PayPal Benefits 2023 Resource Guide

Find up-to-date transgender and non-binary health resources to support you and your family.
At PayPal, we’re committed to diversity, equity, inclusion, and support for our LGBTQ+ employees. We’re proud to offer benefits to support the unique health care needs of transgender and non-binary employees and their families.

Whether you’re considering surgery, you need follow-up care after surgery, or you’re looking to provide support to your child or other family member, this guide can be used as a starting point.

Contents

About this guide ............................................................................................................. 1
We’re here to help you throughout your journey ......................................................... 2
Accolade Health Assistants ......................................................................................... 3
Your health plan ........................................................................................................... 4
Let’s get specific ........................................................................................................... 6
  What’s covered ........................................................................................................... 7
  Finding network providers ....................................................................................... 7
  Prescriptions ............................................................................................................ 7
  Behavioral health support ....................................................................................... 8
  Family building benefits ......................................................................................... 9
Steps
  • Getting approvals ................................................................................................. 11
  • Requirements ....................................................................................................... 12
  • Referrals ................................................................................................................ 13
  • Submitting claims ................................................................................................. 14
FAQ ............................................................................................................................... 15
Important contact information ................................................................................... 16
Disclaimers
We’re here to help you throughout your journey

No matter where you are as you’re receiving care—from exploring your coverage options, considering surgery to recovering afterward—you have the Accolade Health Assistants and nurses to support you every step of the way.

Your Accolade Health Assistant and nurse are here to help with everything from providing information about benefits coverage to helping you make the right decisions about care for you and your family.

Call an Accolade Health Assistant to:

- Learn about all your benefits, like travel and lodging
- Get any referrals to help ensure mental and physical readiness for surgery
- Understand steps you may need to take
- Find the right providers for you and understand the importance of network providers
- Coordinate your care through Accolade
- Make sure you have an after-surgery care plan

Accolade Health Assistants are here for you: Call 1-866-406-1338 with questions
Accolade Health Assistants

Simplifying your health care experience starts here. You have access to an experienced team of health assistants dedicated to helping you. Accolade Health Assistants receive training to provide quality care to the LGBTQ+ community.

Have questions? Get help finding answers. It’s that simple.

Call an Accolade Health Assistant at 1-866-406-1338 Monday through Friday 5 a.m. to 8 p.m. PST.

Accolade gives you 24/7 access to your health plan details, tools, and resources—all in one spot. To get started, sign into member.accolade.com then click “Register.“

The Accolade® app gives you easy access to this information when you’re on the go. Secure messaging available. Available for Apple® and Android®. Text ACCD to 67793 to activate your account.

What to expect

Confidentiality
Your health information is kept confidential in accordance with the law.

Family support
Get support for all covered family members, including dependents.

How it works

Connect
Call to talk with a Health Assistant and connect with caring support for you and your family.

Answer
An Accolade Health Assistant will work with you to help find answers right away—from locating a specialist to explaining health savings accounts, and more.

Support
Get help finding answers to your health and benefits related questions.
Your health plan includes:

Medical benefits
Access information about your PayPal health plan provided by Meritain. Learn what's covered, what requires a pre-certification and more. Sign in to member.accolade.com.

Prescription benefits
View your medications at a glance, refill prescriptions, sign up for home delivery, and more. Sign in to caremark.com.

Behavioral health
Search for behavioral health providers and connect with helpful tools, tips, and more. Sign in to member.accolade.com.

Accolade Health Assistants are here for you: Call 1-866-406-1338 with questions
Find information on what’s covered by your health plan, steps you may need to take, and more.
Learn specifics of what services are covered.

Get help finding a network doctor or specialist to help reduce out-of-pocket costs.

Find out more about your pharmacy benefits through CVS Caremark®.

Learn about your options for help supporting your mental well-being.

Access additional resources to help you grow your family.

Get information about prior authorizations that may be required for certain services.

