



PALIC Member Guide

Your Health Plan is simply a bundle of products that when stacked together provide comprehensive health coverage at significantly lower prices and keeps you out of the penalty. It is NOT an “all in one” - that is Obamacare with all of its problems. In order to get the most out of this plan, it takes a little effort on behalf of the member. It is very important that you read the **Outlines of Coverage** so that you better understand the coverage. However, while it may take a little getting used to, the plan is simple and will save you a ton of money. It consists of the following:

1. Preventative and Wellness (Minimum Essential Coverage or MEC)

- It provides you Wellness and Preventive services and keeps you ACA compliant so that you stay out of the tax penalty (see [brochure](#) for details).
- If you have not yet enrolled in the MEC, contact your agent.
- Network: You can go to any doctor but using a network provider will lower your out of pocket costs. **The network directory of primary care physicians can be found at this link [PHCS/Multiplan network](#)** or you can call 888-342-7427 to find a doctor. Make sure your provider knows that you have **PHCS/Multiplan** - - that’s where the provider files the claim or if using an out of network doctor you may choose to negotiate a cash patient rate and get reimbursed. If your doctor is not in the network, they can be added by following the credentialing process at this [link](#) or the provider can call 800-950-7040.
- **Your electronic ID card will be emailed to you, only.** You will receive your cards in the **Primary applicant’s name only.** The administrator of the MEC is Caprock. The administrator of the preventative Rx benefits is WellDYNE. Simply show your ID to your Primary Care Physician at point of service and the rest is handled for you. Enroll 1st will be the name on your bank or credit card draft.
- You will receive a **1095 form to file with your taxes** to provide proof that you met the requirements of the Affordable Care Act individual mandate.

2. Illness and Injury Comprehensive Health coverage from Philadelphia American (PALIC)

Benefits:

- **The Fixed Benefit health plan provides you coverage for inpatient and outpatient services.** You can use any provider you want, but using a network provider lowers your out of pocket costs. The network directory can be found at this link [PHCS/Multiplan network](#) or you can call 888-342-7427. If your doctor is not in the network, they can be added by following the credentialing

process at this [link](#) or the provider can call 800-950-7040. There are over 100,000 facilities and 800,000 providers nationwide.

- **Doctor/Hospital:** Remember, when you go to see a physician or hospital for an injury or illness you will receive a fixed benefit for each visit. That means any difference will be your out of pocket cost. If in network, simply show your card and you will be responsible for the amount over and above your plan's fixed benefit. If using an out of network doctor, you may choose to negotiate a cash patient rate, file a claim and get reimbursed your fixed amount.
- **Prescription Discounts:** Included in the Fixed Benefit product is a prescription drug discount benefit. You can look up the discounts by pharmacy and download an ID card at [Script Save](#) and enter group code #2242. The differences in costs can be substantial. Here is some helpful information including [Where to find the Scriptsave website](#).
An addition to the card that comes in the policy, [where to get a member ID card](#).
[Answers to FAQ's](#).
[Other discounts included with the card](#) including discounts for Diagnostic Imaging, Diabetic Supplies, Gym Membership, Hearing, Hearing Aids, Lab Tests, Vision and Lasik.
[List of Preferred Medications](#) that provide great discounts.
- **Mild Illnesses:** Also included is the [Teladoc benefit](#) at no additional premium or copay to use if you are sick. It will save you a ton of money and time from not having to go to the doctor's office when you have a simple illness like cold or flu. You will receive information in your policy or you can call 1-800-TELADOC. Physicians are available by phone or Skype 24/7/365. You have unlimited use of this benefit at no cost. Here is some additional helpful information on Teladoc:
[How Teladoc works](#).
[What kind of health care issues can it be used for?](#)
[Answers to FAQ's](#).
[A video to help members understand the benefits](#).
[A video to help members understand how to use the mobile app](#).

Claims:

- **Your PALIC IDs cards and policies will be mailed directly to you. You will receive separate policies and ID cards for each plan you have stacked and you should receive them 7 to 10 working days after your approval date. You should read your all policy information carefully.**
- To file a claim with PALIC simply complete a [claim form](#), attach the medical bill and submit to PALIC. You can find [claims instructions](#) here. However, you can also simply provide the provider your ID card and have the provider file the claim. Your choice. **Make sure your provider knows that you have**

PHCS/Multiplan – that’s where the provider files the claim, not the insurance company.

When a claim is filed (either by you or the provider), PALIC automatically processes the claim against all of the policies that you have stacked together. That way you only have to file the claim once.

- Don’t forget this definition: ***“Pre-Existing condition means a condition for which medical treatment was rendered or recommended by a Physician or for which drugs or medicine was prescribed within 12 months prior to a Covered Person’s Effective Date. A condition shall no longer be considered a Pre-Existing Condition after the date a person has been covered under this policy for 12 consecutive months.”***

Additional Benefits:

- Critical Illness coverage pays cash in the event that you are diagnosed with a critical illness such as cancer, heart attack, stroke, etc. Here are the Critical Illness [claim instructions](#).
- Accident and Disability pays a cash benefit in the event of an accident and a cash income in the event of a disability due to an accident. Here are the Accident [claim instructions](#).
- Out of Pocket/Deductible protector, Life insurance with Critical Illness, and stand-alone Cancer coverage is also available
- Dental, Vision (including LASIK), and Hearing all use the [Careington network](#).

Billing:

Once your policy is approved, your checking account will be drafted and will continue to be drafted each month at that same time. Keep in mind that the first draft includes the one time only application fee(s). Everything is billed separately so that you can easily add and subtract pieces of your plan as you see fit.

3. Prescription Drug Plan- PRAM Rx Envision

- If you purchased the optional Prescription Drug plan, this plan is fully insured and guaranteed issue (no underwriting and full take-over). There is both retail as well as mail order options.
- There is an extensive national network including 100% of chain pharmacies and nearly all independents (66,000+ pharmacies in total). Members can look up local pharmacies by registering as a member on RxEDO’s site located here: [RxEDO Member Login](#) (you will also have access to the formulary specific to your plan).
- Remember, even if you did not purchase this optional insurance drug coverage, your plan includes the ScriptSave Rx discount card.