



HEALTH PLANS AND OTHER COVERAGES

Personal Plans Product Guide

GUIDESTONE: COMMITTED TO YOUR MISSION

GuideStone® believes that when the body of Christ is healthy, it's free to transform the world – and we want to help guide and equip you and your ministry to do just that.

Ministries and individuals who use GuideStone health plans and other coverages tell us how much they appreciate our commitment to providing medical coverage that reflects their biblical values. They have discovered that with GuideStone, they get quality coverage that will not compromise their Christian convictions.

A Provider Who Understands Ministry

With GuideStone, you get more than benefit solutions, because serving you is our ministry. We've been working with individuals, churches and ministry organizations for more than a century, so we understand the unique challenges you face. That's why our products and services are designed with your needs in mind.

Your GuideStone **coverage options** include:



Medical coverage for individuals and eligible family members



Medical coverage for new hires of employers who offer GuideStone health plans and other coverages



Dental coverage



Vision coverage



Life and accident coverage



Disability coverage

Two Easy Ways to Get Started



Make a Phone Call

Call 1-844-INS-GUIDE (1-844-467-4843) to speak with a customer solutions specialist.



Get A Quote

Visit

[GuideStone.org/GetAQuote](https://www.guidestone.org/GetAQuote)

PERSONAL PLANS HEALTH COVERAGE

GuideStone offers a variety of health plans to meet your ministry needs. With GuideStone, you're not alone.

For help determining the best coverage option for you and your family, contact us at Insurance@GuideStone.org or **1-844-INS-GUIDE** (1-844-467-4843), Monday through Friday, from 7 a.m. to 6 p.m. CT.



Choice PPO

These plans are designed for individuals with high health and prescription needs, and who are also seeking coverage within **both** the Highmark® Blue Cross Blue Shield (BCBS®) nationwide network and out-of-network providers. These plans offer a full range of benefits including co-pays.

Choice PPO plans include:

Personal Health Choice 1000

Personal Health Choice 2000

Personal Health Choice 3000¹



Access EPO

These plans are designed for individuals who are seeking comprehensive health and prescription benefits at more affordable rates by accessing care **only** within the Highmark BCBS network. They cover out-of-network emergency care, offer co-pays and provide more affordability than Choice PPO Plans.

Access EPO plans include:

Personal Health Access 2000 EPO

Personal Health Access 3000 EPO¹

Personal Health Access 5000 EPO¹

Personal Health Access 6000 EPO¹

Personal Health Access 7500 EPO¹



HSA Q

These High Deductible Health Plans (HDHPs) are designed for individuals seeking coverage **only** within the Highmark BCBS network and the option to pay for qualified medical expenses with non-taxed dollars through a Health Savings Account (HSA). These budget-friendly plans do not have co-pays.

HSA Q plans include:

Personal Health Saver 3800 EPO¹

Personal Health Saver 7000 EPO¹



Basic Plus

These lower-cost plans are designed for those who visit a health care provider only a few times a year and need basic prescription coverage.

Basic Plus plans include:

Personal Value Health 5000¹

Personal Value Health with Rx Deductible EPO^{1,2}

Personal Value Health 7500 EPO¹



Basic Limited

These plans are designed for healthy individuals who are on a budget and do not have high prescription needs. They have the lowest monthly cost, provide financial protection from catastrophic claims, and have a \$0 co-pay for preventive care and Teladoc®.

Basic Limited plans include:

Personal Secure Health 3000 EPO^{1,2}

Personal Secure Health 6000 EPO^{1,2}

Personal Secure Health 9000 EPO^{1,2}

¹These plans do not constitute "creditable coverage" for Massachusetts residents.

²This plan is not considered "creditable coverage" under Medicare Part D for active members age 65 and older. Members in this plan could incur late enrollment penalties from Medicare.

HEALTH PLANS MADE SIMPLE

When looking for a health plan that meets your needs, you may come across unfamiliar plan details and terms. Our goal is to equip you to make the best decisions for your ministry.

These terms are commonly used when discussing health plans.

- **Preferred Provider Organization (PPO) Plan:** A type of health plan that contracts with health care providers — such as hospitals and doctors — to create a network of participating providers. You pay less if you use providers that belong to the plan’s network; however, you can use doctors, hospitals and providers outside of the network at an additional cost.
- **Exclusive Provider Organization (EPO) Plan:** A managed care plan where services are covered only if you go to health care providers, specialists or hospitals in the plan’s network (except in an emergency).
- **High Deductible Health Plan (HDHP):** A plan with a higher deductible than a traditional health plan because it is designed to be used with a Health Savings Account (HSA), allowing you to pay for qualified medical expenses with tax-advantaged dollars.

