

SERVICE CATEGORY		IN-SYSTEM (Regular HMO) <i>Using MVP's network of providers</i>	OUT-OF-SYSTEM <i>Using non-participating providers</i>
<b>Annual Deductible</b>		Not Applicable	\$1,000 per individual/\$3,000 per family <i>Services covered as noted below are after satisfaction of the annual deductible</i>
<b>Coinsurance</b>		Not Applicable	As Noted
<b>Annual Out-of-Pocket Maximum</b>		Not Applicable	\$10,000 per individual/\$30,000 per family, per calendar year
<b>Lifetime Maximum Coverage</b>		No Maximum	\$50,000 per individual
<b>Physician Services</b>	<b>Primary Care Physician Office Visit</b> Well Baby and Child Care <i>Per MVP Preventive Care Guidelines</i>	No Charge	Covered in full, no deductible MVP covers at 50% of allowable charges
	Periodic Physicals, Gynecological Exams/ Pap-tests	\$25 Copay	
	Office Surgery	\$100 Copay	
	<b>Specialist Office Visits</b> Office Visit Second Surgical Opinions (not required) X-ray Services <i>If X-ray services are provided in conjunction with other services, multiple copayments may apply.</i>	\$40 Copay	
	Office Surgery	\$100 Copay	
	<b>Hospital Services</b> Surgery (Inpatient/Outpatient)	\$100 Copay	
	Anesthesiology Radiology Visits/Consultations	No Charge	
	<b>Hospital (Facility)</b>	Hospital Inpatient	
Hospital Outpatient X-ray Services <i>If X-ray services are provided in conjunction with other services, multiple copayments may apply.</i>	\$40 Copay		
Hospital Outpatient Surgery	\$75 Copay/Visit		
Hospital Outpatient Therapeutic Services	\$25 Copay		
Hospital Outpatient Laboratory	No Charge		
<b>Maternity</b>	Physician Services	Office Copay for first diagnostic visit only	MVP covers at 50% of allowable charges (initial newborn exam covered at 100% of allowable charges)
	Hospital Services	Subject to \$500 inpatient Copay - excludes newborns	
	Delivery Care	\$200 Copay	
	Nursery Care	No Charge	
<b>Laboratory Services</b>		No Charge	MVP covers at 50% of allowable charges
<b>Ambulance</b>		\$100 Copay	
<b>Chiropractic Benefit</b>		\$40 Copay/Office Visit	
<b>Mental Health</b>	Inpatient	Subject to Hospital Inpatient (Facility) Copay	
	Inpatient Physician	No Charge	
	Outpatient	\$40 Copay/Visit	
<b>Substance Abuse Diagnosis &amp; Treatment</b> Rehabilitation Outpatient		\$25 Copay/Office Visit	
<b>Emergency Hospital Care</b>		\$100 Copay/Visit <i>If admitted, only hospital inpatient Copay applies</i>	\$100 Copay/Visit
<b>Home Health Care</b> 60 visit max.		\$25 Copay/Visit	MVP covers at 80% of allowable charges (not subject to deductible)

This chart is intended to provide a general outline of MVP coverage. In the event of any conflict between this document and your Certificate of Coverage, Schedule and any applicable Rider(s), your Certificate of Coverage, Schedule and Rider(s) will be controlling. For details, please call 1-800-TALK-MVP (1-800-825-5687), and select option #2.

SERVICE CATEGORY		IN-SYSTEM (Regular HMO) <i>Using MVP's network of providers</i>	OUT-OF-SYSTEM <i>Using non-participating providers</i>
<b>Other Covered Services</b>	Urgent Care Centers	\$25 Copay/Visit	MVP covers at 50% of allowable charges
	Vision Care For accidental injury or disease of the eye	\$25 Copay PCP/ \$40 Copay Specialist, per Visit	
	Diabetic Supplies and Services Limited to a 31-day supply per dispensing	\$25 Copay/Item	MVP covers at 50% of allowable charges (no deductible)
	Out-of-Area Emergency Room Follow-up Visits Covered within a 10-day period	No Charge	Same as In-Network
<b>Important Benefit Exclusions*</b>	<ul style="list-style-type: none"> <li>• Inpatient Substance Abuse Services</li> <li>• Outpatient Physical/Occupational/Speech Therapy (except for treatment of lymphedema resulting from treatment of breast cancer)</li> <li>• Skilled Nursing Care</li> <li>• Routine Vision Exams</li> <li>• Preventive Dental Care for Kids</li> <li>• Non-Emergency Ambulance Transportation</li> <li>• Outpatient Cardiac Rehabilitation</li> <li>• Durable Medical Equipment/Orthotic Devices/External Prosthetics/Ostomy Supplies (except for breast prosthesis)</li> </ul> <p>*Refer to the Rider/Schedule and Certificate of Coverage for a complete and detailed list of exclusions</p>		

## Here's how it works

When care is sought from the Primary Care Physician or a participating provider it is considered to be "In-System" and the member enjoys comprehensive HMO benefits and coverage.

If the member receives care that is not from their Primary Care Physician or a participating provider, for instance care that is received when a member goes to any non-participating provider, that care is considered to be "Out-of-System" and is subject to the benefits outlined in the "Out-of-System" side of MVP POS.

## Benefits based on your choice of providers

Enroll in MVP Point of Service and select a Primary Care Physician for each covered family member.

### In-System Care (Regular HMO)

- See your Primary Care Physician for regular check-ups (routine well or preventive care) and basic health screenings services
- Lower out-of-pocket costs
- No claim forms
- Self-refer to any participating specialist after consulting with your PCP

### Out-of-System Care

- See the provider of your choice
- You pay a higher deductible and coinsurance
- You file claim forms for reimbursement

## Take advantage of our Core Wellness

*Our Core Wellness features include:*

### Personalized Support Care Management Programs

Working in partnership with your doctor, we provide guidance and support for:

- Asthma
- Cancer
- Cardiac Conditions
- Depression
- Diabetes
- Kidney Dialysis Support
- Low Back Pain
- Maternity
- Mental Health
- Prenatal Care
- Prenatal Care for High Risk Pregnancies
- Smoking Cessation
- Substance Abuse

### Powerful Tools Personal Health Manager

Powered by WebMD®, the Personal Health Manager helps you manage your health care, set and track goals, and make well-informed health care decisions.

### Answers and Advice 24/7 Nurseline

Expert advice on non-emergency questions is just a phone call away, even on weekends, when you call our 24/7 Nurseline at **1-888-MVP-MBRS**.

### From Massage Therapy to Gym Memberships Exclusive Member Discounts

Enjoy savings on a wide range of health and wellness products and services.

## We are here for you

- Reach our Member Services Department 7 days a week from 8 a.m. to 10 p.m., **1-888-MVP-MBRS (1-888-687-6277)**
- Access [mvphealthcare.com](http://mvphealthcare.com) to find doctors, compare drug costs, look up benefits, change your address, research hospitals and many other time-saving services.