Find out more, such as who has to write referral(s), how many you need, plus information on how they should be written.

Learn about additional details on submitting claims.

### Questions?
Call an Accolade Health Assistant at 1-866-406-1338, 5 a.m. to 8 p.m. PST
What’s covered
Here are some examples of covered services. Please work with an Accolade Health Assistant to confirm your benefit options.

- Behavioral health services
- Breast/chest surgery*
- Gender affirmation surgery*
- Hair-related services, such as electrolysis* and laser hair removal
- Hormone therapy*
- Travel and lodging:* A combined overall maximum benefit of $10,000 per covered person applies for all travel and lodging expenses reimbursed under this plan in connection with pre-operation and post-operation/gender reassignment surgery specific to genital surgery during the entire period that person is covered under this plan. Must be using a designated facility more than 30 miles from your residence.

Finding network providers
We’re here to help you find the right doctor or specialist for you.

Call an Accolade Health Assistant at 1-866-406-1338. We can search for transgender and non-binary-affirming providers.

Prescriptions
Find out more about your pharmacy benefits. CVS Caremark is your pharmacy benefits manager.

Manage your pharmacy benefits.
2. Call CVS Caremark at 1-844-287-1297.
3. To manage your medications on the go, download the CVS Caremark app.

Fill your prescriptions.
1. Delivered to your door. Order up to a three-month supply of eligible medication you take regularly with home delivery.
2. Pick up at the pharmacy. Make sure you use a network pharmacy. You will need to show your health plan ID card.

Note:
These benefits are based on identifiable external sources, including the World Professional Association for Transgender Health (WPATH) standards and/or evidence-based professional society guidance.

A full list of covered services is available in the Meritain Health Summary Plan Description, which can be found on paypalbenefits.com.

*Requires pre-determination
Behavioral health support

PayPal supports you being your authentic self and offers a suite of benefits to support the whole you. For behavioral health support, go to member.accolade.com and search for behavioral health providers. You can also connect with helpful tools, tips, and other resources.

Employee Assistance Program (EAP)

Look to the EAP for help with everyday issues as well as life’s more serious challenges. Call to speak with a specialist who will listen to your needs and connect you to the appropriate resource, whether it’s a clinician, counselor, mediator, lawyer, or financial advisor. Your EAP offers assistance and support for situations like these and many more:

• Mental health support
• Addiction, substance use, and recovery
• Legal and financial services
• Family and relationships
• Grief support
• Child care and elder care
• Life transitions

As part of the EAP, you and your household members can get up to 10 face-to-face or online counseling visits (per issue, per person, per year) at no additional cost to you.

To learn more, visit liveandworkwell.com and use access code: PayPalUS, or call the EAP directly at 1-888-876-7830. Nebraska employees can also call Arbor Family Counseling at 1-800-922-7379, or visit arborfamilycounseling.com (access code: arbor).

Connect online through virtual visits

Simplify your behavioral health care with convenient, online counseling appointments through virtual visits. Virtual visits are available through the EAP and Accolade. Use your mobile device or computer to see and speak with a psychiatrist or therapist online.

Talkspace

Get online counseling from anywhere with Talkspace through your Optum EAP benefit. Safely and confidentially message a licensed therapist any time of the day from your phone or desktop device, and get a response back within hours. No appointment is required, and if you need more than messages, you can also schedule real-time video sessions.

To access care, call Optum EAP directly at 1-888-876-7830 for your authorization code.

About behavioral health services

• Confidential in accordance with the law
• Family support for all your dependents
• 24/7 access over-the-phone and online

If you are experiencing thoughts about harming yourself, suicide or if this is urgent and an emergency, call 911 or the National Suicide Prevention Hotline at 1-800-273-8255.

Calm

• Try Calm for mindfulness and relaxation techniques to help you improve sleep, lower stress, reduce anxiety, and sharpen focus.
• You and your family members have unlimited access to Calm, at no additional cost.

