

2022-2023

BENEFITS GUIDE





Bucks and Montgomery County Schools Healthcare Consortium appreciates your commitment to our success. We're equally committed to providing you with competitive, affordable health and wellness benefits to help you take care of yourself and your family.

Please read this guide carefully. It has a summary of your plan options and helpful tips for getting the most value from your benefit plans. We understand that you may have questions about annual enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource, of course. Anytime you have questions about benefits or the enrollment process, you can contact your human resources representative. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD).

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WELCOME TO YOUR 2022-2023 BENEFITS GUIDE!

On behalf of the Bucks and Montgomery County Schools Healthcare Consortium, thank you for the important work that you do in our public schools. We value your important contributions to our students, communities, and colleagues.

Please use this guide as a roadmap of support for using the medical and prescription drug benefits available through our consortium. It will help you understand common healthcare vocabulary, the designs of each of our four medical plans, and a host of other supports to help you navigate the complexities of our healthcare system and receive excellent care.

As you read this guide, please pay special notice to services available via Teledoc, which brings a certified physician right to your phone to assist with behavioral health and minor medical ailments. It's a great go-to for quick and convenient access to care. And don't wait until you are sick to sign up for the service – your account can be set up ahead of time so that you have hassle-free access to care when you need it.



Another tool available to our members is **AETNA'S INFORMED REWARDS PROGRAM**, where you can easily compare costs for services like MRIs, X-rays, colonoscopies and more! When you choose a lower-cost medical service, you could qualify for a financial reward.

If you have questions about any of the features of our plans or services, please utilize the telephone numbers listed in this guide or contact a member of your HR department.

Best wishes for a safe and healthy school year,

Bill Senavaitis and Rebecca Roberts-Malamis

Chair and Vice Chair of the Bucks and Montgomery
County Schools Healthcare Consortium



BASIC INSURANCE TERMS

COINSURANCE: Coinsurance is your share of the costs of a covered healthcare service, calculated as a percent (for example, 20%) of the allowed amount for the service. Your coinsurance will begin after you have met your deductible. For example, if the health plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health plan pays the rest of the allowed amount.

COPAY: A copay is a fixed dollar amount you pay for a healthcare service. The amount can vary by the type of service. Your copays will not count toward your deductible but will count toward your out-of-pocket maximum.

DEDUCTIBLE: The deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if your deductible is \$1,100, your plan won't pay anything until you've met your \$1,100 deductible for covered healthcare services subject to the deductible. Preventive care is not subject to the deductible as it is covered 100% by any medical plan option.

EXPLANATION OF BENEFITS (EOB): An EOB is a statement from the insurance company showing how claims were processed. The EOB tells you what portion of the claim was paid to the healthcare provider and what portion of the payment, if any, you are responsible for.

IN-NETWORK VS. OUT-OF-NETWORK: A network is composed of all contracted providers. Networks request providers to participate in their network, and in return, providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your claims will be higher because you will not receive the discounts the in-network providers offer.

OUT-OF-POCKET MAXIMUM: The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and copays that come out of your pocket. After you have paid the specified out-of-pocket amount during a policy year, the plan pays the remaining covered services at 100%.

PREVENTIVE CARE: Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physical exams, mammograms, flu vaccines, prostate tests and smoking cessation.

REASONABLE AND CUSTOMARY: The amount of money a health plan determines is the normal or acceptable range of charges for a specific health-related service or medical procedure. If your healthcare provider submits higher charges than what the health plan considers normal or acceptable, you may have to pay the difference.





MEDICAL BENEFITS

Bucks and Montgomery County Schools Healthcare Consortium is committed to helping you and your dependents maintain health and wellness by providing you with access to the highest levels of care. We offer you a choice of three Open Choice POS II plans, and a POS plan through Aetna for the 2022-2023 plan year.

