2027 medical benefits from Centivo

A premium health plan, without the premium price.



THE ADVANCE MEDICAL PLAN

One doctor to guide your care	High-quality doctors	**FREE** primary care	No deductible	Predictable copays

It all starts with your primary care doctor.

With Centivo, you get access to trusted local doctors and hospitals, free primary care, predictable copays and no deductible.

Why does it cost less?

The **ADVANCE Medical Plan** is built around a simple idea: **better primary care leads to better healthcare.**

Your primary care doctor is your partner. They help you manage your health, coordinate your care and connect you with the right specialists when needed.

For most specialist visits, you'll start with a referral from your primary care doctor. This helps ensure you receive the right care at the right time, avoid unnecessary urgent care and emergency room visits and keep your costs lower.

See who's in the network

View plan details, search for providers and more. Scan or visit benjaminmoore.centivo.com.

Care from providers you know

Centivo partners directly with carefully selected local doctors and health systems. These partnerships allow us to offer access to recognizable providers at lower costs. Depending on where you live, you may recognize health systems like:

Penn Medicine · Mount Sinai · BaylorScott&White HEALTH · AdventHealth · RWJBarnabas HEALTH · CommonSpirit

Primary care, made easier

Centivo Care is your virtual primary care practice, giving you direct access to a doctor and care team who get to know you—not just your symptoms.

- Same- or next-day appointments—FREE
- Dedicated doctor and care team
- Preventive, sick and chronic care
- Integrated mental health care

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Coverage and cost highlights

	ADVANCE Medical Plan	
	In-network	**Out-of-network**
Network	Centivo Network	N/A
Primary care doctor selection required	Yes	No
Primary care referrals to specialists required	Yes, with exceptions*	No
Deductible (individual/family)	None	$6,000 / $12,000
Out-of-pocket max. (individual/family)	$3,000 / $6,000	$25,000 / $50,000
	No deductible and predictable copays.	**After you meet your deductible, you'll pay coinsurance % listed below.**
Annual physical, vaccinations and screenings	FREE	50%
Primary care (includes pediatricians)	FREE	50%
Centivo Care virtual primary care	FREE	50%
Specialist	$40 copay	50%
Behavioral health	$40 copay	50%
Basic imaging (such as X-rays)	$10 copay	50%
Advanced imaging (such as MRIs & PET scans)	$200 copay	50%
Outpatient surgery	$500 copay	50%
Inpatient surgery	$800 copay	50%
Urgent care (covered as in-network when away from home)	$75 copay	50%**
Emergency room (covered as in-network no matter where you are)	$200 copay	$200 copay

* If you don't visit your designated PCP for care or get a referral for specialist visits, your care will be covered as out-of-network. No referral needed for OB/GYN, behavioral health, urgent, emergency or chiropractic care, lab work, physical, occupational or speech therapy.

** If you are outside of the Centivo Network area, visit any urgent care and have your visit covered at the in-network rate ($75 copay). If you are in a Centivo Network area and choose to go to an out-of-network urgent care center, a 50% coinsurance applies.

Prescription coverage by Express Scripts

	Retail (up to 30-day supply)	**Mail order (90-day supply)**
Generic prescription – Tier 1+	$7 copay	$15 copay
Preferred brand prescription – Tier 2	20% coinsurance $40 minimum / $80 minimum	20% coinsurance $80 minimum / $160 minimum
Non-preferred brand – Tier 3	20% coinsurance $40 minimum / $80 minimum	20% coinsurance $80 minimum / $160 minimum
Specialty – Tier 4 (30-day supply only)	20% coinsurance $40 minimum / $80 minimum	N/A

+ A small number of generic drugs may fall under the preferred brand tier. Please check the prescription drug list or contact Express Scripts for any questions about specific medications.

Defining key terms:

Deductible: The amount you pay out-of-pocket before the plan pays towards your healthcare costs.
Copay: A fixed dollar amount you pay for a healthcare service or visit.
Coinsurance: The percentage of costs you're responsible for after you meet your deductible.
Out-of-pocket maximum: The most you'll pay for any covered healthcare and pharmacy expenses during the plan year.

Learn more at benjaminmoore.centivo.com or by calling **855-221-2421**.

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This document provides an overview of the plan offering. Information is not a complete description of benefits.

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