



### Three tiers of primary care membership plans



### Benefits

- Fixed costs for primary care needs and more.
- Priced to provide tremendous value of services to patients and their families — especially those that may require multiple care visits (chronic disease management, children well/sick visits).
- Simplistic, upfront pricing.
- Providing the right care, in the right place, at the right time.
- Access to preferred Skyway pricing for other needed services, creating even more savings!

	Preferred	Premium	Platinum
Primary Care Visits – Internal Medicine, Pediatrics, Med/Peds, Family Med, Express Care, Retail (DrugMart)	Up to 3 <sup>^</sup>	Up to 3 <sup>^</sup>	Up to 4 <sup>^</sup>
Routine age-appropriate immunizations and vaccines <sup>^#</sup>	Covered	Covered	Covered
Screening Mammogram including Tomosynthesis <sup>#</sup>	Covered	Covered	Covered
Cervical Cancer Screen <sup>*#</sup>	Covered	Covered	Covered
Complete Blood Count	Annually	Annually	Annually
Lipid Panel	Annually	Annually	Annually
Basic Metabolic Panel	Annually	Annually	Annually
Thyroid Panel	Annually	Annually	Annually
Hepatic Function Panel	Annually	Annually	Annually
Hemoglobin A1c	Up to 2	Up to 2	Up to 2
Iron level	Annually	Annually	Annually
Prostate specific antigen (PSA) <sup>#</sup>	Annually	Annually	Annually
Vitamin D level	Annually	Annually	Annually
Urinalysis	Annually	Annually	Annually
Hepatitis C Screening <sup>#</sup>	Covered	Covered	Covered
Sexually-transmitted disease screening	Covered	Covered	Covered
Lead Screening (in children) <sup>#</sup>	Covered	Covered	Covered
Venipuncture (required for screening services)	Included	Included	Included
Bone Density Scan <sup>#</sup>	Not Covered	Included	Included
Screening Colonoscopy <sup>#</sup>	Not Covered	Covered	Covered
Basic X-ray	Not Covered	1	3

<sup>^</sup> For members under 2 years old, well-child visits will be covered according to the American Academy of Pediatrics guidelines. Therefore, these member may have up to 6 visits covered in the Preferred and Premium tiers, and up to 8 visits in the Platinum tier.

\* Cervical cancer screens done by a gynecologist will be covered as long as performed during a coded preventive visit.

# Indicated by age appropriate guidelines and testing frequencies. For more information, visit [www.cdc.gov/vaccines/index/html](http://www.cdc.gov/vaccines/index/html)

Other diagnostic services, not listed above, including imaging and pathology, will not be covered under this plan but will be provided at preferred discount pricing.

Pending other insurance coverage, additional services needed will be provided at preferred discount pricing. Some notable excluded services: emergency medicine, maternity care, specialty providers, surgical services, physical/occupational therapy, speech therapy, dental care and inpatient services.

Payment is due on/before the 7th of the month, or \$10 late fee will be assessed. Requires 12-month coverage commitment with one-time registration fee.