

# MedFirst Plan Review

Understanding the details and benefits of the MedFirst Plans

### **MedFirst Overview**

- Comprehensive healthcare options through First Health Network
- **Telemedicine** available across all plans
- Prescription Benefits and support tools
- Preventive Care through annual wellness exams
- Hospital Indemnity support

## **Key Features and Benefits**

**Telemedicine Services** 

**Prescription Discounts** 

**Preventive Care** 

Hospital Indemnity (varies by plan)

Healthcare Ninja Services through BestChoiceRX



## **Cost Management Tools**

**BestChoiceRX Group Discount Program** (BCRX)

**Prescription Assistance** System

**Hospital Bill Reducer** Support

### How BestChoiceRX Works

- 1. Enroll through First Health Network
- 2. Access telemedicine services with no consult fee
- 3. Utilize prescription discounts at participating pharmacies
- 4. Receive BCRX card
- 5. Manage hospital expenses with advocacy services
- 6. Enhanced Healthcare Access

### **Preventive Care and Wellness**

- Annual Wellness Exams Services
- Preventive Screenings Programs
- First Health Network provides comprehensive care

### **Telehealth Services**

- No Consult Fee
- Unlimited Access
- Virtual Consultations available
- **24/7 Access** to care

## **Advocacy and Support Services**

- Comprehensive healthcare advocacy
- Hospital Bill Reduction assistance
- Prescription Assistance options
- **Telemedicine** support

### MedFirst Wellness (1/2)

### **Physician Services**

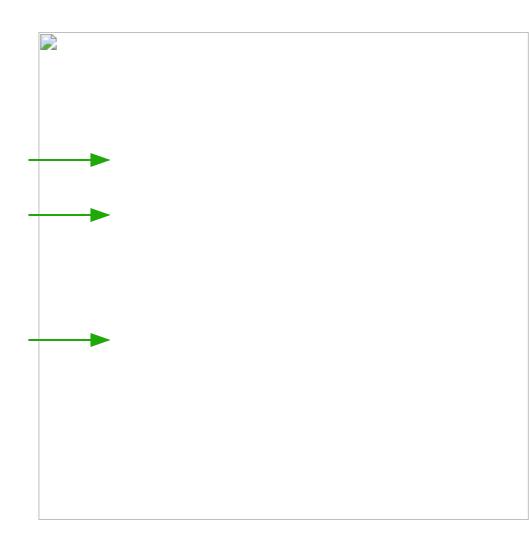
- One wellness exam per year
- \$25 co-pay, \$150 max per visit
- In-network providers only

#### **Telemedicine Services**

- No consult fee
- Unlimited access

#### **Prescription Discounts**

- Participating pharmacies
- Discounted rates



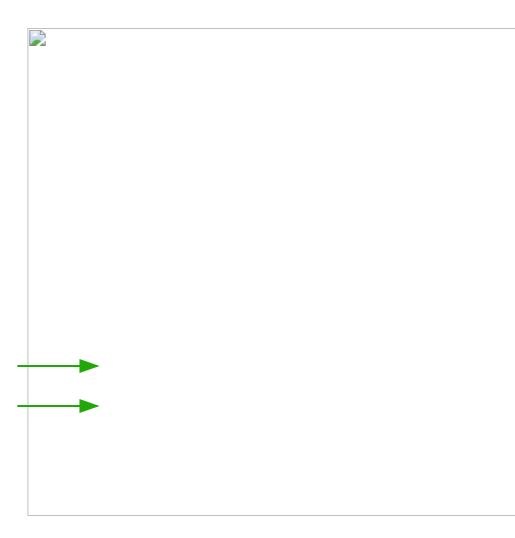
### MedFirst Wellness (2/2)

#### Limitations

- 30-day waiting period for sickness benefits
- In-network provider restrictions

#### **Exclusions**

- No inpatient hospital indemnity
- Services not listed in Schedule of Benefits



### **MedFirst 1 (1/2)**

### **Physician Services**

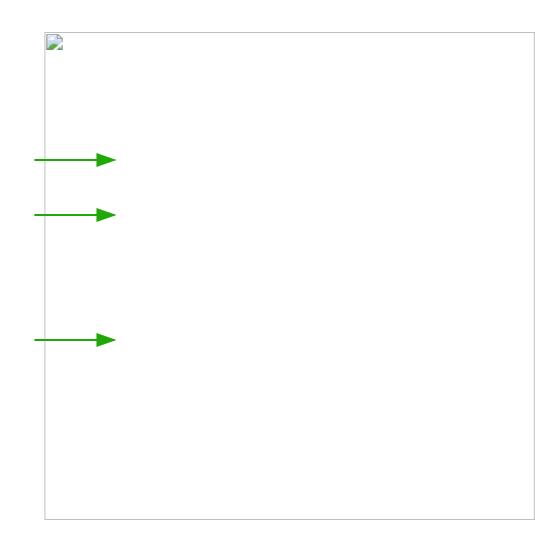
- Three primary care visits per year
- \$25 co-pay, \$150 max per visit

