MEDICAL

KELSEY UHC CHARTER

The Kelsey UHC Charter Plan is a partnership between UHC and Kelsey Seybold and utilizes ONLY Kelsey Seybold physicians and affiliates. This is an in-network only plan. If you are out of the area and have an emergency, you may seek emergency care. If you have a dependent that is outside the Kelsey Seybold network area, they will have access to the Choice Network for care with authorization from UHC. Please call 877.805.1970 to receive the authorization before seeking care. When enrolling in the Kelsey UHC Charter Plan in My Self-Serve, enter in provider ID number 00006773183010.

In-Network ONLY, Kelsey Seybold Network Providers

Benefit	Out-of-Pocket Expense
Deductible	$750 Individual $1,500 Family
Maximum Out-of-Pocket (Ind. Deductible, Medical and Rx Coinsurance)	$3,750 Individual $7,500 Family
DOCTOR'S SERVICES	
Primary Care Physician	$45 copay
Specialist	$55 copay
Virtual Visit	$0
PREVENTIVE SERVICES	
Preventive Services	Covered at 100% (deductible and copays do not apply)
ROUTINE LAB AND X-RAY	
In-Office Visit	20% after deductible
Outpatient Basis	20% after deductible
HOSPITAL	
Urgent Care	$75 copay
Advanced Imaging (MRI, CT, PET, etc)	20% after deductible
Emergency Room	$300 copay (waived if admitted); deductible and coinsurance apply
Inpatient Mental Health / Substance Abuse	20% after deductible
Inpatient Hospital	20% after deductible
Prescription Drug Plan	30% / 40% / 50% / Specialty 45% to a maximum of $75

Additional Programs Included In Your Medical Premium:

Virtual Visits, Maternity Support, Surgery Plus, Airrosti, Real Appeal

Note: For a complete description of benefits, see the Summary of Benefits and Coverage or Summary Plan Description.

https://flimp.live/FBISD-Employee-Resource-Center

Plan Rates*	24 Pay Period Contributions	19 Pay Period Contributions
Employee Only	$80.23	$101.34
Employee + Spouse	$277.40	$350.39
Employee + Child(ren)	$244.40	$308.71
Employee + Family	$369.56	$466.81

*Per pay period contributions without medical surcharge.

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