LANTERN

Microsoft

Frequently Asked Questions

Lantern helps you get high-quality surgery at lower out of pocket costs for you. Lantern is a voluntary benefit available to Premera Health Savings Plan members and covered dependents. Lantern is for surgeries you schedule in advance, not for emergency surgeries.

Who's eligible for the Lantern benefit?

Employees and dependents enrolled in the Premera Health Savings Plan (HSP) are eligible for Lantern services. To qualify, the Premera HSP must be your primary medical plan. Members enrolled in the Hawaii-only plan or those with the Premera HSP as secondary coverage are not eligible for this benefit.

What do I get with the Lantern benefit?

You'll have access to high-quality surgeons and coverage for your procedure, including surgeon, hospital, and anesthesia costs, along with personalized support from Lantern customer service throughout the process.

What type of procedures does Lantern support?

Lantern supports a wide range of planned (non-emergency) surgeries, but some surgery-related services like scans, imaging and physical therapy may not be included. Call Lantern at (855) 317-8684 to check if your surgery is covered. Services not covered by Lantern may be covered by your health insurance plan.

When are Lantern Care Team representatives available?

Lantern Care Advocates are available from 6 a.m. to 10 p.m. CST daily.

What's the difference between Lantern and my coverage under the Health Savings Plan for planned surgeries?

The Health Savings Plan covers many providers for planned surgeries, but Lantern can connect you with a select network of high-quality surgeons who meet the highest standards at a much lower cost to you.

Who will help me through this process?

Your benefit includes help from a Lantern Care Advocate who will:

- Explain how your benefits work.
- Answer any questions you may have.
- Help match you with a high-quality surgeon for your needs.
- Help you schedule appointments, request medical records and more.

How do I know if a surgery is covered?

Contact Lantern at (855) 317-8684 to confirm whether your surgical procedure is covered through Lantern.

If I already have a surgeon, how do I know if they are in the Lantern network?

Call (855) 317-8684 to talk with a Lantern Care Advocate. They can confirm if your surgeon is in network — and help you find another surgeon in the Lantern network if they're not.

What will my surgery cost?

Coinsurance may be waived for eligible surgical procedures coordinated through Lantern, but your Health Savings Plan deductible will still apply. Actual costs and coverage will vary based on your plan and individual situation. Contact your Lantern Care Advocate to help estimate the cost based on your personal situation.

What happens after my surgery?

A Lantern Care Advocate will follow up and ensure you received and continue to receive the highest quality care surrounding your surgery and schedule any post-procedure appointments.

What isn't covered by Lantern?

Testing, scans, imaging, durable medical equipment, and physical therapy expenses may not be included. However, coverage may be available through your medical plan.

**Lantern, an independent provider of non-emergent surgical care, does not provide Blue Cross Blue Shield products or services. Lantern is solely responsible for its products and services.*

Call Lantern to activate your benefit.

(855) 317-8684

In the event of a medical emergency, call 911 or visit your nearest emergency room.