Medical plan summary

	BMCS Open Choice® - 1		BMCS Open Choice® - 2		BMCS Open Choice® - 3		BMCS POS	
	In network	Out of network	In network	Out of network	In network	Out of network	Referred	Self-referred
Referrals required	No	No	No	No	No	No	Yes	No
Deductible								
Individual	\$0	\$600	\$0	\$1,000	\$1,100	\$1,100	\$0	\$1,000
Family	\$0	\$1,200	\$0	\$3,000	\$2,200	\$3,300	\$0	\$3,000
After deductible, plan pays	100%	70%	100%	70%	100%	50%	100%	50%
Out-of-pocket maximum								
Individual	\$3,500	\$7,500	\$5,000	\$7,500	\$3,500	\$10,000	\$3,500	\$10,000
Family	\$7,000	\$15,000	\$10,000	\$15,000	\$7,000	\$30,000	\$7,000	\$30,000
Lifetime maximum	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Doctor's office visits								
Primary Care Services	\$10 copayment	70%, after deductible	\$20 copayment	70%, after deductible	\$25 copayment	50%, after deductible	\$15 copayment	50%, after deductible
Specialist Services	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible	\$50 copayment	50%, after deductible	\$25 copayment	50%, after deductible
Preventive Care	100%	70%, no deductible	100%	70%, no deductible	100%	50%, no deductible	100%	50%, no deductible
Teladoc	\$0	Covered as In-Network	\$0	Covered as In-Network	\$0	Covered as In-Network	\$0	Covered as In-Network
Routine Eye Exam	Not covered	Not covered	Not covered	Not covered	Not covered	Not covered	\$25 copayment (once every 24 months)	Not covered
Hospital services								
Inpatient Hospital Services	\$75 per day (maximum of 5 copayments per admission)	70%, after deductible	\$350 copayment per admission	70%, after deductible	\$300 copayment	50%, after deductible	\$250 copayment per admission	50%, after deductible
Outpatient Surgery	\$75 copayment	70%, after deductible	\$200 copayment	70%, after deductible	\$200 copayment	50%, after deductible	\$100 copayment	50%, after deductible
Emergency Room (copayment waived if admitted)	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment
Urgent Care/ Non-Urgent Use of Urgent Care	\$28 copayment	70%, after deductible	\$28 copayment	70%, after deductible	\$50 copayment	50%, after deductible	\$24 copayment	50%, after deductible



	BMCS Open Choice® - 1		BMCS Open Choice® - 2		BMCS Open Choice® - 3		BMCS POS	
	In network	Out of network	In network	Out of network	In network	Out of network	Referred	Self-referred
Ambulance								
Emergency	100%	100%	100%	100%	100%, after deductible	100%, after deductible	100%	100%
Diagnostic Procedures								
Outpatient Laboratory/ Pathology	100%	70%, after deductible	100%	70%, after deductible	100%, after deductible	50%, after deductible	100%	50%, after deductible
Outpatient Radiology (routine radiology/ diagnostic MRI/ MRA, CT/CTA scan, PET scan)	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible	100%, after deductible	50%, after deductible	100%	50%, after deductible
Therapy Services								
Physical, Occupational and Speech	\$15 copayment [visits 1-30] \$25 copayment [visits 31-60] (60 visits per calendar year for PT/OT/ST)	70%, after deductible (60 visits per calendar year for PT/OT/ST)	\$20 copayment [visits 1-30] \$40 copayment [visits 31-60] (60 visits per calendar year for PT/OT/ST)	70%, after deductible (60 visits per calendar year for PT/OT/ST)	\$25 copayment (visits 1-30) \$50 copayment visits (31-60)	50%, after deductible	100% (up to 60 consecutive days per condition covered, subject to significant improvement)	50%, after deductible (up to 60 consecutive days per condition covered, subject to significant improvement)
Chiropractic Care	\$20 copayment (30 visits per calendar year)	70%, after deductible (30 visits per calendar year)	\$40 copayment (30 visits per calendar year)	70%, after deductible (30 visits per calendar year)	\$50 copayment (30 visits per calendar year)	50%, after deductible (30 visits per calendar year)	100% (100 visits per calendar year)	50%, after deductible (100 visits per calendar year)
Private-Duty Nursing	100%	70%, after deductible	100%	70%, after deductible	100%, after deductible	50%, after deductible	100%	50%, after deductible
Hospice and Home Health Care	100%	70%, after deductible	100%	70%, after deductible	100%, after deductible	50%, after deductible	100%	50%, after deductible
Durable Medical Equipment and Prosthetics	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible	100%, after deductible	50%, after deductible	100%	50%, after deductible
Mental health care								
Outpatient	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible	\$50 copayment	50%, after deductible	\$25 copayment	50%, after deductible
Inpatient	\$75 per day (maximum of 5 copayments per admission)	70%, after deductible	\$350 copayment per admission	70%, after deductible	\$300 copayment per admission	50%, after deductible	\$250 copayment per admission	50%, after deductible
Substance abuse treatment								
Outpatient/ Partial Facility Visits	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible	\$50 copayment	50%, after deductible	\$25 copayment	50%, after deductible
Inpatient Rehabilitation	\$75 per day (maximum of 5 copayments per admission)	70%, after deductible	\$350 copayment per admission	70%, after deductible	\$300 copayment per admission	50%, after deductible	\$250 copayment per admission	50%, after deductible
Inpatient Detoxification	\$75 per day (maximum of 5 copayments per admission)	70%, after deductible	\$350 copayment per admission	70%, after deductible	\$300 copayment per admission	50%, after deductible	\$250 copayment per admission	50%, after deductible



