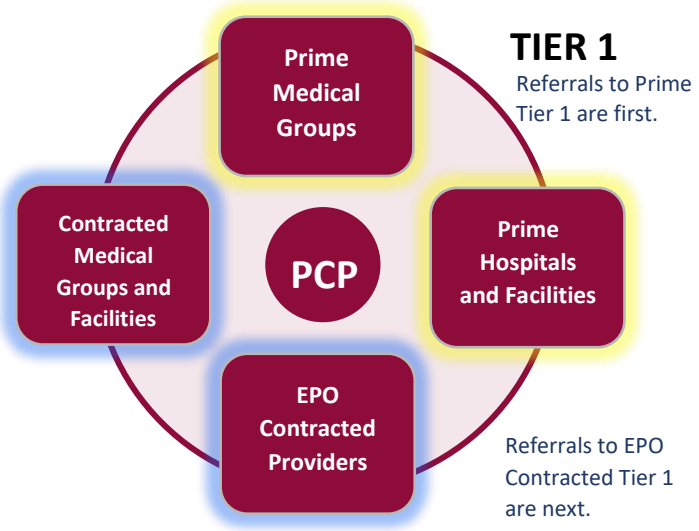
A Quick Overview for Providers

Prime Healthcare EPO Plan

Prime Healthcare
Saving hospitals. Saving jobs. Saving lives.

Plan Structure and Flow

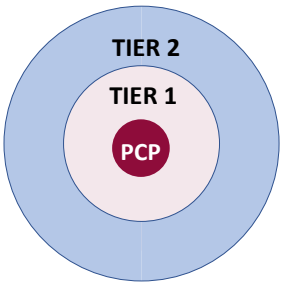
A **Primary Care Provider (PCP)** takes care of Members and refers them for medical services as needed. When Members go to their PCP and other Tier 1 Providers, they receive almost all care at no cost with no need for advance approval.



TIER 1
Referrals to Prime Tier 1 are first.

Referrals to EPO Contracted Tier 1 are next.

Tier 1 is made up of two kinds of Providers: 1. Prime medical groups, hospitals, and facilities, and 2. Contracted Providers, medical groups, and facilities. Because the Prime EPO Plan is self-funded, **services received from Prime Providers bring Members the greatest benefits at the lowest cost.**



If a Member requires medical services not available in Tier 1, their PCP or Provider will refer them to Tier 2.

Tier 2 is made up of Blue Cross Blue Shield plan Providers contracted by Prime to serve EPO members. **Services in Tier 2 always require referral and approved prior authorization.** Services must be approved *before Members receive them* to be covered under their plan.

To reduce Member costs**, 1.5 Benefits** allow Members to receive Tier 2 services at Tier 1 rates when some services are not available in Tier 1 or Tier 2**. Approval and prior authorization are always required before you can be covered for 1.5 Benefits.**

When Prior Authorization is required, always be sure to get UM approval before providing medical services.

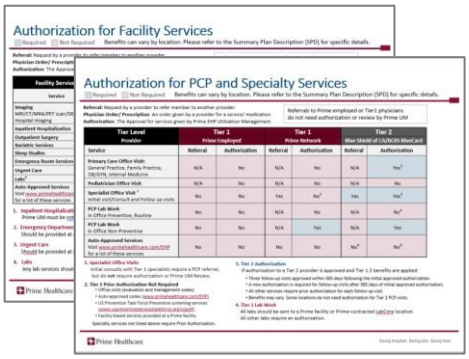
The Prime EPO is a nationwide plan. Based on differing availability of providers in the communities we serve, your benefit tiers may vary slightly from what is shown above.

Tips that can help make the Prime EPO easier to use

1. Remember, and remind Members, that they have an EPO plan and may require authorizations before receiving care. Also discuss treatment options covered under the EPO plan.
2. Follow plan requirements carefully to help Members receive their full benefits and not incur extra costs.
3. If you are unsure about what to do, please ask *before you provide services or refer.* You can get help from Customer Service. Contact information is on the other side of this page.

Prior Authorization Requirements

The details about how and when to receive authorizations are covered in two charts. They include definitions for some common health benefit terms. The columns list services and the type of Tier Provider that Members would visit to receive them. Color coding shows which services need or don't need authorizations. Finally, footnotes provide additional information about specific requirements.



The charts are expanded and explained as part of a brief video presentation available online at www.primehealthcare.com/EHP.

How to Get Support and Service

Knowing who to contact makes it easier to get the help you need.

Prime Healthcare is your benefits plan.

Prime Customer Service: 877-234-5227
Prime EHP Website: https://www.primehealthcare.com/EHP
Prime provides authorization, referral, and care coordination, and can tell you the status of referrals and prior authorizations. Please contact us for urgent and retroactive authorization requests. We oversee inpatient admissions, discharge planning, transfers, and clinical appeals.

Keenan is your benefits manager.

Keenan Customer Service: 888-773-7218
Call Center Support M-F 6:00 am to 5:00 pm PST
Keenan MESA 24/7 Online Access: https://keenan-mesa.javelinaweb.com
Keenan oversees member eligibility, issues benefit verification for providers, claims, appeals, copay, co-insurance, deductible, EOB questions, Provider Finder assistance and coordinates requests for duplicate medical ID cards. Many services are available online at the Keenan MESA portal.

Optum Rx is your pharmacy benefits manager.

Optum RX Customer Service: 866-339-3731
Administers our prescription drug plan. You can create an account by visiting https://www.optumrx.com

How to Learn More about the Prime EPO Plan

A video presentation especially for Providers clearly explains EPO plan processes and requirements. It is available at www.primehealthcare.com/EHP.