Metro Community Church

Member Enrollment Booklet

Review Your Plan Benefits

2026 Group Plans Member Enrollment Booklet

GuideStone®

Welcome to Your

GuideStone Health Plan

Welcome to GuideStone! We look forward to serving you!

With GuideStone®, you're receiving quality, cost-effective health coverage created specifically for those who serve in ministry.

Let's get started!

Getting Started with Your New Plan

You are busy with your ministry, so we've done our best to provide you with the tools you need to get started with your new health plan. You'll find all the forms and information you need to enroll in, access and update your coverage.

Using Your Benefits

You'll also find valuable resources to guide you in utilizing your benefits. The health plan road map provides an at-a-glance view of your plan's benefits. Plus, you'll find insights on how to make the most of your options, along with information about some valuable additional benefits.

Finding Answers

Help is a call or click away.

- GuideStone Customer Solutions: **1-844-INS-GUIDE** (1-844-467-4843)
  Get help with your *My*GuideStone account.
- Highmark® Well360 Team: **1-866-472-0924** or ***MyHighmark.com***
  Get help finding in-network providers and understanding plan benefits.
- Express Scripts® Pharmacy Benefit Services: 1-800-555-3432 or ***Express-Scripts.com***
  Get assistance with your prescription medications.

"You need somebody you can depend on. You need somebody that's affordable. You need somebody you can trust. You need somebody that you can call and get a response. GuideStone has exceeded all of those things for us. [Health coverage] is not always an easy subject. They make it so easy."

— Alan Taylor, Business Administrator, FBC Trussville, Alabama

Glossary of Terms

Coinsurance — The percentage of eligible claims you pay after you meet your deductible.

Coinsurance and deductible out of pocket limit (out-of-network) — The most you will have to pay in a year in out-of-network deductibles and coinsurance for covered benefits.

Copay — The fixed, up-front dollar amount you pay for certain covered expenses. Copay amounts apply after your in-network or out-of-network deductible and do not apply to your out-of-network coinsurance maximum.

Deductible (family) — This is the amount a family is required to pay before benefits begin for services not covered by copays. Once this amount is met, the plan will consider all family members to have met their deductibles. One individual cannot contribute more than the individual deductible amount. This is an embedded deductible.

Deductible (individual) — This is the amount an individual is required to pay before benefits begin for services not covered by copays. Once this amount is met, the plan will begin paying claims for that individual at the coinsurance level.

Emergency care — Medical services from the Emergency department of a hospital to evaluate a medical condition that, in the absence of immediate medical attention, would place the health of the individual in serious jeopardy, cause serious impairment to bodily functions or cause serious and permanent dysfunction to any bodily organ or part.

Generic — A bioequivalent to the brand-name drug made available to the public after the patent has expired on the brand-name drug. The generic version usually results in a less expensive drug.

In-network — Health care services received from a provider in a network.

Mail order — Mail order is a service that allows you to refill recurring prescriptions (90-day supply) through an online pharmacy. You receive your prescriptions by mail.

Maximum out-of-pocket (medical and prescription) — The maximum out-of-pocket limit includes the deductible and coinsurance for eligible, in-network services. After the individual or family amount has been satisfied, the health plan covers all eligible, in-network health care expenses for the rest of the plan year. For family coverage, one individual cannot be responsible for more than the current IRS limit.

Network provider — A doctor, hospital or other health care facility that has entered into a contract to provide medical services or supplies at agreed upon rates to you or your covered dependents under the plan.

Non-preferred drugs — A list of prescribed medications that are not on the plan's formulary.

Preferred drugs — Also known as formulary drugs, this is a list of commonly prescribed, brand-name medications that are selected based on their clinical effectiveness and opportunities to help control plan costs.

Retail pharmacy benefits — This refers to filling your prescriptions at a participating network pharmacy. This approach is best for short-term prescriptions (up to 30-day). You could save money by filling recurring prescriptions via mail order (see above).

Specialist — Any physician not considered a primary care physician.

Specialty drug — Specific prescriptions used to treat complex, chronic or special health conditions.

Telemedicine — The use of telephone and/or live video technology in order to provide medical care.