WHERE TO GO FOR DIAGNOSTIC PROCEDURES

Locate an in-network lab

Quest Diagnostics and LabCorp are Aetna's national preferred labs. They, along with their national and specialized affiliates, offer a wide range of testing services. Patients can get everything from routine blood tests to gene-based cardiology to molecular testing.

Stay in the network and pay less! You can save on out-of-pocket costs when you get lab work done in Aetna's network. Below is an example of how in-network costs compare to out-of-network costs using the Open Choice 1 plan:*

	Quest Diagnostics and LabCorp	Out-of-Network
Lab test price	\$30	\$300
Patient's Coinsurance	0%	30%
Patient Pays	\$0	\$90

You can see a complete list on [Aetna.com](https://www.aetna.com) by using our provider search tool.

*These prices reflect an example of a routine lab test.



GET STARTED WITH YOUR SECURE MEMBER WEBSITE

Your secure member website saves you time, and helps you make more informed decisions about your health. And, you can view your most important information at-a-glance. You can:

- Find the right doctor
- See what you owe
- Know your plan
- Get valuable information
- Know costs before you go
- Get healthier

Logging in is fast, easy and convenient

You may use your Aetna member ID card or your social security number to register.

STEP 1: Go to [aetna.com](https://www.aetna.com)

STEP 2: Click on the Log In/Register link

STEP 3: Follow the simple prompts

Questions?

Call Aetna Member Services at
1-(800) 293-3536



AETNA HEALTH APP

You're in charge

Staying healthy is important. So is keeping track of your benefits. But with everything else you have going on, managing it all can be a challenge.

The Aetna Health app can help. From finding a doctor and comparing costs to paying claims and viewing your ID card, the app is your all-in-one resource for the information you need.

See for yourself how the Aetna Health app can make it easier to manage your benefits.

- View benefits and pay claims for your whole family
- Search for providers, procedures and medications
- Locate an in-network urgent care facility
- Get cost estimates before you get care
- Track spending and progress toward meeting your deductible
- Access your member ID card whenever you need it

*Download the
Aetna Health app*



INFORMED HEALTH[®] LINE

A 24-hour information line for your health questions

Talk to a registered nurse anytime

With the Informed Health Line, you can speak to a registered nurse about health issues — whenever you need to. Plus — it's toll-free, you can call as many times as you need (at no extra cost), and your covered family members can use it, too!

You can:

- Get information on a wide range of health and wellness topics
- Make better health care decisions
- Find out more about a medical test or procedure
- Get help preparing for a visit to your doctor
- Receive emails with links to videos that relate to your question or topic

Call Now!
(800) 556-1555

NEW!

CVS[®] CAREPASS[®]

Get membership perks you'll use everyday

The CVS CarePass membership program can help you and your family stay healthy, save money and ultimately stress less. Perks like same day, no-cost prescription delivery and discounts on thousands of your favorite CVS products offer convenient ways to keep your health goals on track — and give you fewer errands to run. And with exclusive access to our 24/7 pharmacist helpline, you'll have peace of mind, too.

Why you'll be a major fan of CVS CarePass

- 24/7 access to CVS pharmacists
- Through our pharmacist helpline, you and your loved ones can receive medication support quickly
- Rx delivery on your schedule
- Get the medications you need, whenever you need them, with no-cost, same day delivery on prescriptions
- Receive 20% savings on thousands of CVS Health products
- 1- to 2-day shipping on your entire order and no minimums

To register for CarePass, log in to the Aetna Health app or your Aetna[®] member website.

\$10 promo reward

Pick up something, just for you. Easily use your promo reward in-store or online — it's automatically added to your ExtraCare[®] card each month to thank you for being a member.



CVS HEALTH HUB

CVS.com/healthHUB

CVS® HealthHUB™ is a local health care destination that offers convenient and affordable care that you may need to help you feel your best.

