

# The Partnership Plan, administered by Centivo



The Partnership Plan is designed to help you get the most out of your healthcare dollars. With the Partnership Plan, you will choose a Centivo primary care network doctor to help you navigate the healthcare system and coordinate your care. This type of partnership with a primary care doctor is widely recognized as the best way to deliver high quality care and excellent satisfaction.

When you activate and coordinate your care with your Primary Care Team, you'll get lower out-of-pocket costs for your healthcare, including:

- No deductible
- FREE visits with your Primary Care Team
- FREE preventive care, including an annual physical, immunizations, and screenings
- A simple copay for most other healthcare services, as long as you have a referral from your primary care doctor
- The security of a low out-of-pocket maximum in case you need a lot of care

## Getting the most out of your Partnership Plan

There are three steps to lowering your out-of-pocket costs with the Partnership Plan:

**Activate, Coordinate, and Engage.**

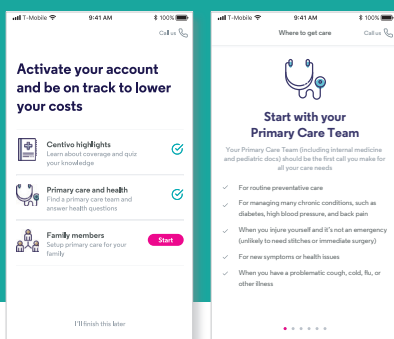
### Step 1: Activate

To qualify for Coordinated coverage, you must activate.

During activation you will:

- Learn more about the Partnership Plan and how to ensure Coordinated coverage levels
- Choose a Centivo primary care network doctor to lead your Primary Care Team for yourself, and do the same for any enrolled dependents (you may change your designated primary care doctor at any time during the year)
- Get your personalized Health Action Plan

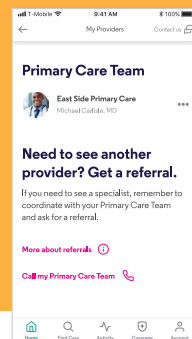
Dependents 18 and older can activate for themselves or you can activate for them.



### Step 2: Coordinate

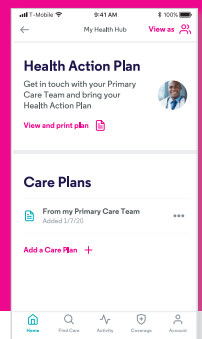
Make your Primary Care Team your first stop for all your care needs.

- Meet with your Primary Care Team to set your healthcare agenda and arrange preventive care and screenings. Be sure to bring your Health Action Plan with you!
- Always contact your Primary Care Team to get a referral before going to a specialist.



### Step 3: Engage

Follow your Primary Care Team's guidance on preventive care like immunizations and screenings. And adhere to your care plan(s) if you have any from your doctor(s).



It is your responsibility as the member to make sure that your Primary Care Team has submitted your referral to Centivo, prior to receiving care. You will be notified by Centivo once your referral has been accepted. If you do NOT get a referral from your Primary Care Team for care outside of your Team, your care will fall under the Uncoordinated coverage level and will cost you more.

# Referral guidelines

- Your Primary Care Team may refer you to a type of specialist, rather than to a specific doctor. Be sure that the doctor you schedule an appointment with matches the specialty listed on your referral. This information will be included in the message you receive from Centivo once your referral has been accepted.
- Referrals will be for a set period of time or number of visits.
- You do not need a referral for:
  - Urgent care visits
  - ER visits
  - Hospital admissions—but you must report your care to Centivo within 72 hours of admission
  - OB/GYN visits
  - Visits with behavioral health providers
  - Laboratory tests, x-rays, or therapies (occupational, physical, or speech)—but a physician must order or prescribe these services.\*

\*For therapies and advanced imaging, pre-certification is required. If lab tests, x-rays, advanced imaging, or therapies were ordered by your designated Primary Care Team or a specialist for which you had a referral, these will be billed at the Coordinated coverage level. Otherwise they will be billed at the Uncoordinated coverage level.

## The doctors you can see

You can find the full roster of Centivo primary care network providers in the Centivo app or the member portal at [my.centivo.com](https://my.centivo.com).

For specialty care, you have access to any doctors, hospitals, or facilities in the US. Your plan pays them through a payment method known as Reference-Based Reimbursement (RBR), in which payments to medical providers are based on what is considered fair and reasonable.



Raymondville Independent School District and Centivo have partnered with Advanced Medical Pricing Solutions (AMPS) to administer Reference-Based Reimbursement for your plan. Refer to the materials provided in your ID card mailing earlier this year or call the Centivo Concierge Team at [833-576-6490](tel:833-576-6490) for more information on Reference-Based Reimbursement.

# Your benefit summary

Here is a reminder of your benefits under the Partnership Plan. View the full plan details in the Centivo app or member portal in the Coverage section.

## COORDINATED

1. Activate plan online or by phone,
2. And get referrals for specialty care from your Primary Care Team.

## UNCOORDINATED

1. Do not activate, and/or
2. Use a non-designated primary care physician, and/or
3. Do not get referrals for specialty care.

Annual deductible (Individual/Family)	None	\$1,000/\$3,000
Out-of-pocket maximum (Individual/Family)	\$4,000/\$8,000	\$4,000/\$8,000
Preventive care*	FREE	FREE
Primary care office visit (w/designated Primary Care Team)*	FREE	\$35 copay (not subject to deductible)
Specialty care office visit*	\$25 copay	\$50 copay (not subject to deductible)
Diagnostic labs	FREE if ordered by your PCP; 20% coinsurance otherwise	20% coinsurance
Radiology services	20% coinsurance	20% coinsurance
Urgent care	\$25 copay	\$50 copay (not subject to deductible)
Emergency room visit, including freestanding emergency rooms	\$250 copay if true emergency; not covered otherwise	\$250 copay if true emergency (not subject to deductible); not covered otherwise
Outpatient surgery	No charge for professional services; \$300 copay for facility	20% coinsurance
In-patient hospital – facility charges only	No charge for professional services; \$500 copay for facility for surgical and medical admissions	20% coinsurance
Physical therapy	\$25 copay	20% coinsurance
Chiropractic care	\$25 copay	20% coinsurance
Annual vision exam (one per plan year – must be performed by an ophthalmologist)	\$25 copay	\$50 copay (not subject to deductible)
Annual hearing exam (only for children up to the age of 19)	\$25 copay	\$50 copay (not subject to deductible)

\* Lab work and diagnostic testing could be subject to separate charges.

## PRESCRIPTION DRUGS

Drug deductible	None
Generic drugs – retail or mail order	\$10 copay
Brand drugs on formulary	\$50 copay
Non-formulary brand drugs	Not covered
Specialty drugs (up to a 30-day supply; specialty drugs are restricted to Maxor Specialty Pharmacy)	20% coinsurance

For any questions, contact the Centivo Concierge Team at **833-576-6490**, Monday through Friday from 8 am to 8 pm ET. Access the app or member portal any time at **my.centivo.com**.