You can find additional health plan vocabulary at [Help.GuideStone.org/HealthPlanVocabulary](https://www.helpguidestone.org/HealthPlanVocabulary).

Individual Deductible:
The amount you pay out-of-pocket for a covered health care service before the co-insurance takes effect. The lower the deductible, the faster you get coverage at the co-insurance level.

Maximum Out-of-pocket (MOOP): The annual maximum you will pay under a plan, including your deductible, co-pays and prescription costs. Once you reach this limit, the plan pays 100% of eligible claims.

Preventive Care: This includes routine procedures such as check-ups, screenings and immunizations. In this example, preventive care is covered at 100%.

Co-insurance: The split cost between what you and the plan pay for eligible claim expenses. Here, the plan pays 80% of the claim, you pay 20%.

Family Deductible: The amount your family needs to pay out-of-pocket for a covered health care service before co-insurance takes effect for the whole family. This amount needs to be met by a combination of two or more people on the plan.

Co-pay: The fixed amount you pay for certain in-network expenses like urgent care or a primary care visit.

Health Plan 500*

PLAN FEATURES	
Individual Deductible	\$500
Family Deductible	\$1,000
Teladoc® Co-pay	\$0
Maximum Out-of-pocket (medical and prescription)	\$4,750/\$7,500
Outpatient Surgery	20% after deductible
Urgent Care Co-pay	\$50
Plan Pays/Individual Pays (Co-insurance)	80%/20%
Wellness and Preventive Care	100% no co-pay

*Personal Plan 500 is a fictional plan for illustrative purposes.

Visit [GuideStone.org/IndividualHealthPlans](https://www.GuideStone.org/IndividualHealthPlans).



WELLNESS TOOLS AND ADDITIONAL BENEFITS

Available in Your GuideStone Health Plan

GuideStone's health plans include a rich array of tools to help you maximize coverage dollars and additional benefits designed to enrich your life.



WELLNESS TOOLS AND PROGRAMS

Staying healthy is easier than ever — **you just need the right tools!** Learn what's available in your GuideStone health plan.*

Visit [GuideStone.org/WellnessTools](https://www.guidestone.org/WellnessTools).

Clarity

The Clarity Team offers a personalized approach to navigating your care. Not only do they listen and understand your health care needs, but they also use their expertise to help you better manage your condition and care.

Clarity is just a tap, click or call away. You have one mobile app and one phone number.

[My Highmark app](#) | 1-866-472-0924

Get to know [Clarity](#).



See what they are saying about Clarity:

"Diane was fabulous. I used to have coverage under my husband and had to switch to COBRA. The deductible was supposed to be merged, and it didn't happen. I was lucky enough to get Diane, and she did the research to make sure that everything was getting merged. Diane called me today to let me know it was all taken care of. Diane was great and took the extra step and effort to make sure everything was handled and taken care of. She is a gem that we have."

"I just spoke with Brenda, and she wanted to let us know that Erik did a fantastic job. He took the time to give me information, and I had a lot of questions. He deserves an A+ and high ratings on everything he did today."

Save on Health Care

- [Highmark's Provider Search Tool](#) enables you to stay in-network and estimate your cost.
- [SmartShopper](#)® allows you to earn cash rewards of up to \$1,500 and reduce your out-of-pocket health care costs by shopping for health care procedures with SmartShopper. Access SmartShopper by calling 1-866-285-7475 to speak to a personal assistant.
- [Teladoc](#)® (telemedicine provider) means that you have access to certified providers, all day, every day — even holidays — for general medical care. Register today at [Teladoc.com/GuideStone](https://www.teladoc.com/GuideStone). Your Teladoc services include **General Medical**, **Dermatology** and **Mental Health**.

*Cigna International and Medicare-coordinating plans are excluded from wellness tools and additional benefits. Global Core plans do not have access to Clarity. SmartShopper is not available to Blue HPN plans. Teladoc mental health benefits are not available on Secure Health plans.

