



80/20 SILVER PLAN - \$85

MEDICAL BENEFITS SUMMARY



LEARN ABOUT YOUR HEALTH COVERAGE

Five Points Health Benefit Plans, LLC Healthcare is in network with The Aetna/First Health Network to provide the largest PPO network in the nation and Puerto Rico with more than 1,000,000 healthcare professionals and 6,000 facilities. We provide not only unmatched quality but also the most affordable healthcare in our nation.

We also provide OptumRx which is the largest and the most prestigious pharmacy benefits program in the nation. OptumRx is used by Harvard University and United Healthcare.

Our goal is to provide ACA compliant plans and to create customizable plans to meet your budget.



SILVER PLAN HIGHLIGHTS



PREVENTIVE CARE

It's easier to stay healthy with regular preventive care. Preventive care includes any routine In-Network checkup. Pap smear, flu shot, basic eye and hearing exams.

1 Annual Exam Per Calendar Year.



PRIMARY CARE VISITS

Primary Care services is the core of Five Points Benefit Plans, and is considered the key for you to becoming and staying healthy.

Unlimited Visits Per Calendar Year.



SPECIALISTS (ROUTINE)

Specialist services are available with NO referral required from the member's Primary Care Provider.

3 Visits Per Calendar Year.



ROUTINE X-RAY & LABS

In-Network Labs include all major lab facilities (such as QUEST, LAB CORP, CPL) and most other labs. Your coverage includes lab tests to ensure the medical care you need.

Unlimited Visits Per Calendar Year.



ADVANCED IMAGING

Imaging is available at the nearest In- Network Diagnostic Facility, Urgent Care, and your provider's office. Ultrasounds, CT Scans or MRIs, PET, Mammogram.

Up to \$100 per Visit, 1 Visit Per Calendar Year.



URGENT CARE

Services are covered at the nearest In-Network Urgent Care center for treatment of an injury or illness. Urgent Care handles medical situations that can't wait or are more complex than what your Primary Care Physician normally performs.

Up to \$100 per Visit, 2 Visits Per Calendar Year.



PRESCRIPTION DRUG COVERAGE

The OPTUMRx Pharmacy Benefit Plan delivers in both brand name and generic drugs.

Self-Funded Employer Group Plan – 80/20 Silver Plan - \$85 Plan Pays 80% / Member Pays 20%

In-Network Only
First Health Network, PPO

Medical Benefits	Member Pays
Preventive Care (ACA Compliant) 1 Annual Exam Per Calendar Year	100% Covered (No Charge)
Primary Care (PCP) Office Visits Unlimited Visits	20% Coinsurance No Copay or Deductible
Specialty Care Routine Office Visits (Cardiology, Dermatology, etc.) 3 visits per calendar year	20% Coinsurance No Copay or Deductible
Routine X-Ray and Labs (HOSPITAL FACILITIES EXCLUDED) Unlimited Visits	20% Coinsurance No Copay or Deductible
Advanced Imaging (MRI, CT, PET Scan, Ultrasounds) (HOSPITAL FACILITIES EXCLUDED) Up to \$100 per visit, 1 visit per year	20% Coinsurance No Copay or Deductible
Urgent Care Up to \$100 Per Visit, 2 visits per year	20% Coinsurance No Copay or Deductible
Emergency Room	Not Covered
Inpatient and Outpatient Hospital Care	Member Pays
Inpatient Hospitalization	Not Covered
Inpatient Surgery	Not Covered
Anesthesia (Outpatient Only)	Not Covered
Intensive Care	Not Covered
Outpatient Surgery	Not Covered
Maternity	Not Covered
 OPTUMRx	Member Pays (30-90 day Supply, Home Delivery)
Preventive Medications	100% Covered (No Charge)
Generic – Tier I	\$10 Copay
Preferred Brand – Tier II Plan Pays Up to \$300 Per Drug, Per Month	40% Coinsurance
Non – Preferred Brand – Tier III Plan Pays Up to \$300 Per Drug, Per Month	40% Coinsurance
Specialty Drugs – Tier IV Plan Pays Up to \$300 Per Drug, Per Month	40% Coinsurance

\$500 Annual deductible per year applies to Tier I, II, III, IV.
Member pays 40% of the allowed negotiated discount rate.



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