State Health Plan

Webinar

Lantern Surgical Benefit

North Carolina State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer

LANTERN

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Meet Lantern, Your Guide to Excellent Surgery Care

2025

Agenda

- What is Lantern
- The Lantern Difference
- What’s Covered?
- Lighting Your Path to the Best Surgical Care

What Is Lantern?

Lantern is included as one of your medical benefits through the State Health Plan. Lantern can match you with the best surgeon for planned, non-emergency procedures. Depending on your plan, you could save on your care, too.

Fast Facts

Give Lantern a call at
(833) 916-3826

Who Is Eligible?

Members and covered dependents enrolled in the Plan. Medicare primary and HDHP members are **not** eligible for Lantern.

Do I Have to Enroll?

No. If you're enrolled in the Plan, you are automatically enrolled in Lantern.

Do I Have to Pay a Premium?

The Plan covers the cost of the benefit. There is no charge to you for this benefit.

Do I Have to Use a Lantern Surgeon?

No, but if you use a non-Lantern surgeon, you will have a responsibility to pay the cost-share associated with your plan. To take advantage of the Lantern benefits outlined today, you will need to choose a surgeon in Lantern's Network of Excellence™.

The Lantern Difference

With Lantern, you have a guide to help with the details, so you can focus on what really matters—your health.

Network of Excellence™

Lantern's network only includes excellent surgeons who are individually vetted for the level of care they provide.

Meaningful Savings

The average Lantern member can save between $2,000 and $4,000 on their surgery*.

*Actual savings can vary based on your Plan's coverage, your medical plan, and the procedure you need. Call Lantern to learn about your specific plan.

Concierge Support

Your Lantern Care Advocate is ready to answer your questions and help match you with the best surgeon for you.

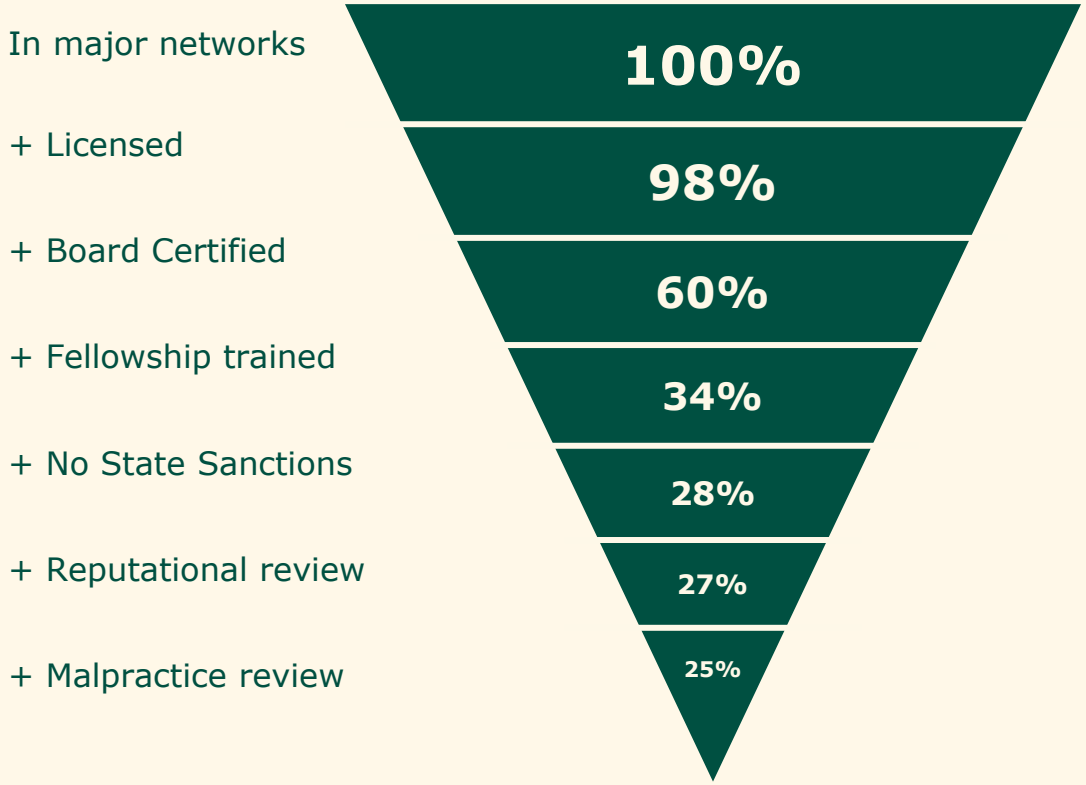
Network of Excellence™

Lantern's Network of Excellence™

Our team looks at everything when we choose our partners. Lantern's network only includes excellent surgeons and facilities.

