

Population Science
Management

PLAN OVERVIEW

2024 - 2025

RBP PLAN

- RBP \$7,350 Copper



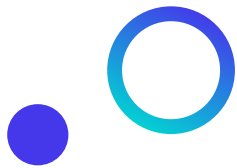
Group Name: Population Science Management of Tennessee

Effective Date: June 1, 2024

Network



PHCS Network is the largest independent, nationwide primary preferred provider organization (PPO). It is the preferred choice for health plans wanting a provider network with flexibility to meet their unique needs. Plans get administrative ease without sacrificing provider access, savings, and quality for health plan members.



1 MILLION+

PHCS Network includes more than one million health care providers nationwide!

Bringing You

STABILITY AND FLEXIBILITY TO AN EVOLVING MARKET



Flexibility and Administrative Ease

Health plans can customize the PHCS Network in almost any way needed, accessing nationwide or carving out specific geographies, excluding or including only specific provider types/specialties, as the primary PPO or to extend the service area of another network, with or without tiered in-network benefits. The PHCS Network can be used by itself or as part of a total solution that helps plans manage the cost of care with only one claim submission.

CONTACT US Our Care Guides are available from 7AM - 5PM CST to support your every need.



📞 866-815-6001

✉️ memberservices@detegohealth.com

TeleMedicine



MyLiveDoc
Your health, your time



24/7 ACCESS

- ✓ PRIMARY CARE
- ✓ URGENT CARE
- ✓ MENTAL HEALTH CARE

Connect with
**BOARD-CERTIFIED PHYSICIANS,
ANYTIME, ANYWHERE IN THE
UNITED STATES.**



**NO CLAIMS
OR COPAY**



**EVERY
STATE**



**CARE
COORDINATION**



**EXCLUSIVE
DOCTORS**

Concierge Support Services For any questions about your membership benefits:

 MyLiveDoc 855-226-6567

WE TREAT 50+ ROUTINE MEDICAL CONDITIONS!

- ACNE
- ALLERGIES
- COLD/FLU
- CONSTIPATION
- COUGH
- DIARRHEA
- EAR PROBLEMS
- FEVER
- HEADACHE
- INSECT BITES
- NAUSEA / VOMITING
- PINK EYE
- RASH
- RESPIRATORY PROBLEMS
- URINARY PROBLEMS
- AND MORE



Why Therapy?

- ALCOHOL / DRUGS / TOBACCO RELIANCE
- CHILD OR ELDER CARE MATTERS
- CO-DEPENDENCY
- EATING DISORDERS
- PHYSICAL / SEXUAL / EMOTIONAL ABUSE
- RELATIONSHIP CONCERNS
- STRESS AND ANXIETY
- WORK OR PERSONAL CONFLICTS

PRIMARY CARE

Same Day Appointments

Access a Virtual Primary Care appointment the same day of requesting it! Or, schedule when it's best for you.

Same Provider Each Visit

See the same provider each visit so that they can best understand your health needs and provide personalized care.

Annual Wellness Check

An annual wellness check can help you get on a better health trajectory, get a personalized care plan, and learn about your overall health!

URGENT CARE

Instant Access To Care

Virtual Urgent Care visits can be accessed as short as in 20 minutes! You can also schedule appointments when it best works for you.

In House Providers

See the same provider each visit so that they can best understand your health needs and provide personalized care.



MyLiveDoc

Your health, your time

MENTAL HEALTH THERAPY

Annual Visits

MyLiveDoc includes four mental health visits annually for each family member. Available to adults and adolescents 12 years and older.

Convenient Scheduling

Easy access to a licensed, Master's level counselor within 1-3 days. Should you need in-person care, our team is able to provide referrals when needed.

Same Therapist Each Visit

See the same therapist each visit to best understand your personal needs. Our counselors are trained in clinical assessments and care coordination.

