

Conroe ISD Medical Plan Options

Frequently Asked Questions about Network Choices

	Charter Kelsey-Seybold	Nexus ACO R Memorial Hermann	Choice Plus HDHP
Question?	Answer	Answer	Answer
Is this an Exclusive Provider Organization (EPO) or Accountable Care Organization (ACO), and what does it really mean?	This is an ACO Plan that uses a smaller network. The Charter Plan uses high-quality Kelsey-Seybold Clinic providers and facilities in and around the Houston area who work collaboratively with each other to provide personalized care.	This is an ACO Plan that uses a smaller network, with a tiered network option. Tier 1 uses Memorial Hermann and UT Physicians, a preferred network of quality providers who work together, to coordinate your care. Tier 2 uses providers in the broader Choice network, but you will generally pay more for their services.	This is a PPO plan that uses the broad network called Choice.
What if I have a pre-existing condition?	Your plan does not apply pre-existing condition requirements.	Your plan does not apply pre-existing condition requirements.	Your plan does not apply pre-existing condition requirements.
Do I need to select a Primary Care Physician (PCP)?	No, you do not need to select a PCP. You are encouraged to choose a Kelsey-Seybold PCP to coordinate your care, but you are not required to specify one.	Yes, you will need to select a PCP. You can change your PCP during the plan year through myuhc.com or by calling the phone number on the back of your ID card; new assignments take effect the first calendar day of the month following the date the change is made.	No, you do not need to select a PCP. You are encouraged to choose a PCP to coordinate your care, but you are not required to designate one.
Do I need a referral to see a specialist?	No, you do not need a referral to see a specialist as long as you stay within the Kelsey-Seybold network of physicians. If you go to a provider outside of the Kelsey-Seybold network, you must have a referral from a Kelsey-Seybold PCP. Otherwise, services are not covered. Mental health and substance abuse services are not provided by Kelsey-Seybold. You will need to seek services from network mental health providers found on myuhc.com (a referral is not needed).	Yes, you need a referral to see a specialist. You must use a Tier 1 or Tier 2 network specialist. The following direct access services do not require a referral: emergency care, urgent care, gynecological visits, obstetrical visits, annual screening mammograms, mental health visits, and routine eye exams.	No, you do not need a referral to see a specialist.
How do I know if my provider is part of the network?	Before you enroll, visit www.kelsey-seybold.com or call 713-442-0000 (help is available 24/7). After you enroll, register on myuhc.com and download the Health4Me mobile app to your phone. This will give you quick access to your network providers at any time.	Before you enroll, visit https://nexus1.welcometouhc.com/ . After you enroll, register on myuhc.com and download the Health4Me mobile app to your phone. This will give you quick access to your network providers at any time.	Before you enroll, visit https://choiceplus.welcometouhc.com/ . After you enroll, register on myuhc.com and download the Health4Me mobile app to your phone. This will give you quick access to your network providers at any time.
Who's responsibility is it to know if my provider is in the network?	It is your responsibility to confirm the provider from whom you are seeking treatment is in your plan's network.	It is your responsibility to confirm the provider from whom you are seeking treatment is in your plan's network.	It is your responsibility to confirm the provider from whom you are seeking treatment is in your plan's network.
How do I locate a Tier 1 Doctor?	N/A	Before you enroll, visit https://nexus1.welcometouhc.com/ . After you enroll, register on myuhc.com and download the Health4Me mobile app to your phone. This will give you quick access to your network providers at any time. Tier 1 providers are identified in the directory with a blue "Tier 1" circle. 	N/A
What do I do if my provider is not part of the network?	If your provider is not in the network, you will need to change providers for the services to be covered by this medical plan. If you choose to receive treatment from an out-of-network provider, you will pay 100% of the cost.	If your provider is not in the smaller Tier 1 or broader Tier 2 network, you will need to change providers for the services to be covered by this medical plan. If you choose to receive treatment from an out-of-network provider, you will pay 100% of the cost.	If your provider is not in the network, you may want to consider changing providers to gain the maximum benefit from this medical plan. If you choose to receive preventive care from an out-of-network provider, you will pay 100% of the cost.

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What if I have a college student living outside the service area?	If your college student lives outside the service area, he/she will only have access to Virtual Visits, urgent care, and emergency care. However, you have the option of enrolling your child in the Dependent Out of Area plan for no additional premium; the Dependent Out of Area plan benefits follow the Tier 2 copay, deductible, and coinsurance structure of the Nexus ACO R Memorial Hermann plan.	If your college student lives outside the Tier 2 Choice service area, he/she will only have access to Virtual Visits, urgent care, and emergency care. However, you have the option of enrolling your child in the Dependent Out of Area plan for no additional premium; the Dependent Out of Area plan benefits follow the Tier 2 copay, deductible, and coinsurance structure.	This plan uses a national network. Members may obtain services from any Choice network provider. Simply use myuhc.com or the Health4Me app to locate the closest network provider. Remember, your plan also covers Virtual Visits.
What will my ID card look like for this plan?	Your ID card will include your group number, member ID, and Kelsey-Seybold as your PCP. It will state at the bottom that a referral is required, but remember, if you visit any Kelsey-Seybold Clinic provider, a referral is not needed. However, if you seek services outside of the Kelsey-Seybold network, you will need a referral from a Kelsey-Seybold PCP.	Your ID card will include your group number, member ID, and the name of the PCP you selected. If you did not select a PCP, the UnitedHealthcare system will auto-assign one for you after 60 days. You can change your PCP any time at myuhc.com or by calling the phone number on the back of your ID card; new assignments take effect the first calendar day of the month following the date the change is made .	Your ID card will include your group number and member ID.
Are all major hospital systems included in the network?	All major hospitals are included in the network with the exception of MD Anderson. The Kelsey-Seybold Cancer Center is a nationally recognized cancer center with a QOPI certification. Should you have a rare form of cancer that cannot be treated by Kelsey-Seybold, you may be referred to MD Anderson.	Yes, all major hospitals are included in the network. The Tier 1 hospital is Memorial Hermann, so the lower deductible and coinsurance will apply. All other hospitals are Tier 2.	Yes, all major hospitals are included in the network. Use myuhc.com or the Health4Me app to locate contracted hospitals in your area.
What if I am in a true emergency, can I go to any hospital?	In the event of a true emergency, your claim will be processed at the in-network level, regardless of whether or not the emergency room is contracted with the network.	In the event of a true emergency, your claim will be processed at the in-network level, regardless of whether or not the emergency room is contracted with the network.	In the event of a true emergency, your claim will be processed at the in-network level, regardless of whether or not the emergency room is contracted with the network.
Will copays differ depending on the type of provider I see?	Yes, the copays for PCP and specialist visits are different.	Yes, the copays for PCP and specialist visits are different. You will also typically pay a lower copay for Tier 1 providers than for Tier 2 providers.	There are no copays on this plan. You will be responsible for paying the contracted rate for your provider visit until the deductible has been met, and then you will pay 30% coinsurance until the out-of-pocket maximum has been met.