The result:
Our complication rates are less than 1%, much lower than the industry standard.

Case Study: Impact of Surgeon-Specific Credentialing of In-Network Orthopedic Surgeons

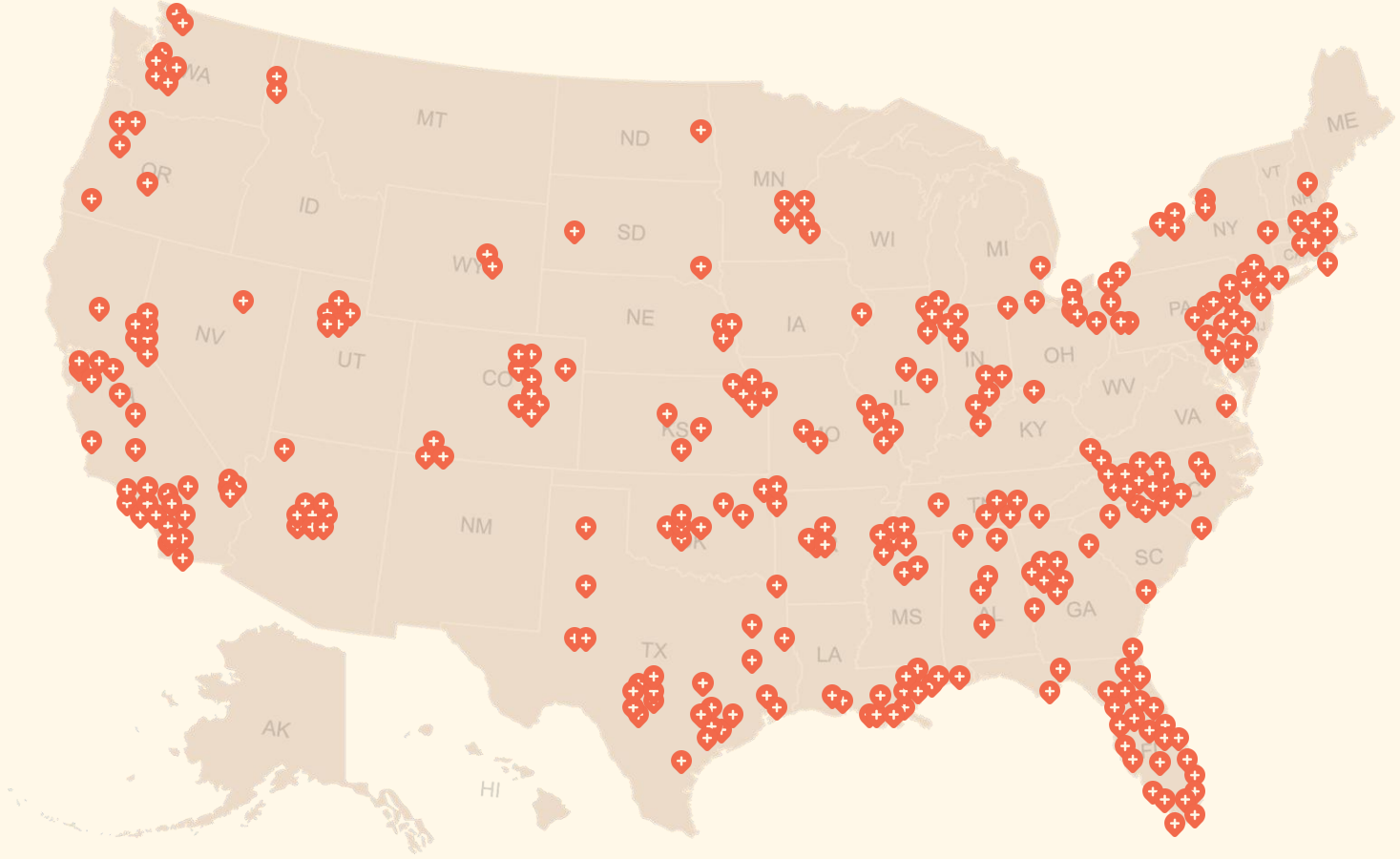


Traditional insurance carriers **DO NOT** require physicians to meet this list of criteria.

