

INFORMATION FOR PPO MEMBERS



How the Preferred Provider Organization (PPO) Plan Works

As a PPO member, you have access to a wide variety of providers. Quartz contracts with HealthEOS and PHCS (MultiPlan), preferred provider organizations, to serve as the provider network. HealthEOS providers include hospitals, clinics and physicians throughout Wisconsin. PHCS (MultiPlan) includes providers throughout the United States. HealthEOS and PHCS (MultiPlan) providers can be found at [QuartzBenefits.com/findadoctor](https://www.QuartzBenefits.com/findadoctor). You have a choice to either access participating providers or providers outside the network. If you receive care from an in-network provider, the provider will submit the claim on your behalf. When you receive care from an out-of-network provider, you are responsible for submitting a claim form to HealthEOS or PHCS (MultiPlan) within three months from the date the services were received.

PPO Member Information

The PPO plan offers two different benefit levels –

In-network – You obtain services from providers in the HealthEOS or PHCS (MultiPlan) networks. You receive the highest level of coverage (in-network) when you see participating providers.

Out-of-network – You receive services from providers outside the HealthEOS and PHCS (MultiPlan) networks.

Your health care services are subject to medical necessity, all benefit maximums, policy limitations and exclusions and eligibility requirements. Coverage for services received from out-of-network providers may be limited to usual, customary and reasonable (UCR) charges. UCR does not apply to out-of-network emergency care.

Not all services are covered when they are performed by an out-of-network provider. Some services require Prior Authorization. Failure to receive the necessary Prior Authorization will result in a monetary penalty. Review your Policy documents for more information.