Urgent care — Treatment at an urgent care facility for the onset of symptoms that require prompt medical attention.

Vision exam — Covers one annual eye exam per covered family member, which may include an eye health examination, dilation and/or refraction. Coverage does not include glasses or contact lenses (unless there has been a cataract extraction), eye surgery or retinal telescreening. See the Preventive Care Schedule for additional vision screening coverage for children when performed by a pediatrician or primary care physician as part of an annual well-child visit.

Wellness and preventive care — Refers to the services listed on the Preventive Care Schedule, which are covered at 100%, not subject to the deductible. The Preventive Care Schedule is based on services required under the Affordable Care Act of 2010 (ACA), as amended.

This information only highlights the depth of coverage and benefits you can receive when you protect yourself with GuideStone. There are limitations and exclusions that apply. This is a general overview of plans that are offered. The official plan documents and insurance contracts set forth the eligibility rules, limitations, exclusions and benefits. These alone govern and control the actual operation of the plan.

Note: A corresponding Summary of Benefits and Coverage was created to help consumers more easily understand their insurance benefits and compare plans. To view and download the Summary of Benefits and Coverage documents for all GuideStone medical plans available to you, visit ***GuideStone.org/Summaries***.

You may also request printed copies by calling **1-844-INS-GUIDE (1-844-467-4843)** Monday through Friday, between 7 a.m. and 6 p.m. CST.

08/25 9837

A Road Map to Your GuideStone Health Plan

Follow this road map to maximize the benefits of your GuideStone health plan, which is designed to help you build resilience, steward your resources well and honor your biblical values.

1 Highmark® Blue Cross Blue Shield (BCBS®)

The Highmark Well360 Team is made up of health, benefits and service experts who can help you understand your benefits and find in-network care. Get to know Highmark:

- Visit *MyHighmark.com*
- Install the My Highmark app or
- Call **1-866-472-0924** (the number on the back of your medical ID card)

2 Prescriptions

Your Express Scripts® Pharmacy Benefit Services prescription plan provides easy, cost-effective ways to obtain your prescription medications, including mail order.

- Create an **Express Scripts** account and explore options.
- Designate your **preferred retail pharmacy**.
- Learn how **prior authorizations work**.

3 Preventive Care

Preventive care helps detect issues early to optimize your health and save money.

Download your *Preventive Schedule* at ***GuideStone.org/PreventiveSchedule***. Here are some of your covered benefits:

- Annual checkup
- Preventive mammograms and well-woman screenings
- Some cancer, diabetes and blood pressure screenings

4 Wellness Tools and Programs

Visit ***GuideStone.org/WellnessTools*** to learn more about tools and programs. Many are offered at no additional cost to GuideStone health plans.

- Access Teladoc® (telemedicine provider).[1]
- Earn cash rewards with SmartShopper®.[2]

5 Additional Benefits

Your GuideStone health plan is rich with extras you don't want to miss.

Visit ***GuideStone.org/AdditionalBenefits*** to discover how to:

- Access overseas coverage using BCBS Global® Core.
- Get discounts for products and services using Blue365®.[3]
- Minimize damage from identity theft with Experian IdentityWorks℠.[4]

[1]Teladoc Mental Health benefits are not available on Secure Health plans. High Deductible Health Plan (HDHP) members are required to pay the full consultation fee until they have met their deductible/co-insurance requirements. [2]Not available with Blue High Performance Network or Medicare-coordinating plans. [3]Not available for Cigna International plans and Medicare-coordinating plans. [4]The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

Medical and Prescription ID Card

You have one card for your medical and prescription benefits.

EVERNORTH HEALTH SERVICES

Express Scripts® Pharmacy Benefit Services

Plan Information
GS Group Number for GuideStone National Network Health Plans** – **ABSBC01**
GS Group Number for Blue High Performance Network℠ Plans – **ABSBC01**
GS Group Number for Medicare-coordinating Plans – **ABSBC02**
Benefit Questions – **1-855-497-1230**
RX Bin for GuideStone Health Plans Except for Secure Health (No PCN number required) – **610014**
RX Bin for Secure Health Plans – **003858**
PCN Number for Secure Health Plans – **A4**

HIGHMARK.