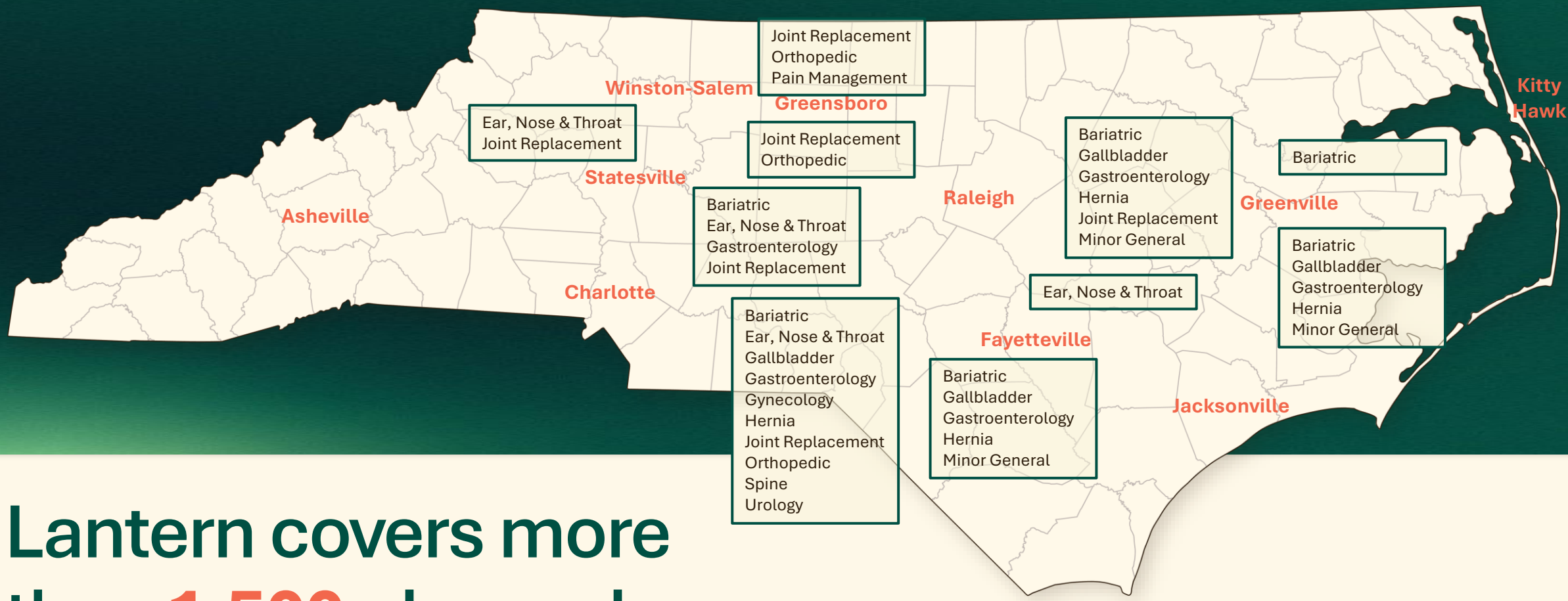
Nationwide Network of Over 725 Facilities and 3,000 Surgeons

Our network is built by design to be a narrow network, with provider quality and surgical outcomes as the top priority.

A carrier network is intended to have broad access, offering numerous options to members regardless of where they live but isn't focused on quality/cost. The Lantern network is more focused on quality and cost, while still creating access within most major cities in the U.S.



LANTERN



Lantern covers more than 1,500 planned, non-emergency surgeries.

Members need to call Lantern at 833-916-3826 to determine if a surgery is covered.

LANTERN

Travel Program Details

Most Lantern members can find the best care close to home. But if you do need to travel, your benefit covers your travel costs to ensure that you have access to the best providers.

