ADVANTAGE MV PLAN

Beni SOLUTIONS | POWERED BY SBMA

General Information	Coverage Information	
Annual Deductible	$1,500 Individual / $3,000 Family	
Out-of-Pocket Maximum[1]	$9,100 Individual / $18,200 Family	
Unlimited Telehealth through Recuro Health	$0 Copay	
Physician & Diagnostic Benefits (Non-Hospital Based)	**In-Network**	**Out-of-Network**
Preventive / Wellness	Covered at 100%	40% Coinsurance (after the Ded.)
Primary Care / Specialist Visits	$15 Copay	40% Coinsurance (after the Ded.)
Urgent Care	$50 Copay	40% Coinsurance (after the Ded.)
Laboratory Services / Radiology (X-ray, Ultrasound)	$50 Copay	40% Coinsurance (after the Ded.)
Advanced Imaging[RBP] (MRI, CT/PET scan)[2] (limit 1 per year)	$350 Copay	
Radiology / Advanced Imaging[2] (Medmo)[3] (subject to above limits)	Covered at 100%	
Hospital Benefits (All Subject to Reference-Based Pricing)[4]	**Coverage Information**	
Outpatient Surgery[2] (limit 1 per year)	$250 Copay (after the Ded)	
Inpatient Hospitalization & Surgery[2] (limit 5 days & 2 surgeries per year)	$500 Copay per admission (after the Ded.)	
Emergency Services (limit 1 per year)	$500 Copay	
Additional Benefits	**In-Network**	**Out-of-Network**
Ambulance[RBP] (Ground Only) (limit 1 per year)	$500 Copay	
Physical / Speech / Occupational Therapy (limit 8 combined per year)	$50 Copay	40% Coinsurance (after the Ded.)
Chiropractic Services (limit 10 per year)	$50 Copay	40% Coinsurance (after the Ded.)
Home Health Care (limit 10 per year)	$50 Copay	40% Coinsurance (after the Ded.)
Outpatient Substance Abuse Treatment[RBP] (limit 8 per year)	$75 Copay	
Inpatient Substance Abuse Treatment[RBP] (limit 5 per year)	$750 Copay per day (after the Ded.)	
Chemotherapy / Radiation Therapy / Dialysis	Not Covered	
Maternity Benefits (Subject to Reference-Based Pricing)[4]	**Coverage Information**	
Professional Services[2]	$350 Copay (after the Ded.)	
Inpatient Facility[2]	$1,500 Copay per admission (after the Ded.)	
Prescription Drug Benefits[5]	**Coverage Information**	
Generic (Tier 1)	$10 Copay	
Higher Tier Generics / Preferred / Non-Preferred Brand & Specialty	Discount Only	

[1]The out-of-pocket maximum refers to covered services only. Specific services are subject to Reference-Based Pricing (RBP) and patients may be billed beyond the out-of-pocket maximum for these services.
[2]Specific services, including advanced imaging, surgical procedures and maternity require precertification. Failure to obtain precertification will result in a denial of benefits.
[3]Medmo is a concierge scheduling service for radiology and imaging allowing members to maximize their benefits while minimizing costs to the patient.
[4]RBP reimburses providers using a percentage of Medicare coverage as the reference point for the reimbursement total. This plan pays up to 125% of the Medicare allowable coverage for applicable services. Patients will be responsible for paying any remaining balance beyond the provider reimbursement amount.
[5]Prescription drug benefits are subject to the formulary drug list. Copay amounts listed are based on a unit quantity of 30 for a 30-day supply. Pricing may vary based on quantity and supply.

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Notable Plan Exclusions
Abortion
Care related to or for the purpose of travel outside of the United States
Chemotherapy / Radiation Therapy
Cosmetic Surgery including cosmetic components of gender transition
Dialysis
Durable Medical Equipment / Prosthetics / Orthotics
Experimental / Investigational Treatments
Hospice Care
Infertility Services / Family Planning
Mouth, Jaws, and Teeth (Oral Surgery procedures, medical in nature)
Nutritional Supplements / Vitamins (except as specified under preventive care)
Non-Tier 1 Generic / Preferred Brand / Non-Preferred Brand / Specialty / Self-Injectable / GLP-1 Prescription Drugs
Skilled / Private Duty Nursing Care
Transplant Services

This form is a benefit highlight representing a brief description of the coverage available. Additional covered services, exclusions and limitations exist. Please refer to the plan administrator for additional plan information.

HealthWallet

The HealthWallet mobile app puts your coverage in the palm of your hands

- Scan the QR code to the right, or search "The HealthWallet" in your app store
- Download the HealthWallet mobile app
- Login in with your social security number and date of birth
- Access your ID card(s), benefit information, and ancillary vender services

SCAN HERE

Locating a participating provider in the PHCS network all begins with the specific network logo on the front of your medical ID card. Please locate the PHCS logo on your card and follow the instructions below.

PHCS Practitioner & Ancillary Only

By phone: call **1.800.454.5231**
Online: visit www.multiplan.com/sbmapa and follow the steps below

1. Read the acknowledgment on the bottom of the screen and click OK
2. Enter a provider name, specialty, or facility type in the search box or choose one from the drop down
3. Enter your city/county and click on the magnifying glass icon to search
4. Read the statement at the bottom of the screen and click OK to view the results

RECURO HEALTH

Recuro Health's Virtual Urgent Care and Virtual Behavioral Health provide members with:

- 24/7 access to board-certified doctors for treatment of urgent medical concerns
- No-cost virtual access to a Psychiatrist or Licensed Counselor whenever and wherever they need it

Access care via the HealthWallet mobile app (scan the QR code above) or call 1-855-6RECURO

PureRx

Present your medical card with your prescription to any of our 60,000+ retail pharmacies to fill your prescription. Additional information will be provided on your medical ID card.