



State of Delaware Group Health Plan- SurgeryPlus Frequently Asked Questions (FAQs)

For more information, visit de.gov/statewidebenefits

1. What is the SurgeryPlus benefit?

SurgeryPlus is a supplemental benefit for non-emergency, planned surgeries, which provides high-quality care, concierge-level member service and lower costs.

2. What is included in the SurgeryPlus benefit?

The SurgeryPlus benefit includes the following:

- Healthcare concierge service with a dedicated Care Advocate to assist with surgeon selection, transferring medical records, appointment/procedure scheduling, travel planning (in the event where travel is required), and/or any other logistics.
- Financial incentives based on the type of surgery.
- Travel benefit in the event that travel is required for the procedure, in which all member's travel costs are covered.
- Access to a high-quality, national Surgeons of Excellence Network.

3. Can I keep my existing plan?

Yes. This benefit does not replace your existing health plan. This benefit is available to those enrolled in one of the Aetna or Highmark Delaware non-Medicare health plans and their dependents.

4. Do I have to enroll?

You do not have to enroll. If you are enrolled in one of the Aetna or Highmark Delaware non-Medicare health plans, you and your dependents may automatically take advantage of this benefit.

5. Is there a cost associated with this benefit? Will my premium increase?

No. This benefit is offered at no additional cost to those enrolled in one of the Aetna or Highmark Delaware non-Medicare health plans.

6. Can dependents use the SurgeryPlus benefit?

Yes. Dependents who are enrolled in one of the Aetna or Highmark Delaware non-Medicare health plans may receive healthcare services using SurgeryPlus.

7. When using SurgeryPlus, do I have to choose a provider in my health plan’s network?

No. SurgeryPlus has its own network of providers who may or may not be in your medical plan’s network. SurgeryPlus is independent from your medical plan. If you receive services through SurgeryPlus, you will use the SurgeryPlus network of providers, not your health plan’s network. You must pre-arrange services through a SurgeryPlus Care Advocate directly by calling 1-855-200-2034.

8. What if my health plan requires preauthorization for the surgery I am planning?

Based on your health plan, the SurgeryPlus Care Advocate will assist in the collection of preauthorization documents needed for your surgery.

9. I am a member of the Aetna HMO plan, which requires me to obtain a referral from my primary care physician for services. Do I need to obtain a referral to use the SurgeryPlus benefit?

No. You do not need to obtain a referral to use the SurgeryPlus benefit; however, if imaging and/or lab work are required before or after your procedure through SurgeryPlus, you are required to obtain a referral from your Primary Care Physician for these services.

10. How does my primary care provider, specialty provider or health plan know about my decision to use the SurgeryPlus benefit?

If you would like your provider to be made aware of your decision to utilize your SurgeryPlus benefit, it is your responsibility to inform them. SurgeryPlus will transfer medical records to/from any provider you request, so long as you have signed a consent form for SurgeryPlus to release your records. Your health plan will also receive information directly from SurgeryPlus for any completed procedures.

11. Do I have to use SurgeryPlus for my planned surgery?

No. SurgeryPlus is a voluntary benefit.

12. What are the financial incentive amounts?

The financial incentive amount varies based on the type of procedure you receive.

TIER A \$4,000	TIER B \$2,000	TIER C \$1,000	TIER D \$500
Joint Replacement & Revision	Bariatric	Orthopedics	Gastroenterology (GI)
Spine	Cardiac	Ear, Nose, & Throat (ENT)	Pain Management
	Genitourinary (GYN)	General Surgery	Other Minor Procedures

13. Can the financial incentive be added to my salary?

No.

14. Are rewards considered taxable income?

If your reward reaches an amount required to receive a 1099 as applicable by law, you will receive a 1099 tax form from SurgeryPlus.

15. How long does it take to receive my financial incentive?

SurgeryPlus will transfer award amounts after all claims are received and the procedure is completed. This may be several months after your surgery. If you have questions about the status of your incentive, call a SurgeryPlus Care Advocate at 1-855-200-2034.

16. What happens if my dependent earns a financial incentive?

If your dependent is under 18, the custodial parent will receive the financial incentive and the 1099 form if necessary.

17. Does the SurgeryPlus Network include surgeons located in Delaware?

The SurgeryPlus network of providers and facilities are required to meet strict credentialing guidelines, resulting in many of the providers being located outside of the local area. However, considering your surgery may require travel, SurgeryPlus pays for the travel costs and waives any copay, deductible or coinsurance you would otherwise have to pay using your Aetna or Highmark Delaware health plan.

18. Why is a financial incentive offered?

SurgeryPlus negotiates a single cost (bundled rate) with your surgeon for the entire surgical procedure. The combination of the bundled rate and high quality surgeons results in a savings for the State of Delaware. These savings are passed on to members using the benefit in the form of a financial incentive.

19. How do I learn more about SurgeryPlus.

You can visit the [SBO website](#) or DE.SurgeryPlus.com. If you would like to speak to a Care Advocate, call 1-855-200-2034.