



# Enrollment Kit

Prepared For: Deployed Services  
Effective Date: 1.1.25





# Medical Plan Options

# Base MV

	Base MV	
Deductible (Shared In/Out Network)	\$0	
Out of Pocket Max (Ind/Fam)	\$8,700/\$17,400	N/A
Medical Benefits	In Network	Out of Network
Wellness and Preventive	Covered at 100%	Covered at 100%
Primary Care Visits	\$25 Copay   8 per year	\$25 Copay   8 per year
Specialist Visits	\$50 Copay   8 per year	\$50 Copay   8 per year
Urgent Care Visits	\$50 Copay   2 per year	\$50 Copay   2 per year
Lab Services & Radiology	\$50 Copay   3 per year	\$50 Copay   3 per year
CT/MRI/MRA/PET Scans	\$350 Copay   1 per year <sup>RBP</sup>	
MEDMO Radiology	Covered 100%	
Telemedicine	\$0 Copay   Unlimited	
Rx Benefits <a href="#">Formulary</a>		
Generic Rx	\$10 Copay	
Preferred Brand/Non-Preferred Rx	Discount Only	
Hospital Services		
Inpatient Hospitalization & Surgery	\$350 Copay   5 days & 2 Surgeries per year	
Outpatient Hospitalization & Surgery	\$350 Copay   1 per year <sup>RBP</sup>	
Emergency Room Services	\$500 Copay   1 per year	
Other Services		
Chiropractic Services	\$50 Copay   10 per year	\$50 Copay   10 per year
Home Health Care	\$25 Copay   10 per year	Not Covered
Treatment for Chemical Abuse (Inpatient/Outpatient)	\$250 Copay   5 days a year / \$25 Copay   8 per year <sup>RBP</sup>	
Emergency Medical Ground Transportation	\$250 Copay   1 per year <sup>RBP</sup>	
Chemotherapy, Radiation & Dialysis	Not Covered	Not Covered
Pregnancy Services		
Professional Services	Not Covered	
Maternity/Childbirth/Delivery	Not Covered	
Summary of Benefits & Coverage	<a href="#">SBC</a>	

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.

This plan is a Qualified Health Plan that meets the standards of Actuarial Value under the Affordable Care Act (ACA).

# Traditional \$2,500

## ACA COMPLIANT | MINIMUM VALUE PLANS

Medical Benefits <i>Services cannot be performed at a hospital</i>	In Network	Out of Network
Deductible (Shared In/Out Network)	\$2,500/\$5,000	
Out of Pocket Maximum (Ind/Fam)	\$9,100/\$18,200	N/A
Wellness and Preventive	Covered at 100%	Ded. then 40% Coinsurance
Primary Care Visits	\$15 Copay	Ded. then 40% Coinsurance
Specialist Visits	\$15 Copay	Ded. then 40% Coinsurance
Urgent Care Visits	\$50 Copay	Ded. then 40% Coinsurance
Laboratory Services & Radiology	\$50 Copay	Ded. then 40% Coinsurance
CT/MRI/MRA/PET Scans	\$350 Copay	Ded. then 40% Coinsurance
Medmo Radiology	Covered at 100%	Not Covered
Telemedicine	\$0 Copay   Unlimited	Not Covered
Rx Benefits		
Generic Rx	\$10 Generic	Not Covered
Preferred Brand/Non-Preferred Rx	Tier 2: \$50 Copayment Tier 3: \$75 Copayment	Not Covered
Hospital Services		
Inpatient Hospitalization & Surgery	Ded. then 30% Coinsurance	
Outpatient Hospitalization & Surgery	Ded. then 30% Coinsurance	
Emergency Room Services <sup>RBP</sup>	\$500 Copayment	
Other Services <i>Services cannot be performed at a hospital</i>		
Chiropractic Services	\$50 Copay   20 per year	Ded. then 40% Coinsurance
Second Surgical Opinion	\$0 Copay	Ded. then 40% Coinsurance
Home Health Care	\$50 Copay   20 per year	Ded. then 40% Coinsurance
Treatment for Chemical Abuse (Inpatient/Outpatient)	Ded. then 30% Coinsurance   20 days a year/ \$75 Copay   25 days a year	
Emergency Medical Transportation	\$500 Copay	Ded. then 40% Coinsurance
Chemotherapy/Radiation/Dialysis	\$350 Copayment (outpatient)/ded. then 30% Coinsurance	Ded. then 40% Coinsurance
Physical/Speech/Occupational/ABA Therapy	\$50 Copay <i>(12 visits per year combined)</i>	Ded. then 40% Coinsurance
Pregnancy Services		
Professional Services <sup>RBP</sup>	\$350 Copayment	
Maternity/Childbirth/Delivery <sup>RBP</sup>	\$500 Copayment per admission	



