



HMO \$300

July 1, 2021 - June 30, 2022

Your employer, **The Town of North Reading**, has arranged for Reimbursement Specialists, Inc. (RSI) to administer the deductible and select copay portions of your Blue Cross Blue Shield (BCBS) HMO Blue New England Basic Copayment plan. RSI automatically receives claims information from BCBS on claims that have processed toward all eligible expenses. This information is then processed in our system and claims are paid as outlined below.

BCBS Out of Pocket Maximum:	Individual: \$5,000	Family: \$10,000
Member Out of Pocket Maximum Responsibility:	Individual: \$2,000	Family: \$4,000
Plan Out of Pocket Maximum Responsibility:	Individual: \$3,000	Family: \$6,000

BCBS Health Plan Deductible:

Individual: \$2,000 Family: \$4,000

Member Deductible Responsibility:

Member pays the first Individual: \$300 Family: \$900

Plan Deductible Responsibility:

Plan pays the remaining Individual: \$1,700 Family: \$3,100

Office Visit:	\$30 copay per visit
Specialist:	\$45 copay per visit
Emergency Room (waived if admitted):	Deductible then \$750 copay
Member Responsibility:	Deductible only; plan pays \$750 copay
Inpatient Hospitalization & Day Surgery:	Deductible then; \$1,000 copay
Member Responsibility:	Deductible only; plan pays \$1,000 copay
High Tech Imaging (MRI, CT Scans, PET):	Deductible then; \$1,000 copay
Member Responsibility:	Deductible only; plan pays \$1,000 copay
Diagnostic Tests, Labs & X-Rays:	Deductible then; \$25 copay
Member Responsibility:	Deductible only; plan pays \$25 copay

PRESCRIPTION DRUGS

Retail - 30 Day Supply	Tier 1: \$20 copay	Tier 2: \$40 copay	Tier 3: \$60 copay
Mail Order - 90 Day Supply	Tier 1: \$40 copay	Tier 2: \$80 copay	Tier 3: \$120 copay

The benefits shown here are a snapshot of the benefits provided by the Town of North Reading.
For a detailed explanation of your benefits see the BCBS benefit summaries.

HOW THE DEDUCTIBLE & COPAY PORTIONS OF THE BCBS HMO BLUE NEW ENGLAND BASIC COPAYMENT PLAN WORK

- ◆ **You and/or your family visit a provider (doctor, hospital, ER, etc.)**
 - Show your BCBS ID Card & RSI ID Card to the provider
 - You pay the copay only (if applicable) at the time of the visit
- ◆ **Provider:**
 - Bills BCBS
- ◆ **BCBS:**
 - Adjudicates claim
 - Notifies/pays provider
 - Sends a Summary of Health Plan Payments to you and your provider. The Summary is not a bill and should be saved for your records!
 - Sends a weekly report to RSI on your claim.
- ◆ **RSI:**
 - Issues payment to your provider directly for the Town of North Reading Plan's share of the deductible and select copays applied after the deductible.
 - Notifies you via RSI's Explanation of Benefits (EOB) of what the Town of North Reading Plan has paid.
 - You are responsible to pay your portion of the deductible to your provider as outlined in your RSI EOB.

Our RSI Client Advocate Claims Team is here to help you. If you or your doctor have a question regarding the plan, a specific claim or a bill please contact us

Phone: 855-493-9859
E-mail: claims@rsiadmin.com



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