Plan Information
GS Group Number for GuideStone National Network Health Plans* – **CQM363**
Blue High Performance Network Plans – **N2Q363**
GS Group Number for Medicare-coordinating Plans – **OBF363**
Member Number – Your Social Security Number
Benefit Questions – **1-866-472-0924**

Medical ID Cards

Contact the Highmark® Well360 Team to request replacement ID cards or access virtual cards. Use your medical ID card for both health care and prescriptions — there's no need for separate cards!

- Visit *MyHighmark.com*
- Install the My Highmark app or
- Call **1-866-472-0924** (the number on the back of your medical ID card)

If you have questions about accessing your benefits before you receive your ID card, contact our customer solutions specialists 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.

*All plans except Blue High Performance Network and Medicare-coordinating.
**All plans except Blue High Performance Network, Secure Health and Medicare-coordinating.

Where to Go For Care

Telemedicine, in-office, urgent care or the ER?

You need health care, but where should you go? Your GuideStone® health coverage provides five basic options. See which one is right for you.

	Telemedicine (Teladoc®[1])	Primary Care Physician	Urgent Care	Hospital-based ER	Freestanding ER[2]
Some Common Conditions	Cold and flu	Regular health screenings	Sprains and strains	Persistent chest pain	Sudden, sever headache
	Bronchitis	Regular health checkups	Sports injuries	Difficulty speaking, altered mental status	Fever in a newborn baby
	Allergies	Fever without a rash	Cuts that re-quire stitches	Sudden or unexplained loss of con-sciousness	Severe pain
Why Visit	The convenient choice	The in-office choice	The urgent and after-hours choice	The emergency choice	The emergency choice
Cost	$	$$	$$$	$$$$$	$$$$$
Hours	24/7/365	Weekdays only (typically)	8 a.m.—9 p.m. daily (typically)	24/7/365	24/7/365
Wait time	15-minute call-back time	By appointment only	Varies depend-ing on demand. Online check-in may be an option	Could wait hours before seeing a doctor	Generally shorter wait times than a hospital-based emergency room

[1]High Deductible Health Plan (HDHP) members are required to pay the full consultation fee until they have met their deductible/co-insurance requirements. Teladoc Mental Health benefits are not available on Secure Health plans. [2]Freestanding emergency rooms generally do not accept patients delivered via ambulance. Remember, if you are facing a lifethreatening situation, always go to the hospital-based emergency room first. Freestanding emergency room treatment can cost thousands more than the same treatment at an urgent care clinic.

Urgent Care or Freestanding Emergency Room?

How to Know the Difference

Distinguishing between an urgent care facility and a freestanding emergency room can be tricky. It's important to know where you are being treated, because freestanding emergency room treatment can cost thousands more than the same treatment at an urgent care clinic.

Look for the following clues to distinguish the difference.

Freestanding emergency rooms:

1. **Include the word "emergency" in the facility name**
2. **Are usually located in more affluent neighborhoods**
3. **Do not accept Medicare and Medicaid patients**
4. **Are never attached to a hospital**
5. **Offer more complex treatment options than urgent care**
6. **Charge much higher prices than urgent care facilities**

Be Prepared to Access the Right Care

While we all hope we never need emergency, urgent or after-hours care, it is wise to be prepared:

- Register with *Teladoc.com/GuideStone* now so you can easily access care when you are ill. Teladoc services include General Medical, Dermatology and Mental Heath.*
- Familiarize yourself with the location of your nearest urgent care clinics.
- Learn which hospital emergency rooms are part of your network by visiting *MyHighmark.com*, using the Highmark app or calling **1-866-472-0924** (the number on the back of your medical ID card).
- Download the My Highmark app and register your member account to quickly retrieve digital versions of ID cards whenever and wherever needed.

It is also important to be familiar with your health care provider's options for treatment. GuideStone members can review the options for seeking treatment and benefit levels in your plan booklet available at *My.GuideStone.org*.

*High Deductible Health Plan (HDHP) members are required to pay the full consultation fee until they have met their deductible/ co-insurance requirements. Teladoc Mental Health benefits are not available on Secure Health plans.