Your Calm benefits include:

• The Daily Calm with a new mindful theme every day
• More than 100 guided meditations
• Sleep Stories to help you drift into better sleep
• Music to help you relax and reduce stress
• Video lessons on mindful movement and gentle stretching

To get started, register on the Calm site then download the Calm app.

Accolade Health Assistants are here for you:

Call 1-866-406-1338 with questions
Family building benefits

Adoption and surrogacy assistance benefits
PayPal supports you in expanding your family, so you can worry less about finances and more on the joys of being a parent. Through Progyny, you can be reimbursed up to $25,000 per adoption or surrogacy. Eligible expenses include attorney’s fees, court costs, adoption or surrogacy agency and placement fees. To learn more, call Progyny at 1-833-838-5850 or visit the Progyny site (access code: PayPal).

Fertility benefits
In addition to adoption and surrogacy support, Progyny offers Smart Cycle, a complete set of fertility treatments. Coverage for each Smart Cycle includes the consultation, diagnostic testing, monitoring, and management of the fertility care, preimplantation genetic screening, intracytoplasmic sperm injections, and much more. There is a lifetime maximum of three Smart Cycles, but there is no benefit dollar limit. Progyny fertility benefits are available if enrolled in an Accolade plan. To learn more, call Progyny at 1-833-838-5850 or visit the Progyny site (access code: PayPal).

Visit paypalbenefits.com for information on all of the PayPal benefits available to you.
Gender dysphoria describes the distress that someone experiences when their gender identity doesn’t match their gender and sex assigned at birth. Find more information on the American Psychiatric Association website.

Learn what you need to know if you or a family member is considering gender affirmation surgery.
Getting approvals

This page covers the prior authorization process for determining if a service is covered by your plan.

Helpful hint: Your provider should call the Provider Services phone number on the back of your ID card to begin the approval process. If you have questions about the process call an Accolade Health Assistant.

1. Search
We can help you find the right providers for you and also understand the importance of using network providers.

2. Find
When you visit a network doctor for care, the physician may identify a service (for example, chest reconstruction) that requires prior authorization. If you have trouble, call Accolade.

3. Inquire
Your doctor should contact Accolade to ask about the proposed service.

4. Verify
Accolade reviews the request to verify the service is medically necessary* and performed at the appropriate place.

5. Inform
Accolade will inform you and your doctor about the approval decision. Together, you should review the determination letter and chart out a course of care.

6. Claim
Upon approval, doctor and member will be notified.

Helpful hint: Reach out to an Accolade Health Assistant if notification hasn’t occurred.

What if a service is not approved?
When a service is deemed NOT covered,* you can work with your provider on available options. You will then be responsible for covering costs out of your own pocket.

*Aligned with WPATH standards and/or recognized professional society guidance.
Requirements

You or your family member must meet all of the following requirements before surgery or hair-related services.

**Requirements (1–7) for gender affirmation surgery:**

1. Persistent, well-documented gender dysphoria
2. Capacity to make a fully informed decision and consent for treatment
3. Must be 18 years of age\(^1\)
4. If significant medical or mental health concerns are present, these must be reasonably well-controlled
5. Completed 12 months of successful, continuous, full-time, real-life experience in the desired gender
6. Completed continuous hormone therapy (for those without contraindications)\(^2\)
7. Treatment plan must align with current standards of care\(^{3,4}\)

**Note:** Pre-determination is required for all of these services.

\(^1\)This refers to chronological age, not biological age. Where approval or denial of benefits is based solely on the age of the individual, a case-by-case medical director review is necessary.

\(^2\)In consultation with the patient’s physician, this should be determined on a case-by-case basis through the Notification process.

\(^3\)This includes the World Professional Association for Transgender Health (WPATH) standards, and/or evidence-based professional society guidance.

