

RCAB Health Plan – Services Subject to Co-Payments

As of October 1, 2018



The RCAB Health Plan provides coverage for certain services with a co-payment, for which no deductible is due and no balance-billing is permitted, as long as these services are received from a provider that participates in the Blue Cross HMO Blue New England network, or, for pharmacy services, from a pharmacy that participates in the CVS/Caremark network. A referral from a PCP and/or preauthorization, etc. may be required.

- Cardiac Rehabilitation
- Chiropractic Services (any age)
- Emergency Medical Outpatient Services (i.e., Emergency Room) – waived if followed by admission
- Office Visit with PCP, or OB/GYN or nurse midwife; physician assistant or nurse practitioner; chiropractor; registered dietitian nutritionist; or speech, occupational, and physical therapist
- Office Visit with Specialist (outside a hospital setting)
- Minute Clinic Visits
- Urgent Care Clinic Visits
- Telehealth Appointments
- Physical Therapy/Short-Term Rehabilitation Therapy (physical, occupational, speech therapy)
- Prescription Medications
- Diabetic supplies obtained under CVS/Caremark coverage
- Second Opinions

July 19, 2018

This list is intended as a guide to assist members in assessing out-of-pocket costs for various services. In the event of a conflict between this document and the official Plan documents, the Plan documents will govern.