# Wellness & Preventive Services

## Preventive benefits for adults

- Abdominal Aortic Aneurysm one-time screening for men of specified ages who have ever smoked
- Alcohol Misuse screening and counseling
- Aspirin use to prevent cardiovascular disease and colorectal cancer for adults 50 to 59 years with a high cardiovascular risk
- Blood Pressure screening
- Cholesterol screening for adults of certain ages or at higher risk
- Colorectal Cancer screening for adults 45 to 75
- Depression screening
- Diabetes (Type 2) screening for adults 40 to 70 years who are overweight or obese
- Diet counseling for adults at higher risk for chronic disease
- Falls prevention (with exercise or physical therapy and vitamin D use) for adults 65 years and over living in a community setting
- Hepatitis B screening for people at high risk
- Hepatitis C screening for adults aged 18 to 79 years
- HIV screening for everyone age 15 to 65, and other ages at increased risk
- PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adults at high risk for getting HIV through sex or injection drug use
- Immunizations for adults — doses, recommended ages, and recommended populations vary: Chickenpox (Varicella), Diphtheria, Flu (influenza), Hepatitis A, Hepatitis B, Human Papillomavirus (HPV), Measles, Meningococcal, Mumps, Whooping Cough (Pertussis), Pneumococcal, Rubella, Shingles, and Tetanus
- Lung cancer screening for adults 55 to 80 at high risk for lung cancer because they're heavy smokers or have quit in the past 15 years
- Obesity screening and counseling
- Sexually Transmitted Infection (STI) prevention counseling for adults at higher risk
- Statin preventive medication for adults 40 to 75 years at high risk
- Syphilis screening for all adults at higher risk
- Tobacco use screening for all adults and cessation interventions for tobacco users
- Tuberculosis screening for certain adults with symptoms at high risk