Take Charge of Your Health

- **Highmark** gives you a comprehensive set of tools, resources, care management, wellness and member solutions to lead your healthiest possible life. Take advantage of programs like [health coaching](#) and the [Baby BluePrints® program](#).
- **Blue Distinction® Centers** are high-quality hospitals that can lower your chance for complications and shorten your stay. Blue Distinction is a designation awarded by the [Blue Cross Blue Shield Association](#) to hospitals proven to deliver superior results for complicated, costly procedures.
- **Thrive by Sword®** pairs you virtually with a sword-licensed physical therapist, who assesses your pain and tailors a program to your unique needs. Thrive by Sword offers a digital solution for those experiencing pain in the back, neck, shoulder, elbow, wrist, hip, knee or ankle. Utilizing wearable FDA-listed motion sensors and the sword tablet to guide movement, the physical therapists evaluate real time biofeedback as you go through the exercise sessions. The physical therapist provides ongoing virtual support and guidance throughout the program and is available for questions along your journey. You have access to this benefit at no cost and with no visit limitations. Please review the [Sword Virtual Physical Care Tutorial](#) and [Frequently Asked Questions](#) for additional information. Book your free consultation today at [Join.SwordHealth.com/BCBS](#).
- **Twin Health™** delivers individualized guidance to help members with type 2 diabetes. It is a dynamic, digital representation of a person's unique metabolism, built from thousands of data points gathered daily from non-invasive wearable sensors and self-reported preferences. For additional information, please view the [Twin Health – Just for You video](#) and review the [Frequently Asked Questions](#). Start reversing your type 2 diabetes by signing up for Twin Health at [Partner.TwinHealth.com/GuideStone](#).

Watch the video at [GuideStone.org/TwinHealth](#) to see how Twin Health has helped GuideStone members reverse type 2 diabetes.



ADDITIONAL BENEFITS

Your GuideStone health plan protects **more than your health**. It also provides for your entire well-being with these additional benefits.

Visit [GuideStone.org/AdditionalBenefits](#).

- **BCBS Global® Core** — Members traveling outside the United States have access to doctors and hospitals in more than 200 countries and territories around the world. Download the [BCBS Global Core app](#) or go to [BCBSGlobalCore.com](#) to find health care providers, translate medical terms and access emergency care information when you're outside the United States.
- **Blue365®** — This member discount program can help you save on products and services that are not part of your health coverage. To browse all the deals, go to [Blue365Deals.com](#).
- **Experian IdentityWorks™** — Highmark BCBS provides Experian IdentityWorks to help members who are victims of identity theft. Enrollment is required at [ExperianIDWorks.com/Highmark](#). Members must provide their personal information to enroll online or via phone. **Please note:** You will receive an email in December to confirm your coverage for the next year.
- **Vision Benefit** — For individuals in the majority of GuideStone's plans, your vision benefit covers one annual eye exam per covered family member. The coverage does not include the cost of glasses or contact lenses. You must use an in-network provider to receive this benefit. The vision benefit is not available in all plans. Please review your plan booklet for details.

ELIGIBILITY REQUIREMENTS

Individuals are eligible to participate in GuideStone's Personal Plans if they:

- Are paid employees of an eligible church, agency or institution affiliated with or that shares common religious bonds with the Southern Baptist Convention
- Work 20 or more hours per week

Medical, Dental and Vision

You may apply without providing evidence of good health if you experience one of the following events:

- **New employment:** New employees are eligible to enroll in a plan within the first 60 days at an eligible employer. Coverage will be effective the first day that the employee reports to work.
- **Work schedule increases to 20 or more hours per week:** Existing employees who transition from working fewer than 20 hours per week to working 20 or more hours per week become eligible to enroll within 60 days of their hours increasing. Coverage will be effective on the date hours increase to 20 or more per week.
- **Certain special enrollment events:** Current employees (or eligible dependents) who experience a special enrollment event — such as marriage, birth or placement for adoption — become eligible to enroll within the first 60 days of the special enrollment event.

You may also apply for medical coverage by providing evidence of good health at any time or if you experience the special enrollment event of loss of coverage.

Please note: Employees of employers with more than 10 employees are not eligible:

- For loss of coverage changes
- To apply for enrollment at any time

Term Life, Accident and Disability Coverage

Eligible individuals and family members must submit an [Evidence of Good Health Application](#) to request term life, accident and disability coverage.

Medical Evidence

Please allow up to eight weeks for your application to be processed. You will receive written notification once a decision is made.

WE'VE COME A LONG WAY TOGETHER IN MINISTRY.

GuideStone cares about your health in retirement.

Maximize Medicare with a GuideStone Care Plan.

Our Medicare-coordinating plans combine convenience with budget-friendly rates for retirees age 65 and older.

If you have questions about eligibility or which GuideStone Medicare-coordinating plan is right for you, reach out to a customer solutions specialist by calling **1-844-INS-GUIDE** (1-844-467-4843), Monday through Friday, from 7a.m. to 6 p.m. CT.

