



You Have the Vault Reference-Based Pricing Plan

No network. You're free to go to any provider for services.

Vault Health Plans give you the ability to choose the provider you want without restrictions. There are no preferred providers or networks required. You will never be penalized for seeing an out-of-network provider because there is NO network!

Reimbursement to your health care providers is based on a specified percentage above Medicare levels. You will not be responsible for balance billing from providers who do not accept the reimbursement as full compensation.

Please check with your providers before receiving care to see if they will accept Medicare reimbursement "plus" as payment in full for your health services. Physicians and facilities providing your health care are reimbursed at the levels shown on your health plan ID card. Providers should call the benefits and claims status number on the ID card.

- ▶ Check out the other side of this flyer for a list of the other great benefits you can get with your Reference-Based Pricing Plan.



Vault Reference-Based Pricing Plan Includes a Telehealth Benefit

Access Your Telehealth Benefit

You can see a doctor from your phone or laptop 24/7. Your plan has the Cura TeleHealth & Wellness benefit.

Telehealth is an efficient way to manage most acute and chronic conditions without having to go to a doctor's office. The cost is covered by your health plan or, if you have an HSA, it's a low-cost alternative to an office visit.

Call 620-740-2872 to register.



Vault Reference-Based Pricing Plan

You have questions, we have answers

Here are a few common questions asked about the Reference-Based Pricing Plan.

Q. Can I really see any provider I choose — even if that provider isn't a part of a PPO network?

A. YES! The Reference-Based Pricing Plan allows you to see the provider YOU choose. There are no preferred providers or networks required.

Q. Will I still receive the value of PPO-like prices?

A. YES! The Reference-Based Pricing Plan pays providers based on a percent above the Medicare allowed price for your medical services. This is set at a level that is acceptable for most providers while providing you with excellent discounts.

Q. What happens if I get a balance bill from my provider?

A. Vault plan members are responsible only for copays, deductibles and coinsurance as shown in the Explanation of Benefits. Members are not responsible for any balance billing from providers who might not accept the reimbursement levels of the plans.

The Elite Experience Team can help you if you receive a balance bill from a provider. The team will work with providers to make sure you only pay your copays, deductibles and coinsurance. You can contact our Elite Experience Team at 866-332-1987 or send an email to elite@alliednational.com.