## Preventive benefits for women

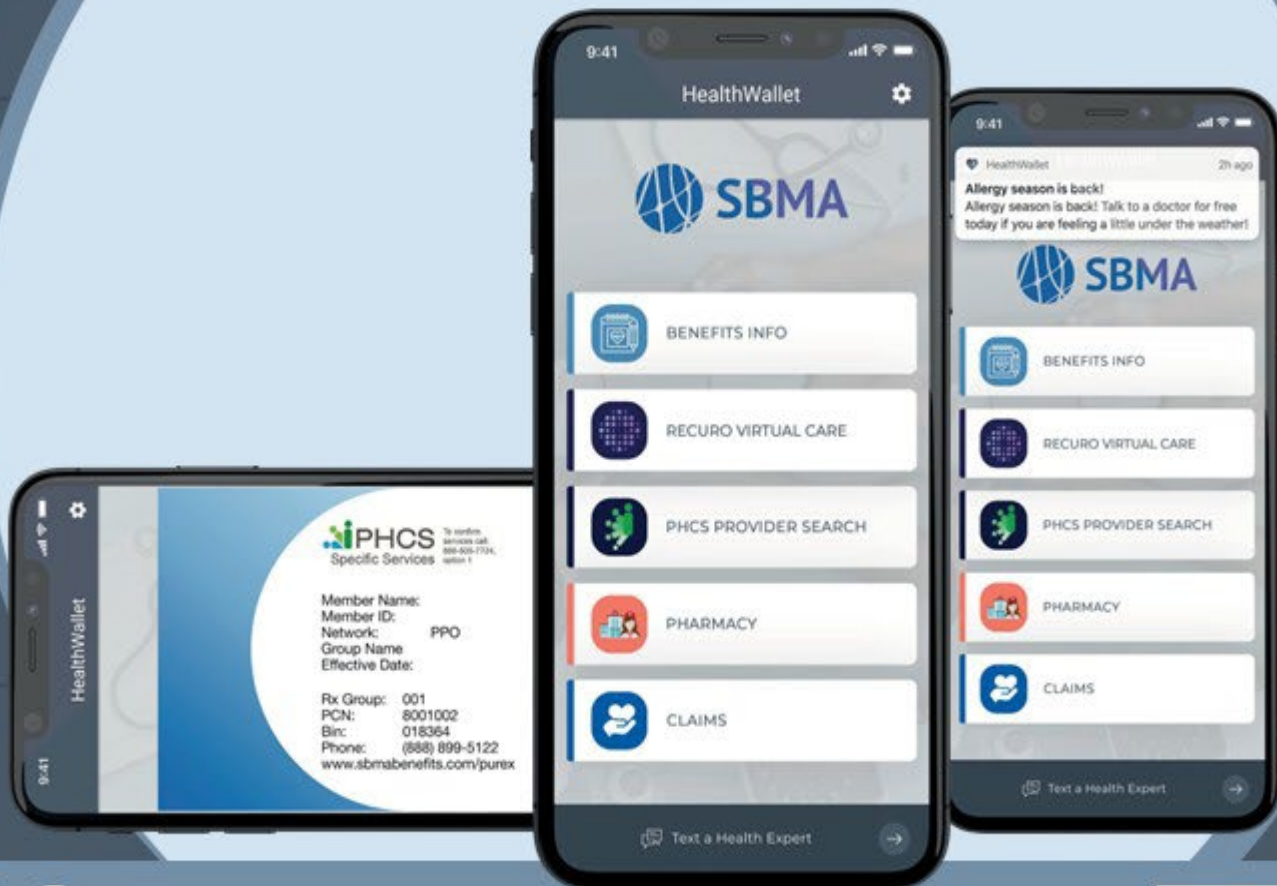
- Bone density screening for all women over age 65 or women aged 64 and younger that have gone through menopause
- Breast cancer genetic test counseling (BRCA) for women at higher risk (counseling only; not testing)
- Breast cancer mammography screenings: every 2 years for women over 50 and older or as recommended by a provider for women 40 to 49 or women at higher risk for breast cancer
- Breast Cancer chemoprevention counseling for women at higher risk
- Breastfeeding comprehensive support and counseling from trained providers, and access to breastfeeding supplies, for pregnant and nursing women
- Birth control: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a health care provider for women with reproductive capacity (not including abortifacient drugs). This does not apply to health plans sponsored by certain exempt "religious employers."
- Cervical Cancer screening: Pap test (also called a Pap smear) for women 21 to 65
- Chlamydia infection screening for younger women and other women at higher risk
- Diabetes screening for women with a history of gestational diabetes who aren't currently pregnant and who haven't been diagnosed with type 2 diabetes before
- Domestic and interpersonal violence screening and counseling for all women

## Preventive benefits for women (continued)

- Folic acid supplements for women who may become pregnant
- Gestational diabetes screening for women 24 weeks pregnant (or later) and those at high risk of developing gestational diabetes
- Gonorrhea screening for all women at higher risk
- Hepatitis B screening for pregnant women at their first prenatal visit
- Maternal depression screening for mothers at well-baby visits
- Preeclampsia prevention and screening for pregnant women with high blood pressure
- Rh Incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Sexually Transmitted Infections counseling for sexually active women
- Expanded tobacco intervention and counseling for all pregnant tobacco users
- Urinary incontinence screening for women yearly
- Urinary tract or other infection screening
- Well-woman visits to get recommended services for women

## Preventive benefits for children

- Alcohol, tobacco, and drug use assessments for adolescents
- Autism screening for children at 18 and 24 months
- Behavioral assessments for children: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Bilirubin concentration screening for newborns
- Blood Pressure screening for children: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Blood screening for newborns
- Depression screening for adolescents beginning at age 12
- Developmental screening for children under age 3
- Dyslipidemia screening for all children once between 9 and 11 years and once between 17 and 21 years for children at higher risk of lipid disorders
- Fluoride supplements for children without fluoride in their water source
- Fluoride varnish for all infants and children as soon as teeth are present
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns; and regular screenings for children and adolescents as recommended by their provider
- Height, weight and body mass index (BMI) measurements taken regularly for all children
- Hematocrit or hemoglobin screening for all children
- Hemoglobinopathies or sickle cell screening for newborns
- Hepatitis B screening for adolescents at higher risk
- HIV screening for adolescents at higher risk
- Hypothyroidism screening for newborns
- PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adolescents at high risk for getting HIV through sex or injection drug use
- Immunizations for children from birth to age 18 — doses, recommended ages, and recommended populations vary: Chickenpox (Varicella); Diphtheria, Tetanus, and Pertussis (DTaP); Haemophilus influenza type B; Hepatitis A; Hepatitis B; Human Papillomavirus (HPV); Inactivated Poliovirus; Influenza (flu shot); Measles; Meningococcal; Mumps; Pneumococcal; Rubella; and Rotavirus
- Lead screening for children at risk of exposure
- Obesity screening and counseling
- Oral health risk assessment for young children from 6 months to 6 years
- Phenylketonuria (PKU) screening for newborns
- Sexually Transmitted Infection (STI) prevention counseling and screening for adolescents at higher risk
- Tuberculin testing for children at higher risk of tuberculosis: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Vision screening for all children
- Well-baby and well-child visits