Concierge Support Services For any questions about your membership benefits:

 MyLiveDoc 855-226-6567



MyLiveDoc
Your health, your time

Customer Care

MyLiveDoc
☎ 1-855-226-6567 (8AM-8PM EST)

ManifestRx (a ReviveHealth company)
☎ 1-888-770-4009 (8AM-5PM)



Member Portal

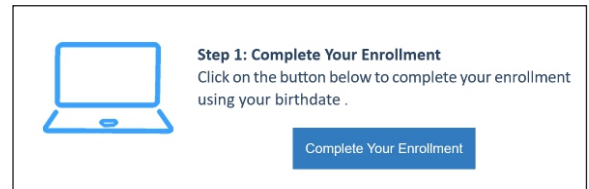
🌐 member.mylivedoc.net

How to Enroll

Step 1: Welcome Email

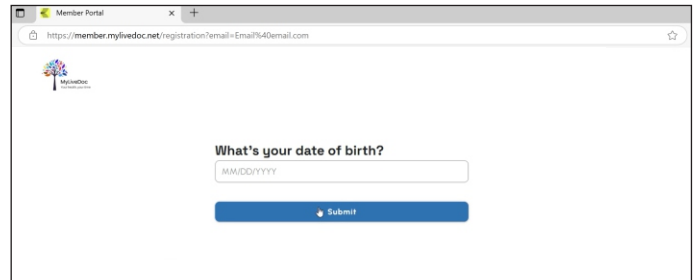
1. Login to the email you provided when you signed up for your Health Benefit Plan.
2. Look for an email from **no-reply@revive--healthcare.com** with the subject line **“Welcome to MyLiveDoc!”**
3. Click the **“Complete Your Enrollment”** link

Note: This link is unique with your information attached and cannot be shared with other users.



Step 2: Enter Your Information

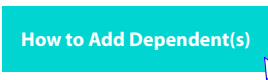
1. You will be directed to a website to complete your enrollment starting with your date of birth.
2. You will be prompted to enter some of your personal health information. *Note: You can do this now, or come back to it later!*



Step 3: Utilize Your Benefits

You can now access the benefits listed in your member portal and access your **Pharmacy Benefit Card**.

How to Add Your Dependents



Age 2 - Age 17
These will appear under the Primary Member's portal.

- Required Information:**
- First Name
 - Gender
 - Last Name
 - Language
 - DOB

Age 18 - 26
Once the Primary Member submits the required information, a Welcome email will be sent within 2-6 hours to these dependents. These family members can then register to access their own portal.

- Required Information:**
- First Name
 - Gender
 - Last Name
 - Language
 - DOB
 - Dependent's Phone Number
 - Dependent's Email

How to Access Your Pharmacy Benefit



Pharmacy Benefits



We offer innovative, cost-saving solutions beyond the PBM model. Our revolutionary healthcare model goes beyond traditional pharmacy benefit management to help build efficiencies, lower costs, and improve the overall quality of care.

Ventegra will be managing your pharmacy benefits through Detego Health®. Our goal is to make sure you have high-quality, affordable prescription drugs.

What does this mean for you?

Your new Member ID Card has arrived! This card has important information for your pharmacy. Show your new ID card next time you fill a prescription so Ventegra can start powering your prescription benefits.

Log into your member portal.

Set up your portal and make full use of its features. You can log into your new member portal at: myventegra.org

Contact our Customer Care Team.

Ventegra is committed to providing the best customer service and is here to help you with any questions related to your benefits.

Questions?

Please call our Customer Care Team 1-877-867-0943

Monday – Friday: 8:00 AM to 12:00 AM (ET)

Saturday: 10:00 AM to 10:00 PM (ET)

Sunday: 10:30 AM to 7:00 PM (ET)

If you reach us outside these hours, you can leave us a voicemail. We will respond to your question within the next business day. You can also email us at CCT@ventegra.org or live chat with our Customer Care Team by clicking the "Live Chat" button in the lower right corner at Ventegra.org.



Prescription Access Assistance



ScriptAide is the exclusive Pharmaceutical Advocate for Detego Health LLC® and provides prescription access assistance to our members. Our Pharmaceutical Access Coordinators specialize in researching ways to help our members get the brand-name medications they need and save them money. ScriptAide works directly with the member to see if they can get their medications through one of our 3 access programs: the Personal Importation Program (PIP), the manufacturer's Patient Assistance Program (PAP), and the Self-pay Personal Importation Program (SPIP). Call to check if you qualify to participate in one of our programs.



