

PAYER NOTICE



The Midwest Network Alliance wishes to inform you of a new arrangement with a Payer or of changes in an existing arrangement with a Payer. Issued 12/28/2022.

The Midwest Network Alliance Network has entered an agreement with Faith Regional Health Services to offer two medical plans to its employees effective Jan. 1, 2023. The plan includes one PPO offering and one Qualified High Deductible Health Plan.

AGREEMENT: FAITH REGIONAL HEALTH SERVICES EMPLOYEE PLAN

EFFECTIVE DATE: 1/1/2023

FEE SCHEDULES: MIDWEST NETWORK ALLIANCE

EST. NUMBER OF COVERED LIVES: 2,200

THIRD-PARTY ADMINISTRATOR: FIRST CHOICE HEALTH

PHARMACY BENEFIT MANAGER: OPTUM RX

BENEFIT DESIGN

- TIERS**
- Tier One: Domestic Tier
 - Tier Two: MNA/Direct Contracts
 - Tier Three: Wrap Networks
 - Tier Four: OON

- MEDICAL PLANS**
- One, PPO
 - One, QHDHP



BENEFIT: PPO #1	Tier I	Tier II	Tier III	Tier IV
Deductible (S/F)	\$750/\$1,500	\$3,000/\$6,500	\$5,000/\$10,000	\$8,000/\$16,000
Coinsurance	10%	20%	30%	50%
Out-of-Pocket	\$2,500/\$5,000	\$6,500/\$12,000	\$10,000/\$20,000	\$16,000/\$32,000

BENEFIT: QHDHP	Tier I	Tier II	Tier III	Tier IV
Deductible (S/F)	\$1,500/\$3,000	\$4,500/\$9,500	\$6,000/\$12,000	\$8,000/\$16,000
Coinsurance	10%	20%	30%	50%
Out-of-Pocket	\$2,500/\$5,000	\$6,500/\$12,000	\$12,000/\$24,000	\$16,000/\$32,000

SAMPLE ID CARDS

Member

Member Name: JOHN SAMPLE

Member ID: SMPL00-01

Group Name: Faith Regional Health Services

Group #: A1100

Pharmacy Plan

Rx BIN: 610011
Rx PCN: IRX
Rx GROUP: RXBENHOSP

Rx Help Desk: (800) 880-1188
Rx Customer Service: (800) 334-8134
OptumRx.com

Plan Information

Plan Name: PPO Medical Plan

Medical Deductibles:

Tier 1:	Individual / Family
Tier 2:	\$750 / \$1,500
Tier 3:	\$3,000 / \$6,500
Tier 4:	\$5,000 / \$10,000
Tier 4:	\$8,000 / \$16,000

Medical / Rx Out-of-Pocket:

Tier 1:	Individual / Family
Tier 2:	\$2,500 / \$5,000
Tier 3:	\$6,500 / \$12,000
Tier 3:	\$10,000 / \$20,000
Tier 4:	\$16,000 / \$32,000

Contact Information

First Choice Health Customer Service:
(833) 542-2606
www.fchn.com/mfc

Pre-Authorizations: (800) 808-0450
Behavioral Health: (800) 640-7682
EAP: (800) 801-4182
Out-of-Network Providers: (833) 375-0121

Pre-authorization: Inpatient admissions and certain outpatient services require pre-authorization. Please refer to your Summary Plan Document for details.

Medical Claims Submission

EDI Payer ID: 91131

First Choice Health
PO Box 12659
Seattle, WA 98111-4659

This card does not guarantee coverage. If you have any questions regarding benefit coverage, claims, or eligibility please call First Choice Health or visit www.fchn.com.

Networks

Midwest Network Alliance
MidwestNetworkAlliance.com

MidlandsChoice.
www.midlandschoice.com

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