



Vālenz® MEC Solution
FAQs for Members



The information you need to manage your health.

Welcome! We are pleased to welcome you to your new health benefit plan, complete with **Vālenz® MEC Solution**, a new approach that allows you to freely choose among providers and facilities, rather than being restricted by a network.

As a new member, you are likely to have questions. This guide is designed to introduce you to **Valenz MEC Solution**, while answering some of the most common questions we receive.

What is Valenz MEC Solution?

Your new health plan provides minimum essential coverage (MEC) for healthcare services covered under the Affordable Care Act (ACA), including preventive services. In addition, we are pleased to offer Valenz MEC Solution, which allows you to freely choose the medical providers and facilities you prefer.

Will I Receive a New ID Card for Valenz MEC Solution?

Yes, you will receive a new member ID card with the additional details about your health plan and Valenz MEC Solution. You simply submit your new ID card to your provider of choice at the time of your visit. All the information your provider needs for submitting claims is on this ID card. Use the phone number and web address on your ID card to find additional information about your benefits, view claims and ask questions.

Why Valenz MEC Solution?

We are offering the Valenz MEC Solution contracting and reimbursement solution to guide you to higher-quality, lower-cost healthcare. Your health plan, together with Valenz MEC Solution, can reduce your out-of-pocket costs while delivering the preventive services you need to stay healthy. Valenz MEC Solution offers a new level of transparency to ensure you are paying a fair and reasonable price for your care.



Which Provider Can I Choose?

Anyone. That is the core benefit of Valenz MEC Solution. You may select the provider or facility (hospital, surgery center, etc.) of your choice.

May I Continue to See My Current Provider?

Absolutely, and you can continue to use your existing pharmacy and other facilities of your choice.

How Will I Know If My Provider is "In-Network"?

Unlike health plans that offer a specific network of providers, our plan offers Valenz MEC Solution, allowing you to seek care and treatment for covered services under the plan from any provider.

Will My Benefits Change under Valenz MEC Solution?

No, you will not experience any change to your benefits or coverage, nor will you see any change in your out-of-pocket costs, such as the amount of the deductible and co-insurance/copay.

How does Valenz MEC Solution Work?

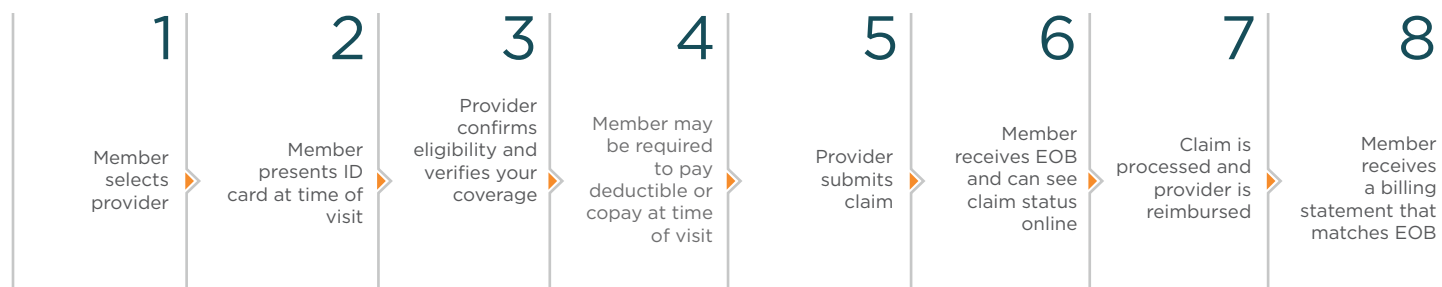
Simply present your member ID card to your provider at the start of your visit. Your ID card signals that your health plan provides preventive care and the MEC outlined in your summary plan description. At the time of your visit, you may be responsible for a copay or deductible as defined by your health plan.

Following your care, your provider will submit your claim, per the instructions on your ID card. Your claim will be processed for payment. Your provider will be reimbursed for physician and/or facility services. Once the claim is processed, you will receive an Explanation of Benefits (EOB) outlining your payment responsibility.



Do I Need to File My Own Claim?

Your provider will file the claim for you following the instructions on your member ID card. See the claim flow diagram for more information about how your claim is managed.



What Happens if My Provider Bills Me More Than What My Health Plan Paid?

This is often called “balance billing” or “surprise billing.” You paid your deductible at the time you received care and you understood your health plan was to cover the rest of the cost. Sometime later, you unexpectedly receive a bill directly from your provider for an amount beyond your responsibility (typically the amount your health plan didn’t pay). Should this happen, please call the phone number listed on your Explanation of Benefits and our partners will resolve the balance bill with your provider.