Personal Importation Program (PIP)

Through PIP, we compare pricing and import prescriptions from our Canadian pharmacies for **covered medications**, offering savings of up to 70%. For qualifying prescriptions, the co-pay is waived, making the medication free for the member. A valid prescription is required to participate.



Patient Assistance Program (PAP)

PAP is designed for members in the United States who require **non-covered medications** and **demonstrate qualifying financial need**. Those who qualify will receive their medications for free, with no co-pays or shipping costs. A valid prescription is required to participate.



Self-Pay Importation Program (SPIP)

SPIP is available to members in the United States who require **non-covered medications**. Through this program, individuals can import their prescribed medications at **their own cost**, typically saving 40-45% compared to U.S. pharmacy prices. A valid prescription is required to participate.

CONTACT US

866-837-1515

info@scriptaide.com

scriptaide.com

Pre-certification & Case Management



GuideCM is the exclusive Pre-certification and Case Management team for Detego Health LLC®. Pre-certification and Case Management are programs designed to help make sure you get the appropriate medical care at the best cost to you. Our staff works closely with you and your doctor to get the maximum benefit from your health benefit plan.

- ✔ **PRE-CERTIFICATION**
- ✔ **EMERGENT ADMISSION REVIEW**
- ✔ **CONCURRENT REVIEW**
- ✔ **RETROSPECTIVE REVIEW**
- ✔ **DISCHARGE PLANNING**
- ✔ **CASE MANAGEMENT**

Pre-certification

[Click here OR visit GuideCM.com for more information](#)

Pre-certification is a review process to ensure that the treatment is medically necessary and appropriate. **To avoid a penalty on a claim:** A pre-certification needs to be submitted before the service is provided or up to 5 days after the date of service. The most common services that often require pre-certification include:

- 1. Diagnostic Tests and Imaging**
- 2. Surgeries and Procedures**
- 3. Durable Medical Equipment (DME)**
- 4. Specialty Care and Therapies**
- 5. Mental Health and Substance Abuse Treatment**
- 6. Inpatient Care**

*Disclaimer: the list above is not to be taken as covered services. Call us at 866-837-1714 to determine the correct coverage based on your benefits plan.

**Note: Pre-certification is not a guarantee of payment or coverage. Please review your benefits or contact your benefits plan for details.

Case Management


Our Registered Nurse Case Managers use information from different sources to identify members who need case management. These sources include customer service phone calls, diagnosis reports, claims data, pharmacy claims data, and pre-certification reports.

One of our nurses works closely with you, your family, and your physicians to ensure that you have the information and support that you need. Whether you need specialized equipment, referrals, or simply a sympathetic ear, the nurse assigned to you can help you get what you need, when you need it.

CONFIDENTIAL

We respect the privacy of your personal health information. We are in full compliance with the current HIPAA regulations, and any information we receive from you or your physician will be kept strictly confidential.

CONTACT US

 866-837-1714

 info@guidecm.com

 guidecm.com

Diagnostic Imaging



Your health is important to us and we've contracted with Green Imaging to provide medical imaging services at no cost to you.



Scheduling your appointment



At your appointment



After your appointment

STEP 1

Have your physician send your order to Green Imaging.

Fax:

866-653-0882

or

Email:

info@greenimaging.net

STEP 2

Call Green Imaging at 844-968-4647 to:

1. Verify they received your order sent from your physician.
2. Find a Green Imaging location.
Please have your name and zip code ready.

STEP 3

Your Green Imaging Medical Concierge will schedule your procedure and send you a **voucher** for service.

The Voucher Covers:

The procedure fee
AND
The radiologist fee.

STEP 4

At your appointment, show your **Green Imaging Voucher**.

You will not: have a co-pay, and do not need to show your insurance card. Additionally, you will not be responsible for any bills you may receive in the mail.