#### **Specialist Visits**

- One visit per year
- \$50 co-pay, \$300 max per visit

#### **Hospitalization Benefits**

■ \$1,000 per day, \$5,000 max per year



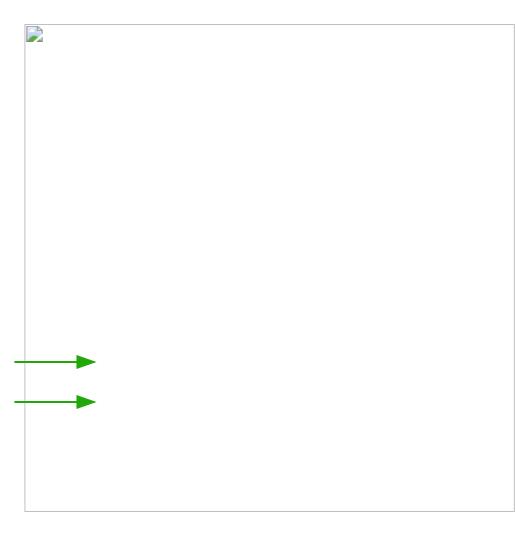
## **MedFirst 1 (2/2)**

#### **Telemedicine Services**

- No consult fee
- Unlimited access

### **Prescription Discounts**

- Participating pharmacies
- Discounted rates



### MedFirst 2 (1/2)

### **Physician Services**

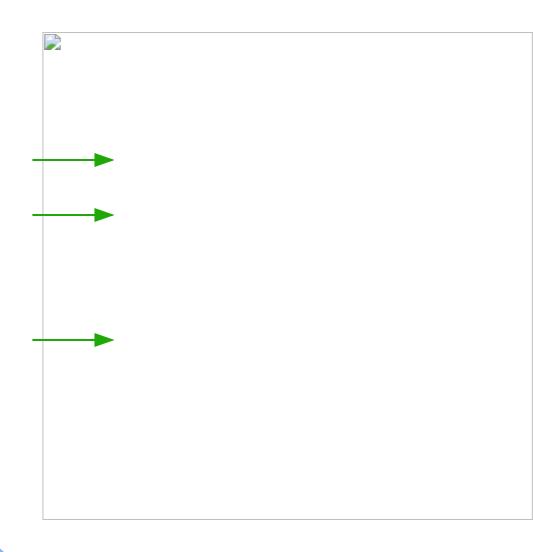
- Four primary care visits per year
- \$25 co-pay, \$150 max per visit

#### **Specialist Visits**

- Two visits per year
- \$50 co-pay, \$300 max per visit

#### **Hospitalization Benefits**

■ \$1,000 per day, \$10,000 max per year



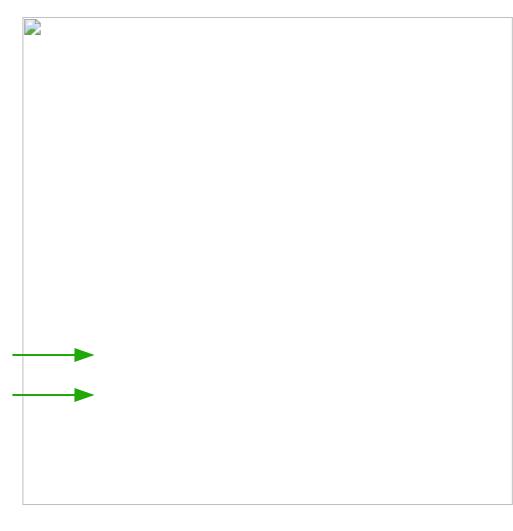
## MedFirst 2 (2/2)