\(^4\)Does not apply for Complementary and Reconstructive Procedures. Requirements (1-6) apply for other procedures associated with gender affirming care such as voice modification therapy or breast augmentation. Review the Meritain Health Summary Plan Document (SPD) on PayPalBenefits.com for eligible services.
Referrals

Surgical treatments for gender dysphoria can be initiated by a referral from a qualified mental health professional.*

The mental health professional provides documentation—in the chart and/or referral letter—of the patient’s personal and treatment history, progress, and eligibility.

One referral
This is required from a qualified mental health professional for breast/chest surgery, for example:
• Mastectomy
• Chest reconstruction
• Augmentation mammoplasty

Two referrals
These are required from qualified mental health professionals who have independently assessed the patient for genital surgery, for example:
• Orchiectomy
• Genital reconstructive surgeries
• Hysterectomy/salpingo-oophorectomy

Writing referrals
Recommended content of the referral letters for surgery:
1. The patient’s general identifying characteristics.
2. Results of the patient’s psychosocial assessment, including any diagnoses.
3. The duration of the mental health professional’s relationship with the patient, including the type of evaluation and therapy or counseling to date.
4. An explanation that the criteria for surgery have been met, and a brief description of the clinical rationale for supporting the patient’s request for surgery.
5. A statement about the fact that informed consent has been obtained from the patient.
6. A statement that the mental health professional is available for coordination of care and welcomes a phone call to establish this. For providers working within a multidisciplinary specialty team, a letter may not be necessary—rather, the assessment and recommendation can be documented in the patient’s chart.

*Mental health professionals who recommend surgery share the ethical and legal responsibility for that decision with the surgeon.
Submitting claims

Learn about when you may need to submit a claim

For network providers
They will submit claims for services you receive.

For out-of-network providers
Some out of network providers will submit claims for processing directly to the health plan. Some may not, and may request payment at the time of service.

If you need to submit claims for eligible care services, Accolade is here to help walk you through the steps to do so.

To receive payment for a claim, ensure your provider has secured medical necessity for the services you are submitting a claim for.

Two options to submit a claim for out-of-network providers
Call an Accolade Health Assistant at 1-866-406-1338. A Health Assistant can provide you with a claim form and walk you through the information needed to complete your claim. Forms MUST be completed and submitted to Meritain Health.

You can submit a form directly to Meritain Health:
- Go to member.accolade.com
- Select the link on the Meritain Healthcare Plan Benefits Tile to access the Meritain online portal
- Select Medical Claim, and then Medical Claim Form

*Mental health professionals who recommend surgery share the ethical and legal responsibility for that decision with the surgeon.

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FAQ

Why is it important to use network providers?

Network providers generally:

• Will bill the patient only for applicable deductible, copays, and/or coinsurance.
• Will only bill the patient after the claim processing has been processed.
• Submit claims on behalf of members directly to the plan.
• Work with the plan to gain the appropriate prior authorizations.
• Have passed Meritain’s accepted credential review and quality requirements.
• Will use network facilities, labs, and other providers.

Out-of-network providers generally:

• Bill patients for deductible, copays, and/or coinsurance in addition to the difference between their billed amount and the covered amount. This can add up to thousands of additional dollars out of pocket for the patient (called balance billing).
• May require full payment prior to the services being rendered.
• Will not submit claims directly to insurance companies, leaving the patient to obtain reimbursement.
• Have not passed Meritain’s accepted credential review and quality requirements.
• May use out-of-network facilities, labs or other providers.

Note: Facility-based providers, such as radiologists, anesthesiologists and assistant surgeons are often out-of-network, regardless of whether the primary surgeon is. If a balance bill is received from one of these providers and the service was received at a network facility with a network surgeon, please call an Accolade Health Assistant for assistance.

What if I choose to use an out-of-network provider?

If there are network providers within 30 miles of your home, but you choose to use an out-of-network provider, you may be responsible for costs not covered by the health plan.

What if a network provider is not available?