* HSA Plans

STEP 5

The report from your exam will be sent to your referring doctor.

Referring physician has not received your exam report?

Call Green Imaging at 844-968-4647.

NO DEDUCTIBLE SERVICES AT DISCOUNTED RATES

- ARTHOGRAM
- BONE DENSITY (DXA)
- CT
- ECHOCARDIOGRAM
- MAMMOGRAM
- MRI (OPEN & CLOSED)
- NUCLEAR MEDICINE
- PET
- ULTRASOUND
- X-RAY

* Please note that imaging services performed by Green Imaging for the HSA plans are still subject to deductible.

Green Imaging services are subject to plan limitations. Please see your plan for details.

Diabetes Management



Detego Health® has partnered with Diathrive to get you diabetes supplies and coaching at no cost to you.

Diabetes testing supplies covered

100%

- ✓ DIATHRIVE+ GLUCOSE METER
- ✓ UNLIMITED TEST STRIPS
- ✓ CARRYING CASE
- ✓ LANCING DEVICE
- ✓ LANCETS
- ✓ INSULIN PEN NEEDLES
- ✓ METER SYNC TO DIATHRIVE HEALTH APP
- ✓ UNLIMITED CLINICAL SUPPORT FROM HEALTH ADVISOR



[Click here to sign up for your starter kit!](#)

Health Advisor

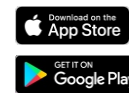
Unlimited clinical support and individualized diabetes care.

Our Health Advisors are Certified Diabetes Care and Education Specialists, ready to help.

Diathrive Health App

Diabetes management made simple.

- Sync your meter
- Diabetes education
- Reorder supplies
- Connect with your Health Advisor



Questions? Call Diathrive Customer Support today!

866-878-7477

support@diathrive.com

INSULIN PEN NEEDLES

Free & Unlimited Insulin Pen Needles

Available Sizes:

- ✓ 4mm / 32g
- ✓ 5mm / 31g
- ✓ 6mm / 31g
- ✓ 8mm / 31g

Compatible with most insulin pens.



Premium Features

- ✓ **Triple-Bevel Cannula**
Optimal perforation and easy penetration. So sharp you won't feel a thing!
- ✓ **Silicone Lubricant Coating**
Coated for a smooth, painless experience. Comfort unmatched by any other.
- ✓ **Thin Wall Technology**
Better insulin flow and less injection pain. Less pressure required for insertion and reduced risk of insulin leakage.

Ready to Order?

Call Diathrive Customer Service today! 866-878-7477

[Click here to sign up for your starter kit!](#)



Questions? Call Diathrive Customer Support today!

☎ 866-878-7477

✉ support@diathrive.com

Medical Equipment & Services



CONNECT
DME

Detego Health® has partnered with Connect DME to offer you home medical equipment and services at dramatically lower costs. Connect DME also offers in-home or in-facility sleep studies. The Home Sleep Study is performed by a respiratory therapist and interpreted by a board certified sleep physician.

Connect DME offers

6,000+

products including:

- ✓ JOINT BRACING SUCH AS KNEE, ANKLE, SHOULDER
- ✓ RESPIRATORY SUPPORTS SUCH AS CPAPS, BI-PAPS AND NEBULIZERS
- ✓ BREAST PUMPS AND ACCESSORIES
- ✓ THERAPY EQUIPMENT INCLUDING: DVT PREVENTION, COLD/HEAT THERAPY, CPM MACHINES, AND TENS UNITS
- ✓ SUPPORTS SUCH AS KNEE-WHEELERS, CRUTCHES, WHEEL CHAIRS AND WALKERS



CONTACT US Our Care Guides are available from 7AM - 5PM CST to support your every need.

866-815-6001

memberservices@detegohealth.com

Member Advocacy & Balance Bill Services



LET US ADVOCATE FOR YOU.

NaviClaim is the exclusive Member Advocate for Detego Health LLC®. As your health plan's partner, we review medical claims for potential errors, upon request, to make sure charges don't exceed your plan's limits.

Most providers will accept a fair payment from your plan. However, some providers may send you a bill for the difference between what your plan allowed and the amount they charged. If that happens, we are here to assist you.