Wellness Tools and Additional Benefits

Available in Your GuideStone® Health Plan[1]

GuideStone's health plans include a rich array of tools and additional benefits to help maximize your health and 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*.

Highmark®

The Highmark Well360 Team is made up of medical, benefits and service experts who can help you understand your benefits and find in-network health care providers.

Contact the Well360 Team:

- Visit *MyHighmark.com*
- Install the My Highmark app or
- Call **1-866-472-0924** (the number on the back of your medical ID card)

See what people are saying about Highmark:

"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®[2] allows you to earn cash rewards of up to $1,000 and reduce your out-of-pocket health care costs by shopping for health care procedures with SmartShopper. Call SmartShopper at 1-866-285-7475 to speak to a personal assistant.
- Teladoc®[3] (telemedicine provider) provides access to certified providers, all day, every day — even holidays — for general medical care. Register today at *Teladoc.com/GuideStone*. Your Teladoc services include **General Medical, Dermatology** and **Mental Health**.

Teladoc HEALTH | GuideStone®

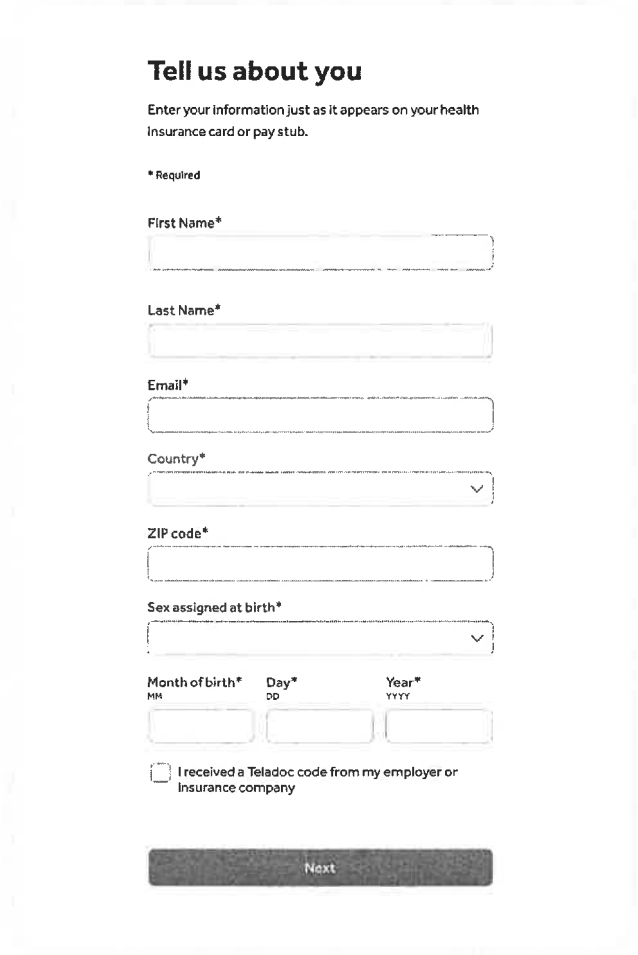
Get started with Teladoc Health

Simply visit *Teladoc.com/GuideStone*, click "Sign in" and then "Create a new account". Then simply follow the instructions below.

Note: If you have accessed Teladoc through a previous health plan, you must re-register with your GuideStone® ID card.

1 Confirm benefits

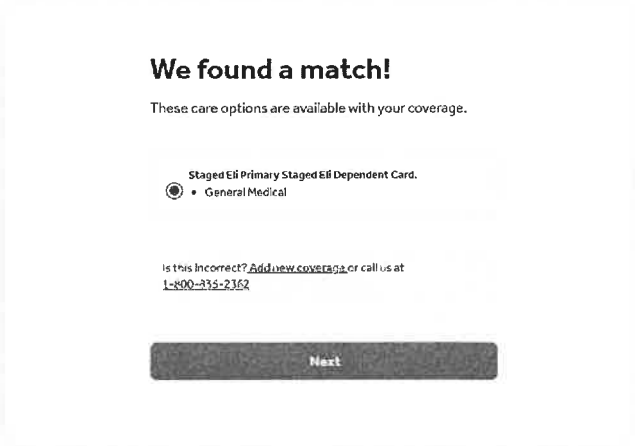
Provide some information about yourself to confirm your eligibility.