Care that's convenient and reliable

- Expanded health services that can go beyond everyday care to help assist with chronic conditions, such as diabetes or sleep apnea.
- A professional care team of providers that work together to support your total health and help coordinate care and services you may need.
- Extra assistance from the pharmacist who can talk with you about screenings, support tools and services you may need to get on the path to better health.
- A care concierge who is there to guide you every step of the way and help you navigate the services and resources offered within a CVS HealthHUB location.
- And, a greater selection of health and wellness products— with everything from self-care products to durable medical equipment and supplies, to help support your total health.



MINUTECLINIC®

CVS.com/minuteclinic

The time for a solution that gives people more options to take control of their health and get the care they need — on their terms — is now.

Care that's convenient and reliable

MinuteClinic® makes it easy for your employees to get the care they need, when and where they need it. And now your employees can get access to all covered MinuteClinic services at no cost to them — not just preventive care.

- MinuteClinic is a walk-in clinic inside select CVS Pharmacy® and Target stores and is the largest provider of retail health care in the United States — with over 1,100 locations in 33 states and the District of Columbia.
- Open every day, including evenings. MinuteClinic offers both walk-in and scheduled appointment options.
- MinuteClinic health care providers treat a variety of illnesses, injuries and conditions. They can also write prescriptions, when medically appropriate.



Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor and therapist through the convenience of phone, video or mobile app visits. It's an affordable option for quality medical care.

- Receive quality care via phone, video or mobile app
- Prompt treatment, talk to a doctor in minutes
- Prescriptions sent to pharmacy of choice if medically necessary
- Teladoc is less expensive than the ER or urgent care
- Meet a Therapist 7 days a week and get support for anxiety, depression, stress, and more!

Cost Comparison

Teladoc	ER
\$0	\$100

GET THE CARE YOU NEED

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Pink Eye
- Respiratory infection
- Sinus problems
- Skin problems
- And more!

[Teladoc.com/aetna](https://www.teladoc.com/aetna)
1-(855) 835-2362



With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.





PRESCRIPTION DRUG

Please refer to your district's HR rep to see your Prescription Drug options.

Your Prescription drug plan will be administered through Capital Rx effectively July 1, 2022. There is a dedicated Customer Care team available 24 hours a day. Seven days a week. They can be reached at 1-877-542-2779.

The Capital Rx suite of digital tools includes an online member portal and mobile app, giving you a personal advisor for your prescriptions in the palm of your hand.

- Find a pharmacy
- View your claims history
- Download a digital pharmacy card
- View which drugs are covered under your plan
- Track how much money you have paid towards your out-of-pocket obligations

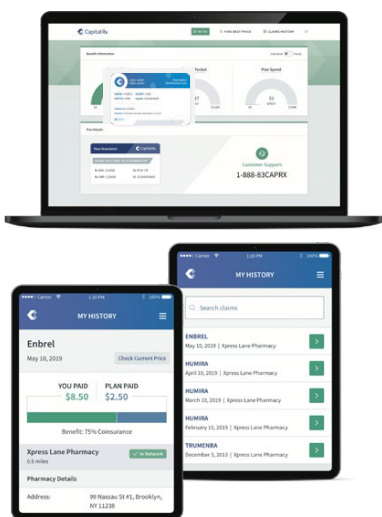
To access the member website ...

- Create your account and register at: <https://app.cap-rx.com/register>. Be sure to check your email to complete your registration.

Capital Rx Mobile App

The Capital Rx Pharmacy Benefits mobile app is a modern and user-friendly experience. It is designed to empower members to understand and manage their pharmacy benefits. All online tools and customer care support will be available beginning July 1, 2022.

- Allows members to access the Capital Rx Formulary and other helpful tools
- Uses the latest security authentication with the ability to enable push notifications
- Keeps members informed of updated drug pricing and possible drug alternatives



Search for the lowest cost drug at surrounding pharmacies



Find a pharmacy



View your claims history



Download a digital pharmacy card



View which drugs are covered under your plan



Track how much money you have paid towards your out-of-pocket obligations

Walmart Home Delivery Pharmacy

Capital Rx's preferred home delivery provider is Walmart. Before prescriptions can be filled through Walmart Home Delivery, a profile needs to be setup through one of the following options.

SETUP BY PHONE

Call 1-877-542-2779 and follow the prompts for medications delivered to your home.