WHAT WE DO

1

Advocate for our Members

All appeals, balance bills, and Single Case Agreement's are initiated through NaviClaim. Upon request can provide in-depth reviews of our members accounts.

2

Fair Reimbursement

We apply the methodology to create a fair reimbursement to the provider and our members.

3

Member Reimbursements

We send your reimbursement request to your third-party administrator (Detego Health®) to process your request.

CONTACT US

866-837-1436

info@naviclaim.com

naviclaim.com

Single Case Agreements

FAQ



What is a Single Case Agreement?

A Single Case Agreement (SCA) is a contract between a healthcare provider (such as a doctor or hospital) and a health benefits company that is typically outside of the member's network. It allows the benefits company and provider to agree to cover a specific cost threshold for a patient's particular episode of treatment, even though the provider isn't part of their regular network.

SCAs are often used when a patient requires specialized care that isn't available within the network or when continuity of care is essential (e.g., if the patient has already been receiving care from the out-of-network provider).

Who can request a Single Case Agreement?

Providers, healthcare facilities, or members have to initiate all Single Case Agreements.

What happens when a Single Case Agreement is requested?

1. NaviClaim will gather the Provider's name, the contact person at the facility (including their phone number, email and fax), as well as the Member's name, ID number, and type of procedure.
2. NaviClaim will then send all of this information to FairPrice to begin the SCA process.
3. FairPrice will contact both, the member and the provider within one business day of receiving the requests.

Who is FairPrice?

FairPrice is a negotiating company contracted by NaviClaim and Detego Health® to help secure the best possible prices for our members' healthcare needs.

How long does a Single Case Agreement take?

A single case agreement can take up to 2 weeks.

How can I check my status?

Please contact **FairPrice** for status updates by phone: **(866) 740-8399** or email: **members@yourfairprice.com** for status updates.

Are Single Case Agreements guaranteed?

No, these agreements are negotiated case by case between the out-of-network provider and the health benefits company. The success of the negotiation depends on how willing the provider and/or healthcare facility are to reach an agreement, and this process can take time. In some cases, an agreement may not be successful. When this happens, FairPrice will suggest alternative facilities where they have successfully negotiated before.

Member Portal

- ✓ View EOB's & Claims
- ✓ Access Your Plan Documents
- ✓ Download Forms
- ✓ And More!



HOME PAGE

Find Quick Links on the Home Page for Easy Access!

- ✓ Find a Doctor or Lab with your Plan's Network
- ✓ Talk to a Doctor Virtually
- ✓ Contact Member Services

Find a Doctor or Lab

Talk to a Doctor Virtually

Contact Member Services

NAVIGATION BAR

My Information

- My Information
- My Dependents
- My Claims
- My Precertifications

More

- Plan Documents
 - Welcome Kit
 - ID Card Sample
- Find a Doctor
- Talk to a Doctor Virtually
- Contact Member Services
- Notices
 - COBRA Notice
 - WHCRA Notices
 - Medicaid and CHIP N...
 - Medicare Part D Noti...

Forms

- HIPAA Authorization
- Member Reimbursement ...
- Accident Form
- Employment Verification ...

HOW TO ACCESS AN EOB

EOBs

- From the Home Page's Navigation, click on **My Information**.
- Click on **My Dependents**. You and your dependents will be listed.
- Under **Member Information**, click on the correct name you want to view.
- Click on the **Member EOBs** tab to view EOBs.

Contact Record Type	Account Name	Member ID	Birthdate	Dep Type
Member	Sample Name			1

Member Information **Member EOBs** Related

Notes & Attachments

Scan the QR Code to log into your

DETEGO HEALTH[®]
MEMBER PORTAL

<https://detego1.my.site.com/memberexperience>

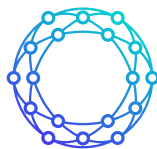


Request Access!

Contact our Care Guides Monday - Friday from 7:00AM - 5:00PM (CST).

866-815-6001

memberservices@detegohealth.com



Population Science
Management

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