The University of South Alabama offers a limited network plan option with the USA VIVA Health & Dental Plan during open enrollment for coverage beginning effective January 1, 2018.

Narrow or limited network health plans restrict benefits to specific hospitals, physicians and other medical providers. A narrow network design offers value to consumers through a lower premium, enhanced benefits and access to select medical providers concentrating on improved medical outcomes and preventive health.

The plan is administered by VIVA Health, Inc. VIVA was selected for its ability and experience; and is associated with the University of Alabama at Birmingham (UAB).

USA VIVA Health & Dental Plan is a limited network design based on USA Health medical providers and select providers from the VIVA network. VIVA, working with USA Health, has reviewed the provider network to ensure adequate access to primary and specialty care physicians. To supplement primary care, a Telehealth program will be included, providing telephone and internet access to a physician for minor medical concerns, resulting in less cost for the employee, time saved, and convenience. Urgent care services are available with Greater Mobile Urgent Care and American Family Care in Mobile and Baldwin counties. Out-of-network services will be available when approved by VIVA’s medical director. The limited network providers have agreed to reduce their fee making this a cost effective plan. The employee monthly cost sharing will be the lowest of the plans offered:

<table>
<thead>
<tr>
<th>Plan</th>
<th>Month Share</th>
<th>Year Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA Base Plan</td>
<td>108.00</td>
<td>354.00</td>
</tr>
<tr>
<td>USA Standard Plan</td>
<td>128.00</td>
<td>418.00</td>
</tr>
<tr>
<td>USA VIVA</td>
<td>90.00</td>
<td>300.00</td>
</tr>
</tbody>
</table>

▲ Lowest cost program for the employee.
▲ Enhanced benefit design with no deductible or copays for hospital and physician services as long as services are within the network.
▲ Select providers concentrating on better medical outcomes.
▲ Preventive health for early detection and treatment of illness and chronic conditions.
▲ Telehealth to improve access and convenience for treatment of minor medical conditions.
▲ A voluntary offering for those employees who elect to participate.

The USA VIVA Health & Dental Plan is not for everyone:

a) The employee and covered dependents must reside in the state of Alabama to join this Plan.
b) The employee needs to understand the narrow network design.
c) The employee should be satisfied with the medical providers offered by this Plan.
d) Employees who select this Plan during open enrollment for the 2018 benefit year will be required to remain in the Plan until the next benefit year.
e) Employee who joins the USA-VIVA Health & Dental Plan and then later elects to change plans may only change to the Standard Plan even if previously enrolled in the Base Plan.

USA VIVA Health & Dental Plan will save the employee $456 for single and $1416 for family coverage annually as compared to the Standard Plan. In addition, the benefit design has no deductibles or copay amounts required for hospital and physician services as well as several other services. The pharmacy benefit will be administered by Express Scripts, Inc., the dental benefit will be administered by Southland Benefit Solutions, Inc.; and the health and dependent care flexible spending accounts will be administered by Discovery Benefits, Inc. The pharmacy benefit and dental benefit are the same as those provided with the USA Health & Dental Plan’s Standard Plan.

Enrollment in the USA VIVA Health & Dental Plan is on a voluntary basis to all benefits-eligible employees.
Frequently Asked Questions

May I join any of the three plans offered by the University: Base Plan, Standard Plan, USA VIVA Health & Dental Plan?
The USA VIVA Health & Dental Plan is available for enrollment on a voluntary basis by all benefits-eligible employees. Employees hired on or after January 1, 2013, are eligible for the Standard Plan. Employees hired before January 1, 2013, are eligible for the Base Plan.

Does the USA VIVA Health & Dental Plan offer dental benefits?
Yes, the USA VIVA Health & Dental Plan has the exact same dental benefits offered in both the Base and Standard Plans. The dental benefits are administered by Southland Benefit Solutions, Inc. which has an extensive network of dental providers.

If I join the USA VIVA Health & Dental Plan can I switch back to the Base Plan or Standard Plan?
No, you may only switch back to the Standard Plan and then only during the annual open enrollment month for coverage starting January 1st of the following benefit year. You may not switch coverage during the year unless you have a change in your residence and you reside outside the state of Alabama. If you decide to change from the USA VIVA Health & Dental Plan you may only enroll in the Standard Plan; you may not enroll in the Base Plan even if you were previously in the Base Plan.

Will my doctor be covered under the USA VIVA Health & Dental Plan?
The USA VIVA Health & Dental Plan is a limited network of medical providers. You will need to review the provider directory to determine if your physician(s) are in the network or call VIVA at (205) 558-7474 or 1-800-294-7780; or go to the web site for the provider listing at www.vivahealth.com to verify your physician’s status. Remember, medical providers that are not Network Providers are not eligible for benefits and any charges incurred will be the responsibility of the member.

Under the USA VIVA Health & Dental Plan, if my Network Physician refers me to a Non-Network medical provider will that be covered by the Plan?
No, generally no out-of-network medical provider will qualify for benefits. The only time a Non-Network medical provider will qualify for benefits is when the VIVA medical director has approved the medical expense or service for payment of benefits in advance of the medical procedure or expense.

What should I consider when deciding whether or not to join the USA VIVA Health & Dental Plan?
You should consider that only a limited network of medical providers will qualify for coverage. This may not be the best plan if you have a chronic illness and receiving medical care at this time. In that case, you will want to verify that the medical providers you use are Network Providers and listed in the provider directory. If they are not Network Providers, you should elect the Standard Plan option. You must reside in the state of Alabama.

Why are the benefits better and the cost less for the USA VIVA Health & Dental Plan?
This is due to the fact that the medical providers have agreed to accept a lower fee. It is also due to medical providers working to achieve better medical outcomes through quality of care thereby reducing the cost of complications. The USA VIVA Health & Dental Plan benefits are better for medical services; and the pharmacy and dental benefits are the same as the Standard Plan benefit.

Who selects the medical providers for the USA VIVA Health & Dental Plan?
VIVA Health, Inc. has the sole responsibility for selecting providers to be included as Network Providers. VIVA Health, Inc. monitors providers for access and quality of care as well as medical outcomes to ensure the highest level of medical care. VIVA Health, Inc. has the sole authority to add and remove providers from the listing of Network Providers.

How do I join the USA VIVA Health & Dental Plan?
You must complete an enrollment form and file it with the University’s Human Resources department. By filing that form, you will attest to the fact that you understand: 1) that the USA VIVA Health & Dental Plan is a limited network plan that does not provide benefits for out-of-network medical providers except in the case of emergency medical care and then only after proper notification; 2) that it is your responsibility to ensure that medical care is provided by a Network Provider; 3) that you may not change from the USA VIVA Health & Dental Plan except during open enrollment for coverage effective January 1st of the following year except if you have a change of residence and reside outside the state of Alabama (see the change-in-status event rule described in your Member Handbook).