HealthWallet

## HOW TO LOGIN TO HealthWallet



### In HealthWallet you'll have access to

- Digital ID Cards
- Explanations of Benefits
- Provider Searches
- Prescription Benefits
- Virtual Care Options
- and more

- 1 Type in [get.thehealthwallet.com](https://get.thehealthwallet.com) in your browser on your phone
- 2 Download the app that the above web address brings you to
- 3 Open "the Health Wallet App"
- 4 To Login, Choose your login option instructed by your benefit plan.
- 5 Access your Health Wallet Services & Features.

If you need assistance with the HealthWallet app please call us at  
**1-866-918-7735** or email us at [support@thehealthwallet.com](mailto:support@thehealthwallet.com).

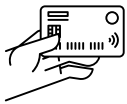
# Provider Lookup

## Medical

1. Click the link based on your plan
  - a. Wellcare MEC - [www.multiplan.com/sbmapreventiveservices](http://www.multiplan.com/sbmapreventiveservices)
  - b. MEC Plans - [www.multiplan.com/sbmaspecificservices](http://www.multiplan.com/sbmaspecificservices)
  - c. *MV Plans* - [www.multiplan.com/sbmapa](http://www.multiplan.com/sbmapa)
2. Enter provider type: i.e Primary Care, Ob-Gyn, Lab, etc.
3. Enter zip code, then click on search and your directory will be provided.



# Member Perks!



## MEC Companion Card

- ✓ Discounts on Dental, Vision, Durable Medical Equipment, Fitness Centers, Pet Care, and more!



## Free Advanced Imaging

- ✓ When you use Medmo, MRI's are fully covered by your plan. No copay!

*MV Plans Only*



## Member Portal & App

- ✓ Access plan information, ID cards, benefit summaries and more.

*MV Plans Only*



## 24/7 Virtual Care

- ✓ Receive care from a board certified doctor 24/7 no matter where you are via phone or FaceTime.



# Telemedicine



## ➤ Commonly Treated

Allergies  
Arthritic Pain  
Bronchitis  
Cold/Flu  
Conjunctivitis  
Diarrhea  
Ear Infections  
Headache  
Gastroenteritis  
Insect Bites  
Sprains/Strains  
Respiratory Infections  
Sinus Infections  
Upset Stomach  
Urinary Tract Infections

## ➤ The Telemedicine Solution

Our telemedicine benefit provides you and your family access to board certified physicians around the clock (24/7/365) via telephone or secure video. Telemedicine physicians can give advice, diagnose or treat illness, and even prescribe medication right over the phone. With healthcare costs rising, an office visit with a PCP or Urgent Care Center can range from \$155 to upwards of \$300, and an ER visit can average almost \$1,000\*. With this benefit, there is no cost to you or your family for a consultation.

# Discount Card



## Discounted Services

Simply register your account, and review all the ways to save!! Instructions, provider lookups, and more are right at your finger tips. Once you make your appointment, present your card and receive discounts at the time of service.

## Dental

Accepted at over 80,000 provider locations nationwide, and covers all dental services and specialties, including orthodontia. Savings can be as high as 50%, and there is no limitation on services or use.

## Vision

Accepted by over 11,000 OUTLOOK vision providers. Cardholders receive up to 50% savings on lenses, frames, and other vision needs.

## Hearing Aids

Members receive a free hearing test and up to 70% discount on hearing aids at 2,200 providers nationwide.

## Lab Services

Members save up to 50% using the online search tool to locate a lab and order their test. Actual savings are displayed immediately. Test results are available within 48-96 hours.

## MRI & Imaging

Members receive concierge appointment service and enjoy savings up to 75% and more on MRI, PET, and CT scans, as well as other imaging services at over 4,000 locations nationwide.

## Vitamins

A wide range of vitamin and mineral supplements are delivered directly to the member's home at discounted rates.

## Diabetic Supplies

A full line of diabetes testing supplies are delivered directly to the member's home.

**& More...**