Preventive Care Management Program

FAQs

teg wellness

General Program Questions

1. What is the Preventive Care Management Program?
The PCMP is a supplemental health and wellness program designed to provide employees with access to preventive care services such as telehealth, mental health support, prescription discounts, an FSA card for eligible expenses, and more — at no out-of-pocket cost to you.

2. Why am I enrolled in this program?
You've been enrolled by your employer as part of a company-wide wellness initiative to enhance your healthcare access while also providing tax savings for you and the company.

3. Do I have to pay for this program?
No. There is no out-of-pocket cost to you. The program is funded through a combination of a pre-tax payroll deduction and a post-tax reimbursement — your net pay does not change.

4. What benefits am I receiving?

- A tax-free FSA card for wellness purchases
- Telemedicine with $0 copays
- Prescription drug coverage
- Women's health services
- Mental health support & EAP
- Wellness coaching & fitness resources
- Preventive screenings and more

5. How is this different from my health insurance?
This is not health insurance. It's a supplemental wellness program that works alongside your existing insurance to give you easier access to care and wellness tools, with no copays, bills, or deductibles.

6. Can I opt out of the program?
Yes, but we strongly recommend taking advantage of the benefits. If you still wish to opt out, please provide your full name, email, and employer name to info@tegwellness.com. A support team member will ensure you're removed.

Dependent & Family Questions

1. Can I add my spouse or child to the program?
Yes, as long as they meet eligibility criteria. You can do this through the member portal for the Prescription Drug Coverage and Telemedicine.

2. How do I confirm if my dependent is eligible?
Eligible dependents typically include your spouse and any children under 26. Some plans may require you to certify eligibility under penalty of perjury.

Opting Out & Support

1. I would like to understand the program more before opting out—who can I talk to?
We're happy to help! Contact us at (484) 835-3633 or info@tegwellness.com.

2. If I opt out, will I lose anything else?
Yes, you'll lose access to all benefits offered through the program — including telehealth, the FSA card, prescriptions, EAP and more!

3. How do I contact support for more help?

- Phone: (484) 835-3633
- Email: info@tegwellness.com
- App Support: support@teghealth.com

Payroll & Tax Questions

1. Why do I see new deductions and reimbursements on my paycheck?
You'll see three line items related to the program on your pay stub:

- PCMP125 – A pre-tax deduction that lowers your taxable income, creating tax savings.
- PCMPREI – A post-tax reimbursement that offsets the above deduction.
- PCMPSAV – This appears as a deduction, but it actually represents the difference in tax savings generated during that payroll run.

The PCMPSAV amount is not taken from your net pay. Instead, it's a portion of your tax savings that is being redirected to fund your comprehensive benefit package.

2. Will this change my take-home pay?
No. There is no change to your net take-home pay.

3. How does this affect my tax return at the end of the year?
You may receive a slightly smaller tax refund, but that's because you paid less in taxes throughout the year. You're not losing money — you just overpaid less.

4. What is a Section 125 Plan and how does it benefit me?
A Section 125 Plan allows certain benefits to be paid with pre-tax dollars. That means less taxable income for you — resulting in lower federal income tax and FICA taxes.

5. Why does my W-2 look different now?
Your W-2 reflects a lower taxable wage, thanks to the pre-tax deduction. This is expected and entirely compliant with IRS regulations.

Using the Program

1. How do I log into the TEG Health app or member portal?
Look for your welcome email and follow the instructions to register. If you can't find it, check your spam folder or contact info@tegwellness.com. In the app, you will find tiles in the Benefits section with all of your benefits and how to access them.

2. Where do I find my prescription drug benefits?
In the TEG Health app, click on the Benefits page and then select the Prescription Drug tile to access and activate your pharmacy benefits.

3. How do I book a telehealth appointment?
Call the telehealth line or access the telemedicine section in your app. You'll be connected with a licensed provider 24/7.

4. What do I do if I'm having trouble logging in or activating my account?
Contact our support team at (484) 835-3633 or info@tegwellness.com for help with account setup, password resets, or troubleshooting.

FSA Card / Benefits Access

1. How do I access my FSA card?
Your FSA card is mailed to your home address. You can register and activate it through the TEG Health app or your member portal.

2. What can I use the FSA card for?
Eligible health and wellness items including:

- Over-the-counter medications
- Feminine care
- Vision products
- First aid supplies
- Fitness gear
- Mental health tools and more

3. When will I receive my FSA card in the mail?
It typically arrives within 3-4 weeks of your enrollment. If not, contact (855) 374-6431.

4. Can I add dependents to my benefits?
Yes, you can add eligible dependents for the telemedicine and prescription drug coverage.

5. Can I use my FSA card at CVS and Walgreens?
Yes, most major retailers and pharmacies accept the card. Just be sure the items are 213(d)-eligible healthcare expenses.