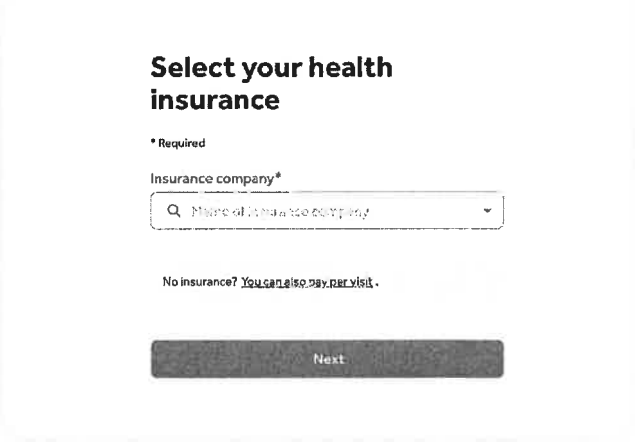
Note: You will need to use the exact name that is listed on your ID card.

2 Find your coverage

You may see one of these two screens, but both will effectively get you started.



Confirm the coverage that has been matched to you. You will then be asked for your member ID located on your ID card.

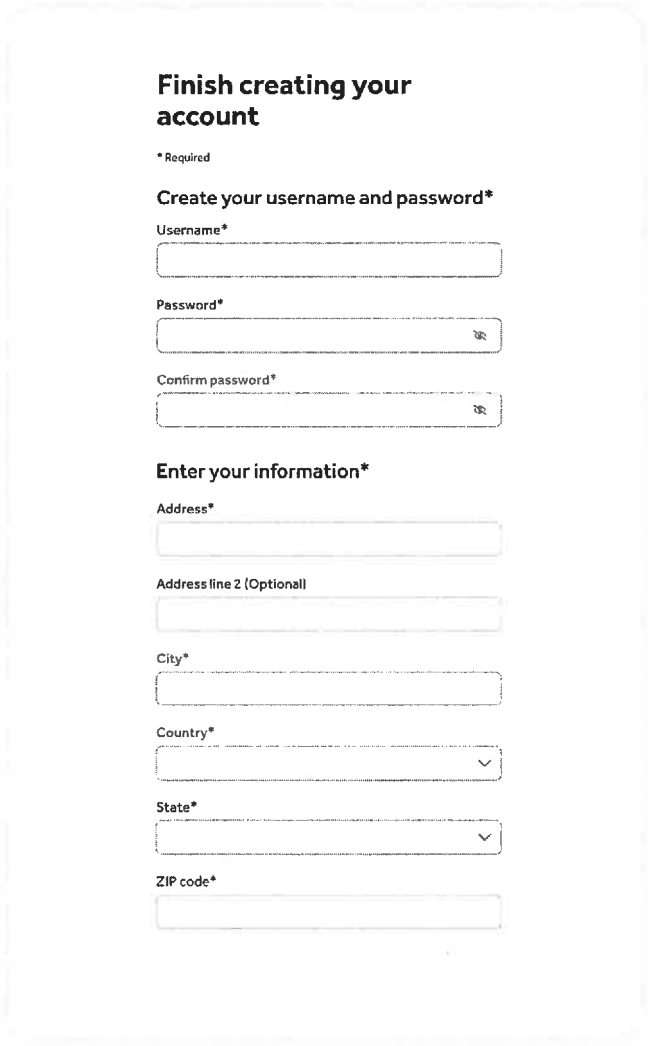


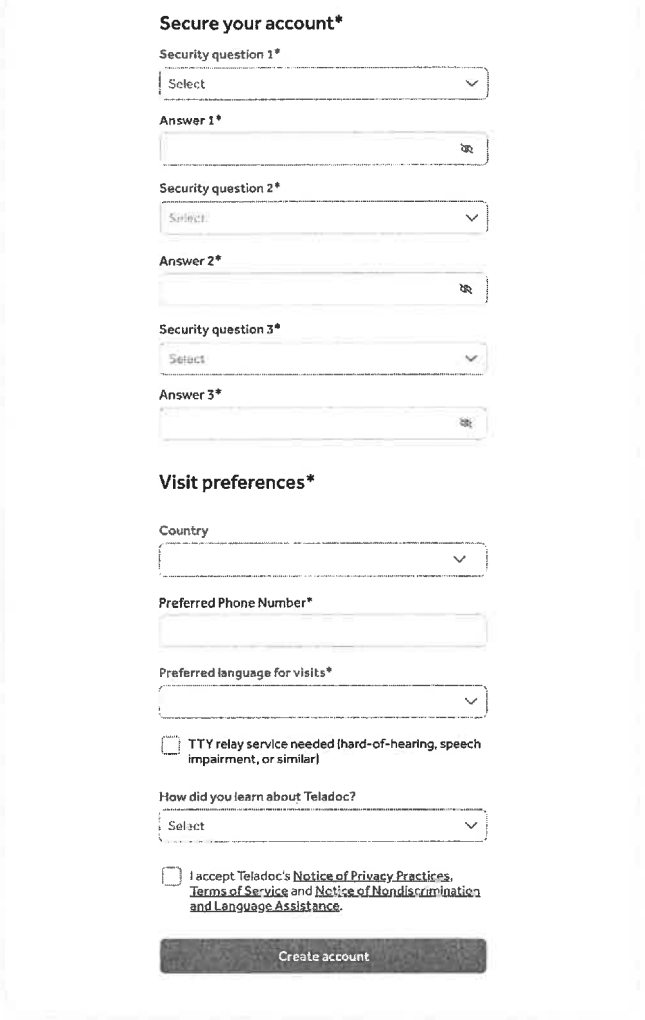
Pick your health plan from the drop-down menu and enter **Highmark Blue Cross Blue Shield.**

Teladoc HEALTH | GuideStone

3 Create account

Enter your contact information, username, password and security questions.





Once your account is created, eligible dependents under 18 years of age can be added in your account settings under the primary member. Dependents older than 18 should follow the steps above to create their own account.

Set up your Teladoc Health account today

Visit *Teladoc.com/GuideStone* | Call 1-800-TELADOC (800-835-2362) | Download the app

*Teladoc Health is not available internationally.

Stop overpaying for medical care

Did you know that the same MRI can range from $200 to $2,000? It's possible that you're overpaying for care, even at in-network locations. SmartShopper is part of your benefits plan and has already done all the legwork so you'll know what your costs will be upfront.

You have SmartShopper!

By providing the information you need, SmartShopper has helped over 1 million members save money without compromising high-quality. You can even earn a reward up to $1,000! So don't wait, start saving money and earning rewards today!

It's Simple To Use

Compare locations at **MyHighmark.com** or call the Care Concierge Team at **866-285-7475**.