#### **Telemedicine Services**

- No consult fee
- Unlimited access

### **Prescription Benefits**

- Preventive and acute prescriptions
- \$0 copay for generics



### MedFirst 3 (1/2)

### **Physician Services**

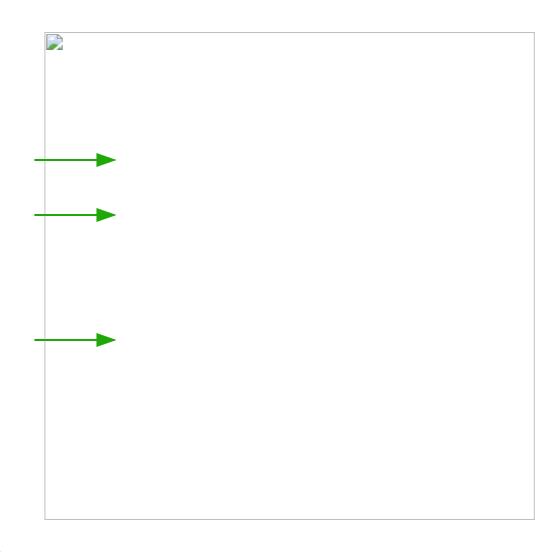
- Four primary care visits per year
- \$25 co-pay, \$150 max per visit

### **Specialist Visits**

- Four visits per year
- \$50 co-pay, \$300 max per visit

### **Hospitalization Benefits**

■ \$1,000 per day, \$15,000 max per year



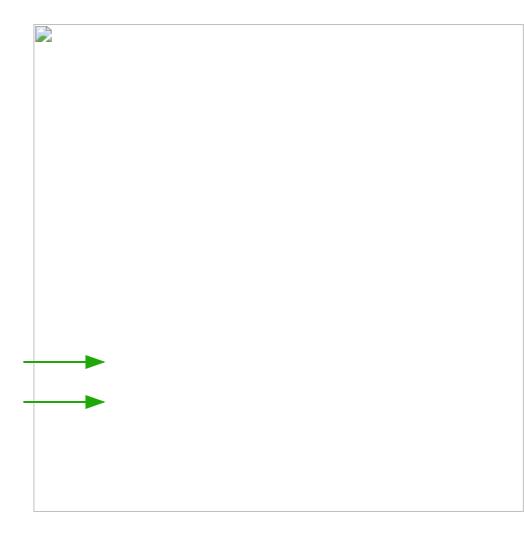
## MedFirst 3 (2/2)

#### **Telemedicine Services**

- No consult fee
- Unlimited access

### **Prescription Benefits**

- Preventive and acute prescriptions
- \$5 copay for preferred generics



### MedFirst 4 (1/2)

### **Physician Services**

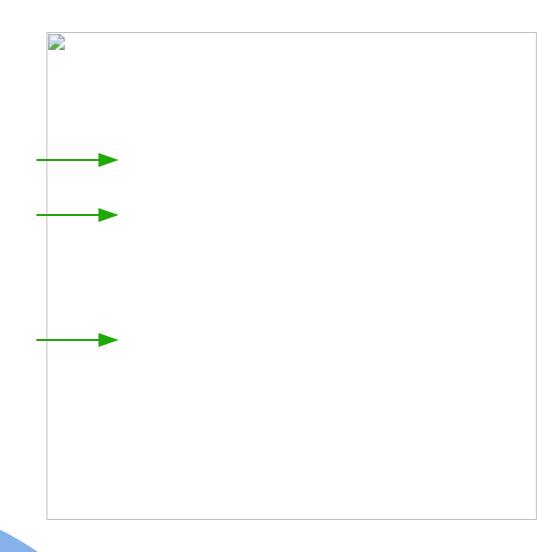
- Four primary care visits per year
- \$50 co-pay, \$150 max per visit