Contact an Accolade Health Assistant, who can provide direction for “Network Gap Exception” if a network provider is not available within 30 miles of the patient’s home.

A “Network Gap Exception” approval allows the plan to pay claims for approved services at the network level of benefits for providers located more than 30 miles away. It is at the provider’s discretion as to whether or not they will agree to a discounted rate, require payment upfront, or submit claims directly to the plan.

How do we avoid surprises?

• Stay in contact with an Accolade Health Assistant about upcoming services.
• Be aware that using out-of-network providers increases the risk of surprise bills later.

How can you find a network provider?

Behavioral health services — Call Accolade at 1-866-406-1338 or sign in to member.accolade.com, choose “Find Care” and search in the Mental Health directory.

What other resources are available from PayPal?

PayPal’s diverse workforce includes people of many different backgrounds. Pride — an employee resource group — promotes the well-being of LGBTQ+ employees and allies and raises awareness of and encourages sensitivity to the challenges the LGBTQ+ community faces. To learn more, visit the Bridge.

To view all the benefits and resources available to you and your family, visit paypalbenefits.com.

Accolade Health Assistants are here for you: Call 1-866-406-1338 with questions
## Important contact information

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Phone Number</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adoption and Surrogacy Assistance Benefits</td>
<td>1-833-838-5850</td>
<td><a href="http://progyn.com">progyn.com</a></td>
</tr>
<tr>
<td>Calm</td>
<td></td>
<td><a href="http://calm.com/b2b/PayPal/subscribe">calm.com/b2b/PayPal/subscribe</a></td>
</tr>
<tr>
<td>CVS Caremark pharmacy benefits</td>
<td>1-844-287-1297</td>
<td><a href="http://caremark.com">caremark.com</a></td>
</tr>
<tr>
<td>Employee Assistance Program (EAP) Nebraska Employee’s EAP</td>
<td>1-888-876-7830, 1-800-922-7379</td>
<td><a href="http://liveandworkwell.com">liveandworkwell.com</a> (access code: PayPalUS), <a href="http://arborfamilycounseling.com">arborfamilycounseling.com</a> (access code: Arbor)</td>
</tr>
<tr>
<td>Fertility benefits</td>
<td>1-833-838-5850</td>
<td><a href="http://progyn.com">progyn.com</a></td>
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<tr>
<td>PayPal benefits site</td>
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<td><a href="http://paypalbenefits.com">paypalbenefits.com</a></td>
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<td>Talkspace</td>
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<td><a href="http://talkspace.com/connect">talkspace.com/connect</a></td>
</tr>
<tr>
<td>Accolade: Health Care and Benefits Navigation</td>
<td>1-866-406-1338</td>
<td><a href="http://member.accolade.com">member.accolade.com</a></td>
</tr>
<tr>
<td>Accolade Care: Virtual Primary and Mental Health Care</td>
<td>1-866-406-1338</td>
<td><a href="http://member.accolade.com">member.accolade.com</a></td>
</tr>
<tr>
<td>2ndMD – Expert Medical Opinion Service</td>
<td>1-866-537-1324</td>
<td><a href="http://member.accolade.com">member.accolade.com</a></td>
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</tbody>
</table>
This summary highlights commonly used services and generally indicates how you and a medical plan will cover medical expenses you and/or your enrolled dependents incur. Benefits are provided for covered services that are medically necessary* unless otherwise indicated. Some services are subject to annual or lifetime limits. This guide does not reflect all covered services, plan exclusions, limitations, or restrictions. It is not a contract or guarantee of coverage. A full list of covered services is available in the Summary Plan Description, which can be found on paypalbenefits.com.

This guide, and the benefits it describes, were developed with guidance from evidence-based professional societies, including the World Professional Association for Transgender Health (WPATH) Standards of Care refer to wpath.org for the current standards of care publication.

*Aligned with WPATH standards and/or recognized professional society guidance.