



# MVP Point of Service

## Summary of Benefits

\$500,000 Lifetime Maximum  
80%/20% Coinsurance Option

| Service Category                                   | IN-SYSTEM (Regular HMO)<br><i>Using MVP's network of providers</i> | OUT-OF-SYSTEM<br><i>Using non-participating providers</i>   |
|--|--|---|
| <b>Annual Deductible<sup>1</sup></b>               | Not Applicable   | \$250 per individual/\$500 per family<br>Services covered as noted below are after satisfaction of the annual deductible  |
| <b>Coinsurance</b>                                 | Not Applicable   | As Noted  |
| <b>Annual Out-of-Pocket Maximum</b>                | Not Applicable   | \$2,500 per individual/\$5,000 per family, per calendar year  |
| <b>Lifetime Maximum Benefit Payable</b>            | No Maximum   | \$500,000 per individual  |
| <b>Hospital</b>                                    |  |   |
| Hospital Inpatient                                 | Standard HMO Coverage  | MVP covers at 80% of allowable charges <sup>2</sup>   |
| Hospital Outpatient-Surgery                        | Standard HMO Copay/Visit   |   |
| Hospital Outpatient-Other                          | Standard HMO Coverage  |   |
| <b>Physician Office Visits</b>                     | Standard HMO Copay/Visit   | MVP covers at 80% of allowable charges (Diagnosed illnesses only)   |
| <b>Physician Inpatient Care</b> (Medical/Surgical) | No Charge  | MVP covers at 80% of allowable charges  |
| <b>Well Care Services</b>                          | Standard HMO Copay/Office Visit                                    | Covered "In-System" Only  |
| <b>Second Surgical Opinion</b> (Optional)          |  |   |
| <b>Screening Mammography, Pap Tests</b>            | Standard HMO Copay/Office Visit                                    | MVP covers at 80% of allowable charges  |
| <b>Diagnostic Lab &amp; X-ray</b>                  |  |   |
| <b>Maternity</b>                                   |  |   |
| Physician Services                                 | No Charge  | MVP covers at 80% of allowable charges<br>MVP covers at 80% of allowable charges <sup>2</sup><br>Covered "In-System" Only |
| Hospital Services                                  | Standard HMO Coverage  |   |
| Nursery Care (Well Baby)                           | No Charge  |   |
| <b>Physical/Occupational/Speech Therapy</b>        |  |   |
| 30 visits per member per calendar year combined    | Standard HMO Copay/Office Visit                                    | See Contract for details  |
| <b>Ambulance</b>                                   | No Charge  | No Charge   |
| <b>Chiropractic Benefit</b>                        | Standard HMO Copay/Office Visit                                    | Covered "In-System" Only  |
| <b>Emergency Hospital Care</b>                     | Standard HMO ER Copay/Visit  | Covered Same as "In-System"   |
| <b>Durable Medical Equipment</b>                   | Standard HMO DME Copay   | MVP covers at 50% of Allowable Charges  |
| <b>Mental Health</b>                               |  |   |
| Inpatient  | Standard HMO Coverage  | Covered "In-System" Only  |
| Outpatient Physician                               | Standard HMO Copay/Office Visit                                    |   |
| <b>Substance Abuse</b>                             |  |   |
| Inpatient  | Standard HMO Coverage  | Covered "In-System" Only  |
| Outpatient Physician                               | Standard HMO Copay/Office Visit                                    |   |
| <b>Home Health Care</b>                            | Standard HMO Copay/Visit   | MVP covers at 80% of allowable charges  |
| <b>Hospice</b>                                     | Standard HMO Coverage  |   |
| <b>Skilled Nursing Facility</b> (45 days/year)     | Standard HMO Coverage  |   |

<sup>1</sup>In-System Copayments are not applicable towards deductibles or annual out-of-pocket maximums.

<sup>2</sup>Requires prior notification for elective hospital admissions. Failure to obtain authorization in advance will result in reduction of coverage.

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.

## 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 *After Hours Nurseline*

Expert advice on non-emergency questions is just a phone call away, even on weekends, when you call our *After Hours 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., **1-888-687-6277**
- Access **mvphealthcare.com** to find doctors, compare drug costs, look up benefits, change your address, research hospitals and many other time-saving services.