#### **Specialist Visits**

- Four visits per year
- \$75 co-pay, \$300 max per visit

#### **Hospitalization Benefits**

■ \$1,000 per day, \$10,000 max per year



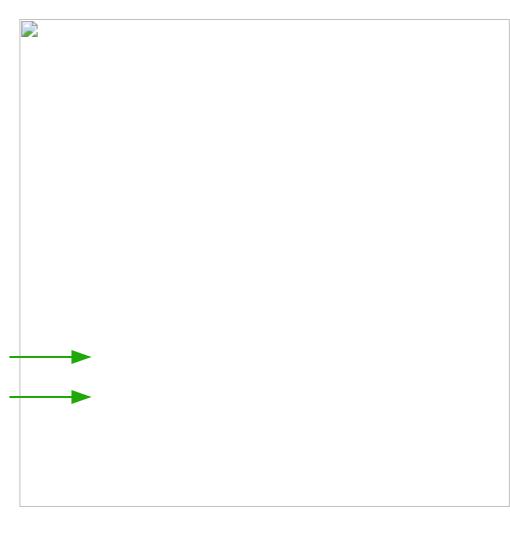
## **MedFirst 4 (2/2)**

#### **Telemedicine Services**

- No consult fee
- Unlimited access

### **Prescription Benefits**

- Preventive and acute prescriptions
- \$5 copay for preferred generics



### MedFirst 5 (1/2)

### **Physician Services**

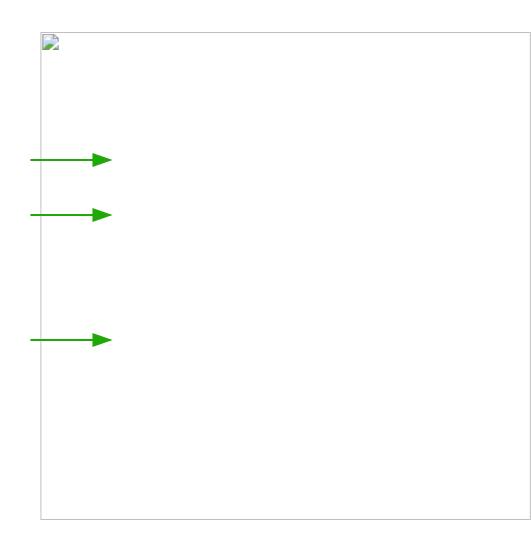
- Five primary care visits per year
- \$50 co-pay, \$150 max per visit

#### **Specialist Visits**

- Five visits per year
- \$75 co-pay, \$300 max per visit

#### **Hospitalization Benefits**

■ \$1,500 per day, \$15,000 max per year



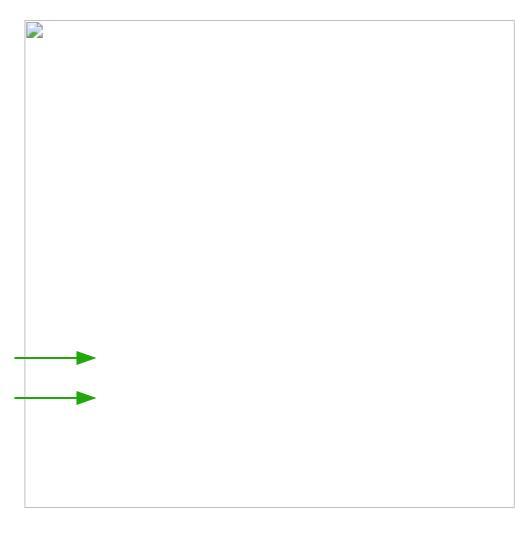
## MedFirst 5 (2/2)

#### **Telemedicine Services**

- No consult fee
- Unlimited access

### **Prescription Benefits**

- Preventive and acute prescriptions
- \$5 copay for preferred generics



## **Comparing the Plans**

Feature	MedFirst Wellness	MedFirst 1	MedFirst 2	MedFirst 3	MedFirst 4	MedFirst 5
Primary Care Visits	1	3	4	4	4	5
Specialist Visits	0	1	2	4	4	5
Hospitalization	Not Covered	\$5,000 max	\$10,000 max	\$15,000 max	\$10,000 max	\$15,000 max
Telemedicine	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Prescription Copay	Discount	Discount	\$0 for generics	\$5 for preferred generics	\$5 for preferred generics	\$5 for preferred generics

### **Definitions and Limitations**

#### **Waiting Periods**

- 30-day for sickness benefits
- Pre-existing conditions not covered for 12 months

#### **Provider Restrictions**

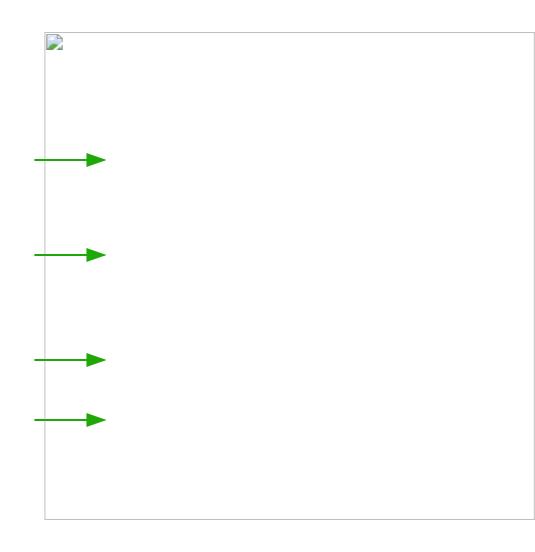
In-network only for outpatient services

#### **Exclusions**

Services not listed in Schedule of Benefits

#### **Screening Limitations**

At-home test kit required for colorectal cancer screening



## **Key Takeaways and Reminders**

- Telemedicine benefits across all plans
- Prescription Discounts included
- Preventive Care benefits
- In-network Provider required

# Thank You!

Continue to be great!