Mail a completed order form to
Walmart Home Delivery:
1025 W. Trinity Mills,
Carrollton, TX 75006

SETUP BY EMAIL

Email a completed order form to
WMSRX@wal-mart.com.

SETUP BY MAIL



DOWNLOAD AN ORDER FORM BY LOGGING INTO THE CAPITAL Rx MEMBER PORTAL.
BLANK FORMS ARE AVAILABLE UNDER 'FORMS AND DOCUMENTS'.





CAPITAL RX FAQ

Outlined below are some questions and answers to help you better navigate your pharmacy benefit offered by Capital Rx. For additional questions, please contact your dedicated Capital Rx Customer Care team at 1-877-542-2779. **PLEASE NOTE:** All online tools and customer care support will be available beginning July 1, 2022.

CAN I STILL FILL MY PRESCRIPTIONS AT MY PREFERRED PHARMACY WITH CAPITAL RX?

ANSWER: Capital Rx maintains a national network of more than 60,000 pharmacies including all national chains and most independent pharmacies. However, with some prescription benefit plans, certain pharmacies may be excluded from the network. To confirm the network status of your preferred pharmacy, please log in to our member portal and click on Nearby Pharmacies to find a pharmacy near you.

HOW DO I KNOW WHAT MY OUT-OF-POCKET COST (I.E., COPAY OR COINSURANCE) WILL BE WITH CAPITAL RX?

ANSWER: You can easily view expected medication cost by logging into the member portal and click the best price icon. Enter the name of the medication in the drug name field. Define specific options using the drop downs for type, form, dosage, and quantity. Click on the find lowest price icon. A list of local pharmacies will be provided along with the expected cost for the specified medication.

WHAT RETAIL PHARMACIES ARE CONSIDERED IN-NETWORK WITH CAPITAL RX?

ANSWER: You can locate an in-network pharmacy by logging into our member portal. Select Member Login to register. Use the pharmacy locator search tool to view local options.

HOW DO I FILL MY SPECIALTY MEDICATION?

ANSWER: If you are prescribed a specialty medication, you can quickly and easily order your prescription by following the steps below. You also have the option to fill at any in-network Specialty Pharmacy, if that is a more convenient option.

STEP 1

- E-prescribe: Have your doctor e-prescribe to: Walmart Specialty Pharmacy.
- Fax: Have your doctor fax your prescription to 1-866-537-0877.
- Please note: If prior authorization is required, additional steps may be needed to submit your prescription.

STEP 2 — A representative from Walmart Specialty Pharmacy will call you to get more information and schedule your first delivery.

STEP 3 — Your prescription will arrive when and where you've requested. After you enroll and your first delivery has been scheduled, Walmart Specialty Pharmacy will stay in touch over the course of your therapy and call with refill reminders or to address any questions you have about your treatment.

WHAT FORMULARY HAS BMSC SELECTED AND WHERE CAN I FIND WHAT MEDICATIONS ARE ON IT?

ANSWER: BMSC has selected the Capital Rx Freedom Formulary. This list of drugs is covered by your pharmacy prescription benefit. There are some drugs on this list that display as covered on the formulary but may not be covered if your plan does not include coverage of certain categories. You can check if your medication is covered by logging into the member portal and using the formulary look up tool.



WELLNESS PROGRAM



Lasting commitment to health and wellness means understanding that your well-being is a lifelong journey that begins with a single step. If we create habits that enhance our well-being and keep us motivated in the short term, then we will stay committed for the long term. BMCS wants to be your biggest supporter along that journey - that's why we are continuing BMCS wellness programs with the help of Aetna. Below is information on the Journeys online coaching program that gives you recommendations after you complete your health assessment.

What's Required?

Log-on or register for your secure member website at Aetna.com. You will be able to complete your health assessment through Compass.

Your Personal Health Report

Your health report gives you:

1. A risk score
2. Your top strengths
3. Your top health risks
4. Health risk grid

Personal Health Coach

Sure, it can be hard to fit healthy into your life. But we're here to support you every step of the way.

You get a line of digital coaching programs included with your health plan. All online — all personalized to your health goals — whether you're managing a health risk, overcoming an old habit ... or just eating healthier.

- You choose the goals to work on
- You choose when we reach you
- You choose the pace. You're 100 percent in charge

Where Do You Want To Take Your Health Today? YOU Decide.