Mileage (car)

Miles Traveled	0 – 99	100 – 199	200+
Allowance	**$25**	**$50**	**$100**

Hotel (100+ miles)

Hotels must be 3 stars or higher and are booked by your Care Advocate in advance of your trip

Per Diem

$35 per person per day is provided to member and one companion to cover meals and travel-related expenses

Airfare (200+ miles)

Lantern will book economy flights, if appropriate, for the member and a companion

Meaningful Savings

Cost Savings

Coverage	Standard PPO (formally 70/30)	Plus PPO (formally 80/20)	Lantern
Deductible	Indv: $ 1,500 Fam: $ 4,500	Indv: $ 1,250 Fam: $ 3,750	$0
Coinsurance	30%	20%	0%
Total	Up to the out-of-pocket maximum: $ 5,900 – $ 16,300	Up to the out-of-pocket maximum: $ 4,890 – $ 14,670	There is zero cost for your Procedure when you utilize a Lantern provider.

What's Covered?

Covered Costs With Lantern

*There are some pre- and post-procedure costs that Lantern does **NOT** cover, such as:

- Physical therapy
- Home health
- Advanced imaging/diagnostics
- Durable medical equipment

- Pre-surgery consultation with doctor*

Admission to facility for surgery

- Surgeon
- Hospital/Surgery Center
- Anesthesia
- Every other component of surgery from the moment you were admitted to the facility to the time of discharge.

Discharge from facility

- Post-procedure visits*

Commonly Covered Procedures

Lantern covers more than 1,500 different procedure types. If you need a procedure that you do not see below, Call a Care Advocate to confirm if your procedure is covered.

Joint Replacement and Revision

- Ankle
- Knee
- Elbow
- Shoulder
- Hip
- Wrist

Spine

- Artificial Disk Replacement
- Cervical Disk Fusion
- Laminectomy
- Laminotomy
- Lumbar Interbody Fusion
- 360 Spinal Fusion

Orthopedic

- Arthroscopy (Knee/Shoulder)
- Bunionectomy
- Carpal Tunnel Release
- Ligament Repair
- Rotator Cuff Repair

Cardiac

- Cardiac Ablation
- Defibrillator Implant
- Pacemaker Implant
- Pacemaker Replacement
- Valve Surgery

Bariatric*

- Gastric Bypass
- Sleeve Gastrectomy
- Lap Band / Lap Sleeve

Gynecological

- Hysteroscopy
- Hysterectomy
- Myomectomy
- Ovary Removal

General Surgery

- Hernia Repair
- Gall Bladder/ Laparoscopic Cholecystectomy
- Thyroid
- Excision of Mass

Interventional Spine/Pain

- Cervical Epidural
- Lumbar Epidural Steroid
- Stellate Ganglion Block
- Epidural Blood Patch

Gastroenterology (GI)

- Upper GI Endoscopy

Ear, Nose, Throat (ENT)

- Ear Tube Insertion
- Ear Infection
- Septoplasty
- Sinuplasty

*Effective 1/1/2026, bariatric procedures are required to go through Lantern's Network of Excellence™.

Lighting Your Path to the Best Surgical Care

Care and Support When You Need It Most

Your Lantern benefit includes support from your Care Advocate. They will help you understand your benefit, find the right care and make sure you feel informed at every stage of the journey.

Lantern Care Advocates can:

- Answer questions about your benefit
- Explain what surgeries and costs are covered
- Help match you with the best surgeon for your care
- Coordinate any consults and appointments with your Lantern surgeon
- Support your needs throughout your surgical journey

The Lantern Member Journey

STEP 1: ONE CALL DOES IT ALL

If you think you need surgery, call Lantern at **(833) 916-3826**, and a Care Advocate will help begin the process.

STEP 2: CONCIERGE SUPPORT

Your dedicated team of Care Advocates will provide personalized support and coordinate everything, including travel if needed.

STEP 3: MATCHING WITH A SURGEON

Your Care Advocate will handpick surgeons for you to evaluate and choose from.

STEP 4: POST-SURGERY CARE

As you recover, your Care Advocate will ensure all your needs have been met.

When should I call?

- You believe surgery may be necessary
- You have been advised to have surgery
- You have surgery planned

You deserve excellent care.

Call us at **(833) 916-3826**

www.shpnc.gov

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