

General Information	Coverage Information	
Annual Deductible	\$0	
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
Primary Care / Specialist Visits	\$15 Copay	40% Coinsurance
Urgent Care	\$50 Copay	40% Coinsurance
Laboratory Services / Radiology (X-ray, Ultrasound)	\$50 Copay	40% Coinsurance
Advanced Imaging ^{RBP} (MRI, CT/PET scan) ² (limit 2 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)	\$350 Copay	
Inpatient Hospitalization & Surgery ² (limit 7 days & 3 surgeries per year)	\$500 Copay per admission	
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 12 combined per year)	\$50 Copay	40% Coinsurance
Chiropractic Services (limit 10 per year)	\$50 Copay	40% Coinsurance
Home Health Care (limit 10 per year)	\$50 Copay	40% Coinsurance
Outpatient Substance Abuse Treatment ^{RBP} (limit 8 per year)	\$75 Copay	
Inpatient Substance Abuse Treatment ^{RBP} (limit 5 per year)	\$750 Copay per day	
Chemotherapy / Radiation Therapy / Dialysis	Not Covered	
Maternity Benefits (Subject to Reference-Based Pricing) ⁴	Coverage Information	
Professional Services ²	\$350 Copay	
Inpatient Facility ²	\$500 Copay per admission	
Prescription Drug Benefits ⁵	Coverage Information	
Generic (Tier 1)	\$10 Copay	
Higher Tier Generics / Preferred / Non-Preferred Brand & Specialty	Discount Only	

¹The 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.

²Specific services, including advanced imaging, surgical procedures and maternity require precertification. Failure to obtain precertification will result in a denial of benefits.

³Medmo is a concierge scheduling service for radiology and imaging allowing members to maximize their benefits while minimizing costs to the patient.

⁴RBP 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.

⁵Prescription 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.

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)
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.



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.



By phone: call **1.800.454.5231**
Online: visit www.multiplan.com/sbmapi
 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'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



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.