Poseidon Water LLC **PPO Plan**

Effective 7/1/2023

Your Benemax Health Plan® Summary of Benefits

This information is a summary only. Please refer to the Plan Document, Subscriber Certificate and any amendments and/or riders for complete plan details.





PLAN DETAILS – Anthem Bronze PPO with Benemax

The Benemax Health Plan® integrates a fully insured component from Anthem and an employer-funded component from Poseidon Water LLC. into a single benefit package. The Anthem plan has an annual deductible of \$6,000 per member (\$12.000 family maximum). Poseidon Water LLC, via Benemax, pays the Anthem deductible in full on your behalf. All Anthem approved Rx drugs are covered at 100%.

Below is a brief reference of frequently used services and your final cost after your claims have been processed by both Anthem and Benemax.

Covered Services	Your Cost – PPO
Routine office visits & tests	No cost
Routine eye exam (1 every 24 months)	No cost
Diabetic management services (first two visits per calendar year)	No cost
Office visits by your PCP, OBGYN, Nurse Practitioner	* \$0 co-pay
Office visits performed by Specialists or Chiropractor	* \$0 co-pay
Mental health or substance abuse treatment	* \$0 co-pay
Acupuncture visit (12 visits per year)	* \$0 co-pay
Urgent care & Telemedicine*	* \$0 co-pay
Short-term rehabilitation therapy (up to 60 visits per calendar year)	* \$0 co-pay
Emergency room visits (co-pay waived if admitted)	* \$0 co-pay
Diagnostic lab work & x-ray (non-routine)	* \$0 co-pay
Complex imaging (MRI/CT/PET)	* \$0 co-pay
Day surgery in hospital, ambulatory or surgical day care facility	* \$0 co-pay
Inpatient hospital services	* \$0 co-pay
Durable medical equipment	* \$0 co-pay
Prescription Drugs, **Approved by Anthem (retail and mail order)	* \$0 co-pay
Pediatric Dental Benefits (for members under age 19)	
Group 1: Preventive and diagnostic services (oral exams, x-rays)	No Cost
Group 2: Basic restorative services (filings, root canals, periodontal)	* \$0
Group 3: Major restorative services (tooth replacement, crowns)	* \$0

^{*} Represents services supplemented by your employer, via Benemax.

Out-of-Network services are combined with in-network services for the first \$12,000 of claims and will be paid the same as in-network claims, except for charges considered over usual and customary for the services provided; charges over usual and customary are the member's responsibility. For a listing of participating providers, visit https://www.anthem.com/find-care/ or call the number on your Anthem ID card. You may also call Benemax at 800-528-1530 for assistance.

PRESCRIPTION DRUGS (RX)



5103 1234 5678 9010

Members will receive a Benemax RX card at the beginning of the plan year. If you already have the Rx card it will be reactivated. This card allows you to purchase prescription drugs that are approved by Anthem and OptumRx, Anthem's pharmacy benefit manager (PBM), for zero copay.

**Only Anthem prescription drugs are covered.

For first time Rx Card users:



Activate your card!
Cards take 24-48 hours to
fully activate.
Rx refills ordered or charges
made before allowing this
activation time will result in
card rejections.



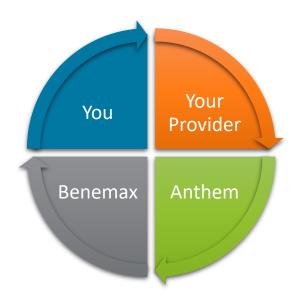
At the pharmacy, present your
Anthem ID card to ensure
coverage, then use your Rx Card
to pay the balance due. The card
functions as a credit card or you
can set up a pin during
activation. Pay for your Rx
separately from any other items.



**You can only use the Rx Card for Anthem approved prescription drugs. Buyer beware, the card will work for Rx drugs that are not covered under your Anthem medical plan. Post audits are conducted. You will be asked to repay the plan for any Rx that was not covered by Anthem.

HOW YOUR HEALTH PLAN WORKS

The chart below will help you understand who pays for what and when.



You or a member of your Family visits your provider (doctor/ hospital) and shows both their Anthem ID card and their Benemax RX card

Your Doctor or Provider will bill Anthem.

Anthem will process your claim, notify your provider, and send a Claims Summary to you and your provider.

When you receive your Anthem claims summary or a provider bill, consider this bill.

NEED HELP?

? Questions

Your company's designated Independent Member Advocate (IMA) is **Nora Jarboe**. Her direct line is **508-242-6127** and her e-mail is **benemax.service@onedigital.com**.

However, all our IMAs can handle your benefit questions and claims issues. Best of all, our advocates work for you— not the insurance company—so your interests are our only priority.

Simply call **800-528-1530** and press prompt 3 or email benemax.service@onedigital.com.

☑ Claim Submission

Members and providers may submit claims using any method below. Send us an EOB or a copy of the Provider Bill. You may also upload an electronic claims submission, email benemax.claims@onedigital.com, fax 508-242-6198, or mail to Benemax, PO Box 950, Medfield, MA 02052.

► TELEHEALTH SERVICES

Your Anthem plan also includes coverage for certain medical and behavioral health services via telehealth online video visits. Anthem telehealth enables you to see a doctor using your mobile device or computer. During an Anthem Blue Cross Blue Shield virtual visit, telehealth doctors can treat common health issues like a cold, the flu, a fever, rashes, allergies, and more. To request a telehealth visit, log in to your Anthem account and choose "Virtual Visit." You can also download the SydneySM Health mobile app. The Sydney app will connect you to a doctor through a virtual chat session or a virtual video session.

https://www.anthem.com/find-care/

*Telehealth visits are charged at time of service. The cost for a visit is consistent with the cost of an in person visit to the provider type you see (PCP/Specialist). Benemax will automatically reimburse the cost of an Anthem approved Tele- health visit to the extent that it exceeds the member's cost shown on your benefit page. More information can also be found at the Benemax Virtual Benefit Manager.

ONLINE RESOURCES

Virtual Benefit Manager®

Virtual Benefit Manager (VBM) offers online customer service and information.

www.mybenemax.com



Claims ConnectionTM

Claims Connection allows you to check your FSA/DCA balances or submit a claim for reimbursement if you pay out of pocket.

To access the site: Click here

BENEMAX WELLNESS

Benemax Wellness puts everything you need to get fit, stay healthy and use health care wisely right at your fingertips. Simply log on to www.mybenemax.com, and click on the Wellness tab.

With Benemax Wellness, you can check your symptoms, find the right doctor, get a free medical second opinion, learn how to make informed healthcare decisions, track your diet and exercise, record results of an exercise or eating program, and find steps to stop smoking.



Get Educated

Learn how to make informed healthcare decisions.



Track Diet & Exercise

Want to track your efforts to eat healthy, lose weight and exercise?



Check My Symptoms

What symptoms are you experiencing? What might be causing them? Should you seek treatment? If so, when and where?



Stop Smoking

Do you wish you could stop smoking? Benemax offers helpful resources that include not just information, but also tools to help you achieve your goal.



Find the Right Doctor or Hospital

Need health care? Find the doctor or hospital best qualified to meet your needs.