Schedule your appointment or let the Care Concierge Team do it for you.

Earn your reward by having your appointment within the year.

The Care Concierge Team is ready to support you. From selecting to scheduling to prior authorizations, they make next steps = no sweat. Call today!

Go Green by going paperless! Scan the QR code or contact us to register your email today.

The Care Concierge Team is available Monday through Thursday from 8 a.m. to 8 p.m. and Friday from 8 a.m. to 6 p.m. ET.*

HIGHMARK. GuideStone SmartShopper®

*Summer hours: The Care Concierge Team closes at 3 p.m. ET on Fridays from Memorial Day to Labor Day.

The SmartShopper program is offered by MDX Medical, LLC, a Zelis company. Reward-eligible options and reward amounts are subject to change. Rewards are available for select procedures only. Rewards may be a taxable form of income. MDX Medical, LLC, a Zelis company, does not provide tax advice. Rewards may be delivered by check or an alternative form of payment. Members with primary coverage under Medicaid or Medicare are not eligible to receive incentive rewards under the SmartShopper program.

Prices for medical services are provided for illustrative purposes only and may not reflect current/actual pricing in your geographic region.

Rewards are funded by your plan sponsor.

Insurance or benefit administration may be offered or provided by Highmark Blue Cross Blue Shield or by Highmark Choice Company, both of which are independent licensees of the Blue Cross and Blue Shield Association. Health care plans are subject to the terms of the benefit agreement.

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex

1244786 8773 12/23