are covered under my current medical plan?**
   When your case is qualified, we recommend that you contact your current medical plan to verify coverage of the following services which may be subject to your plan’s provisions:
   - Diagnostic testing prior to travel
   - Outpatient pharmacy for prescriptions after discharge from the hospital
   - Follow-up care after returning home, including but not limited to physician office visits, x-rays, physical therapy, home health care, and durable medical equipment

4. **Can I choose my own doctors or hospital for the services covered by the program?**
   No. The Centers of Excellence are the hospitals of choice for this program. The hospital chosen for you will be based on your location and the type of care you need. The physician will be selected by the hospital and based upon your individual medical needs.
Cost

1. Will I be charged for any services?
   If you are in an HSA plan, you will be responsible for meeting your plan year deductible. You may contact your medical plan administrator to determine your deductible balance.

2. Will any travel expenses paid to me or to a third party on my behalf be taxable?
   Some of the travel, lodging and daily allowance benefits are considered taxable income. The appropriate income will be reported on your W-2. A letter with additional information is provided upon completion of the program.

Travel

1. Who handles my travel itinerary?
   After your procedure is scheduled, a Travel Coordinator will schedule your travel arrangements.

2. Can my family travel with me?
   Yes. You may choose one adult caregiver for whom transportation and lodging expenses will be covered.

3. Can I choose transportation and lodging service providers without using the Travel Coordinator?
   No. In order to receive transportation and lodging benefits under this program, you must use the program Travel Coordinator. In addition, any transportation and/or lodging reservation changes must be made through the Travel Coordinator.

4. Am I required to have a caregiver travel with me?
   Yes. In order to participate in the program, you will be required to have an adult caregiver travel with you. A caregiver should be over the age of 18 and be physically able to assist you during your care and travel.
After Services Are Completed

1. **How is the discharge process handled?**
   The hospital will develop your care plan for your return home. The hospital will provide written instructions for self-care and contact information (including after hours) to the surgical team. The hospital will work with you to schedule your first follow-up appointment with your local physician and provide Health Design Plus information to coordinate home care as necessary.

2. **Do I need to submit claims to my current medical carrier?**
   No. For services covered under this program, you do not need to submit claims. Health Design Plus will handle all claims related to the travel surgery. For any services not covered under this program, the provider will need to submit claims to your medical plan administrator. Please see Coverage, questions 1, 2 & 3, for more information.

3. **What happens if I experience the need for emergency medical health care once I return home?**
   Once you return home, you should contact 911 for any medical emergencies that may occur.

4. **Do I need to have an established relationship with a local physician as part of the follow-up process?**
   Yes. In order to be eligible for the program, you must have an established relationship with a local physician. Your physician must be willing to assume ongoing care once you return home.

**General**

1. **How many times can I use this program?**
   You may use this program as many times as medically necessary as long as you are enrolled in an eligible medical plan and you meet clinical criteria for the specific covered services.

2. **How can I receive more information about the Centers of Excellence program?**
   You can receive more information about the program by contacting Health Design Plus. A Health Design Plus representative will answer your questions and help you to take the next steps.