

Medical Ally, for your healthcare journey

FAQS

Overview

Who is my Medical Ally? A Medical Ally is part of your benefit package and available to you and your eligible dependents at no cost. We help you make more informed medical decisions and get better care. Your Medical Ally provides personalized information and one-on-one support to help you:

- Understand any medical diagnosis and learn about all available treatment options
- Understand the risks and benefits of surgery
- Get a second opinion
- Manage the day-to-day stress of a condition
- Ask your doctor the right questions

Who delivers this service? A Medical Ally is a clinical division of Alight that is a medical research and information company staffed by highly experienced, independent doctors, nurses, and researchers. Our physicians are affiliated with top medical schools.

Are you affiliated with a medical insurance company? No, we are an independent company and not affiliated with any insurance company.

Eligibility and cost

Who is eligible for this service? A Medical Ally is available to available to Cigna medical plan participants and their dependents.

Do I have to be enrolled in the Stanley Black & Decker medical plan to access a Medical Ally?

Yes, you need to be enrolled in the Stanley Black & Decker medical plan.

Do I have to pay for access to a Medical Ally? No, Stanley Black & Decker covers the cost of the service.

Programs and Services


What medical conditions can a Medical Ally help with? A Medical Ally can help you with any medical or behavioral health diagnosis, general health and wellness topics, and disease prevention guidance. Cancer, diabetes, heart disease, back pain, arthritis, and depression are just a few examples of conditions we can help you navigate.

Will a Medical Ally recommend specific treatment options? No, a Medical Ally will not recommend any particular treatments. Rather, you will receive published information from trusted sources and customized questions to ask your doctor to enable you to make more informed medical decisions.

Can a Medical Ally help with second opinions? Yes, a Medical Ally can support you in seeking a second opinion by identifying the most qualified doctors and hospitals in your area and insurance network, verifying a doctor's skills and experience treating your specific condition, and checking the credentials of your current doctor. A Medical Ally can also arrange for virtual second opinion consultations with top specialists across the country.

How can a Medical Ally help me if I need surgery? A Medical Ally can help you better understand your diagnosis, the risks, and benefits of all treatment options, how to prepare for surgery, and what to expect during recovery and beyond. If your doctor has recommended elective lower back surgery, hip replacement, knee replacement, hysterectomy, or weight loss surgery, a Medical Ally can help you decide whether the recommended surgery is your best option through the Surgery Decision Support® program. To encourage you to be well-informed about these elective procedures, you may even be eligible for a \$400 prepaid card for participating in this program.

Emergency procedures do not qualify for the incentive, and other restrictions may apply. You must start the program at least 30 days before a planned surgery, work with a Medical Ally, and



complete a short survey at the end to qualify for the prepaid card. You will receive your prepaid card in the mail two to four weeks after they have completed the survey. The prepaid card may be taxable for federal, state, and local purposes. You are responsible for any taxes owed as a result of receipt of the prepaid card and should consult an attorney or tax advisor regarding your specific situation.

Who is required to participate in Surgery Decision Support? Employees enrolled in the medical plan and covered dependents are required to complete the Surgery Decision Support program if they have been recommended for lower back surgery, hip replacement, knee replacement, hysterectomy, or weight loss surgery. Those who do not participate in the program before undergoing one of these elective procedures will be subject to a \$400 penalty at the time the surgery claim(s) is processed. If the program is not completed at least 30 days prior to the scheduled surgery, the amount otherwise payable by the medical plan will be reduced by \$400 and this amount will not count toward satisfying the deductible or out-of-pocket maximum. The penalty will not apply if any of these surgeries are performed on an emergency basis.

Why will my surgery cost more if I do not participate in Surgery Decision Support? There are often effective treatment alternatives to surgery, and employees enrolled in the medical plan and covered dependents are encouraged to understand all their options and maximize the benefits provided before moving ahead with surgery. While there is a \$400 penalty for not participating, you still have full control over your medical care and decisions. The requirement is intended to reinforce the importance of making informed medical decisions.

How do I complete Surgery Decision Support and avoid paying the additional \$400? To avoid the penalty, you must complete these steps:

1. Enroll in Surgery Decision Support by calling 888-361-3944 at least 30 calendar days before the date of a scheduled surgery.
2. Work with a Medical Ally to get information about their diagnosis, treatment options, questions to ask their doctor, or anything else relevant to the recommended surgery. This will include an initial phone call and at least one additional follow-up call with the Medical Ally.
3. Complete a survey at the end of the program.

If you decide to have the surgical procedure within 12 months of completing the program, the penalty will not apply



Accessing a Medical Ally

What happens when I call and speak with a Medical Ally? A representative will greet you and request your name, address, employer, and details about the medical condition for which you are requesting support. They will also set up an account to allow you to access information in our secure participant portal.

After the initial information is collected, a team will be assigned to work with you and will begin compiling personalized information immediately. A dedicated, registered nurse will serve as your primary point of contact and provide support with help from a physician and medical researcher. For complex cases, a conference call may be scheduled with the physician and researcher at a time that is convenient for you.

Can I call more than once? Absolutely. You are encouraged to contact your Medical Ally as many times as you would like for additional support, or if your health situation changes and you need new information.

How can I learn more and enroll? You can call 888-361-3944 (toll-free) or visit mymedicalally.alight.com. New registrants will need to create a username and password & enter “SBD” as the company code.

When is a Medical Ally available? Representatives are available by phone Monday through Friday, 8 a.m. to 8 p.m. CT. After hours, a voicemail may be recorded. Messages will be returned within three hours on the next business day (unless the caller specifies a callback time). You may also visit mymedicalally.alight.com for instant access to information on a variety of common health topics.