



EMPLOYER GROUP
REFERENCE - BASED PRICING
MEDICAL BENEFITS SUMMARY
FY: 2024/2025



LEARN ABOUT OUR HYBRID
REFERENCE-BASED PRICING
COVERAGE

Your company can rest assured because you and your employees will know what to expect in terms of procedures, providers, facilities, and reimbursement cap for maximum allowable charges. This plan reimburses at 1.25% above the Medicare rate.

Such savings have made reference-based pricing attractive to employers nationwide.

Five Points Benefits Plans' advocacy program ensures and provides members with necessary claim support at all times.

We encourage members to "shop" for providers who will accept the plan's reimbursement as payment in full.



PLAN HIGHLIGHTS



PREVENTIVE CARE

It's easier to stay healthy with regular preventive care, 100% covered at zero cost to you.

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.



SPECIALISTS (ROUTINE)

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



ROUTINE X-RAY & LABS

In or Out-of-Network Labs accepted at 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.



ADVANCED IMAGING

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



URGENT CARE

Urgent Care handles medical situations that can't wait or are more complex than what your Primary Care Physician normally performs.



HOSPITAL**

We provide affordable hospital coverage through our hospital partners that accept our RBP plan and are nationwide.



PRESCRIPTION DRUG COVERAGE

The Optum Rx Pharmacy Benefit Plan delivers in both brand name and generic drugs. Accepted in all Pharmacies.

Medical Benefits Description of your Coverage	In-Network Limitations Apply First Health Network Providers		Hospital & Out-of-Network Unlimited Visits Reference-Based Pricing	
Preventive Annual Exam	100% Covered (No Charge)		100% Covered (No Charge)	
Primary Care (PCP) Office Visits	\$25 Copay		\$40 Copay (1.25% above Medicare Rate)	
Specialty Care Routine Office Visits (Cardiology, Dermatology, OBGYN)	\$35 Copay		\$55 Copay (1.25% above Medicare Rate)	
Routine X-Ray and Labs	\$20 Copay		\$40 Copay (1.25% above Medicare Rate)	
Advanced Imaging (MRI, CT, PET Scan, Ultrasounds)	\$200 Copay		\$200 Copay (1.25% above Medicare Rate)	
Urgent Care	\$75 Copay		\$100 Copay (1.25% above Medicare Rate)	
Emergency Room	40% Coinsurance No Copay or Deductible Up to \$100 per visit, 1 day max		\$200 Copay (1.25% above Medicare Rate)	
Inpatient Surgery	40% Coinsurance No Copay or Deductible Up to \$100 per visit, 1 day max		\$200 Copay (1.25% above Medicare Rate)	
Anesthesia (In/Outpatient)	40% Coinsurance No Copay or Deductible Up to \$100 per visit, 1 day max		\$200 Copay (1.25% above Medicare Rate)	
Intensive Care	40% Coinsurance No Copay or Deductible Up to \$100 per visit, 1 day max		\$200 Copay (1.25% above Medicare Rate)	
Outpatient Surgery	40% Coinsurance No Copay or Deductible Up to \$100 per visit, 1 day max		\$200 Copay (1.25% above Medicare Rate)	
OPTUM Rx	In-Network		Hospital & Out-of-Network	
Preventive Medications	100% Covered		100% Covered	
Generic – Tier I	\$10 Copay		\$10 Copay	
Preferred Brand – Tier II	40% Coinsurance		40% Coinsurance	
Non-Preferred Brand – Tier III	40% Coinsurance		40% Coinsurance	
Specialty Drugs – Tier IV	40% Coinsurance		40% Coinsurance	
	Membership Rate		***Deductible & Max Benefit	
Member Plan Coverage	Tier	Monthly Rates	Deductible	Max Benefit
Employee Only: EE	EE	\$295	\$1,500	\$3,000
Employee and Spouse: EE+SP	EE + SP	\$550	\$2,500	\$6,000
Employee and Child	EE + Child	\$535	\$2,500	\$6,000
Family	FAMILY	\$825	\$3,500	\$9,000
Plan Pays Up to \$300 Per Drug, Per Month. \$500 Annual Deductible for Optum Rx Pharmacy Benefits.				
**The RBP plan members are responsible for finding providers that will accept the RBP payments. There is no network or established set of required providers. Members can go to any provider or facilities they choose. However, the plan can identify providers and facilities who commonly accept the plan's reimbursement rates as payment in full, without requiring a network contract or provider agreement.				
***After deductible is met and max benefits are met, Member is 100% responsible for all claims at 1.25% above Medicare rates. Five Points Benefit Plans' advocacy program, as well, ensures and provides members with necessary support at all times.				