- Beat back pain
- Stress less
- Quit tobacco
- Get heart healthy
- Manage asthma or diabetes
- Eat healthier, and more



Simple steps to fit you. Log in at
aetna.com, and look for the "Stay Healthy" icon.



MINDCHECK

Take Control Of Your Emotional Health

Your emotional health contributes to your overall health

Part of being healthy involves taking care of your feelings. For example, positive thinking is linked to health benefits that include:

- Faster recovery
- Better sleep
- Fewer colds
- Greater sense of happiness
- Longer lifespan

Find out where you stand

How do you feel? How do you want to feel? You can't plan a route to where you want to go until you know where you are.

The MindCheck online tool asks you four simple questions so you can be aware of how you're feeling. You'll be matched to a color and level to provide insight into your emotional health.

And the MindCheck site tracks your history, so you can see how your results change over time.

Now it's easy to take control of your emotional health. Simply go to mindchecktoday.com to get started.

Remember to check back often. The more you know about taking care of your emotional well-being, the healthier and happier you can be.



AETNA'S ABLETO

Manage Life's Changes

Some life events can be overwhelming. Like having a baby. Or finding out you have diabetes or heart disease.

You may also feel emotions like:

- Worry
- Confusion
- Depression
- Anger

All of these feelings are normal. But they can make it harder for you to take control and make healthy changes.

And it's important to feel that you can control the health condition or life change, instead of it controlling you.

Real Help That Works

Meet face-to-face with a therapist and behavior coach using online video. Or you can simply talk on the phone, if you prefer.

This removes the time and hassle of driving to appointments.

Plus, you choose the times that work best for you. During the day, in the evening or on weekends.

You'll work with two AbleTo specialists for eight weeks

- Once a week with a therapist to address emotional challenges like depression, stress and anxiety that can come with a medical diagnosis
- Once a week with a behavior coach to identify health goals and develop an action plan



AETNA INFORMED REWARDS PROGRAM

CHOOSE AN ELIGIBLE LOWER-COST MEDICAL SERVICE AND GET REWARDED!

Want to save money and get something back, too? Choose a lower-cost medical service, and you could qualify for a financial reward.

Earn \$25 to \$75

Most common health care services — such as MRI scans, X-rays, colonoscopies and ultrasounds — qualify for a reward. Reward amounts vary by service.

How does it work?

1. Log in to your Aetna member website at www.Aetna.com/about-us/login.html.
2. Search for service in the “Find Care & Pricing” section.
3. Identify eligible service and activate your rewards!

Aetna Informed Rewards

Get rewarded for smart choices
See other side for a list of services
and rewards.

It pays to save with Aetna Informed Rewards

Start earning rewards on these common medical services

Carpal tunnel release	\$75 reward	
Cataract removal	\$75 reward	
Colonoscopy	\$75 reward	Diagnostic, basic, preventive
CT scan	\$50 reward	Abdomen; arm, elbow, wrist or hand (upper extremities); chest region; head or neck area; knee or ankle (lower extremities); spine or pelvic region
Endoscopy	\$75 reward	Upper GI
Hernia repair	\$75 reward	
Mammogram	\$25 reward	Diagnostic or preventive
MRI	\$50 reward	Abdominal region; arm, elbow, wrist or hand (upper extremities); chest region; head or neck area; knee or ankle (lower extremities); spine or pelvic region
Tonsillectomy	\$75 reward	
Ultrasound	\$25 reward	Abdomen; breasts; pregnancy after 14 weeks
X-ray	\$25 reward	Abdomen; ankle; arm; chest; elbow; foot and toes; hand and fingers; hip; knee; leg; lower back; neck; pelvis; shoulder; upper back; wrist



CONTACTS

Medical plan

Aetna

Member services: (800) 293-3536

Informed Health Line: (800) 556-1555

Website: www.aetna.com

Telehealth

Teladoc

Customer service: (855) 835-2362

Website: www.Teladoc.com/aetna

Prescription services

Capital Rx

Customer Care Team: 1-877-542-2779

Website: www.cap-rx.com

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Final notes

This summary of benefits is not intended to be a complete description of Bucks and Montgomery County Schools Healthcare Consortium's insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Bucks and Montgomery County Schools Healthcare Consortium maintains its benefit plans on an ongoing basis, Bucks and Montgomery County Schools Healthcare Consortium reserves the right to terminate or amend each plan in its entirety or in any part at any time.

Please contact the HR department of your participating entity with questions regarding the information provided in this overview.

The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.

